DLN: 93493298010658 OMB No 1545-0047 **Return of Organization Exempt From Income Tax** Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public ▶ Information about Form 990 and its instructions is at www.irs.gov/form990 Department of the Treasur Internal Revenue Service Inspection For the 2017 calendar year, or tax year beginning 07-01-2017 , and ending 06-30-2018 C Name of organization
UNITED ARTS OF CENTRAL FLORIDA INC D Employer identification number B Check if applicable ☐ Address change 59-1166446 ☐ Name change Doing business as ☐ Initial return ☐ Final return/terminated E Telephone number Number and street (or P O box if mail is not delivered to street address) Room/suite 2450 MAITLAND CENTER PKWAY STE 201 ☐ Amended return ☐ Application pending (407) 628-0333 City or town, state or province, country, and ZIP or foreign postal code MAITLAND, FL $\,$ 327514140 $\,$ **G** Gross receipts \$ 6,008,351 Name and address of principal officer **H(a)** Is this a group return for FLORA MARIA GARCIA ☐Yes ☑No subordinates? 2450 MAITLAND CENTER PKWAY STE 201 H(b) Are all subordinates MAITLAND, FL 327514140 ☐ Yes ☐No included? I Tax-exempt status 4947(a)(1) or □ 527 If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ Website: ► WWW UNITEDARTS CC **K** Form of organization lacksquare Corporation lacksquare Trust lacksquare Association lacksquare Other lacksquareL Year of formation 1965 M State of legal domicile FL Part I Summary 1 Briefly describe the organization's mission or most significant activities
OUR INVESTMENTS IN THE ARTS -- OVER 150 MILLION SINCE 1989 -- ENSURES THAT THE REGION'S ARTS AND CULTURAL OFFERINGS
ARE ACCESSIBLE AND AS VARIED AS THE PEOPLE THAT ENGAGE IN THEM UNITED ARTS SUPPORTS MORE THAN 60 ARTS, SCIENCE AND
HISTORY ORGANIZATIONS BY RAISING AND DISTRIBUTING FUNDS, SECURING AND FACILITATING CONTRACTS FOR SERVICES INCLUDING VITAL PRE-K TO 12TH GRADE EDUCATIONAL PROGRAMMING, AND BY PROVIDING TECHNICAL ASSISTANCE, ADVOCACY, ADMINISTRATIVE AND ADVISORY SERVICES IN FY18, UNITED ARTS PROVIDED MORE THAN 4 9 MILLION IN FUNDING THROUGH GRANTS, DESIGNATED GIVING AND CONTRACT SERVICE OPPORTUNITIES THROUGH THE 60+ ORGANIZATIONS WE FUND, CENTRAL FLORIDA RESIDENTS AND VISITORS ENJOYED MORE THAN 2,910,066 ART, SCIENCE AND HISTORY EXPERIENCES ARTS EDUCATION EXPERIENCES Activities & Governance FOR K-12 STUDENTS REPRESENT 33% OF THIS NUMBER AT 972,264 EXPERIENCES 2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets 3 41 Number of voting members of the governing body (Part VI, line 1a) . 41 4 4 Number of independent voting members of the governing body (Part VI, line 1b) . 20 5 Total number of individuals employed in calendar year 2017 (Part V, line 2a) 5 Total number of volunteers (estimate if necessary) 6 200 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a Net unrelated business taxable income from Form 990-T, line 34 **Prior Year Current Year** 5.695.498 5,072,244 8 Contributions and grants (Part VIII, line 1h) . **9** Program service revenue (Part VIII, line 2g) . 997,658 928,106 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 3,406 7,523 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 3,091 6,008,351 6,699,653 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines 1-3). 4,941,770 4,918,346 **14** Benefits paid to or for members (Part IX, column (A), line 4) . . 0 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 861,730 957,675 Expenses **16a** Professional fundraising fees (Part IX, column (A), line 11e) . . . 0 Total fundraising expenses (Part IX, column (D), line 25) ▶522,338 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 654,787 498,512 18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25) 6,458,287 6,374,533 Revenue less expenses Subtract line 18 from line 12 . 241,366 -366,182 d Balances Beginning of Current Year End of Year 7,818,915 7,086,427 20 Total assets (Part X, line 16) . 4,971,603 21 Total liabilities (Part X, line 26) . . . 5.338.622 2,114,824 22 Net assets or fund balances Subtract line 21 from line 20 . 2,480,293 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge 2018-10-24 Signature of officer Date Sign Here KATE WILSON CHAIR pe or print name and title

Paid	Print/Type preparer's name ANNE-MARIE BARRETT CPA	Preparer's signature ANNE-MARIE BARRETT CPA		Check 🗹 ıf self-employed	PTIN P00546302
Preparer	Firm's name TAX KNIGHT CONSULTIN	Firm's EIN ▶			
Use Only	Firm's address ► 5840 RED BUG LAKE RO	Phone no (407) 796-8450			
	WINTER SPRINGS, FL 3	27085011			
May the IRS discu	ss this return with the preparer show	n above? (see Instructions)			. ☑Yes ☐No

Form	990 (20	017)					Page 2
Par	t III	Statement	of Program Servic	e Accomplis	hments		
		Check If Sched	dule O contains a respo	nse or note to	any line in this Part III		🗹
1	Briefly		rganızatıon's mıssıon				
			RTS OF CENTRAL FLOR ESSIONALISM, EXCELL			NVESTING IN ART, SCIENCE AND	HISTORY OUR CORE
	Did th		undouboko ony siamision	nt n=0.0==== 0.0=	vices during the year wh	iah wara nat katad an	
2		e organization t ior Form 990 or		nt program ser	vices during the year wh	ich were not listed on	☐ Yes 🗹 No
			se new services on Sch	odulo O			Lifes Lino
3					changes in how it conduc	ete any program	
,	service	es?	se changes on Schedul		· · · · · ·	· · · · · · · · ·	☐ Yes ☑ No
4	Descri Section	be the organiza n 501(c)(3) and	tion's program service	accomplishmer	to report the amount of	argest program services, as meas grants and allocations to others,	
4a	(Code) (Expenses \$	2,586,786	including grants of \$	2,064,448) (Revenue \$)
	•	dıtıonal Data	, (,
4b	(Code) (Expenses \$	2,029,599	ıncludıng grants of \$	1,858,515) (Revenue \$	72,100)
	See Ad	ditional Data					
4c	(Code) (Expenses \$	1,031,864	ıncludıng grants of \$	918,887) (Revenue \$	454,656)
	See Ad	ditional Data					
	(Code) (Expenses \$	76,496	ıncludıng grants of \$	76,496) (Revenue \$	401,350)
	ORGAN PER YE. CENTE, 50 OR I VISITIN ORLAN AND HI COMPR PROVII ARE 20 SUBSCI 127,93 FOR CC HISTOF ARTS L COMMI	IZATIONS IN THE AR, PASS THROUG AL FLORIDA REGI: MORE QUARTERL NG NATIONAL ANI DOATPLAY COM - ISTORY AS WELL, IEHENSIVE SITE T DERS TO POST INI 10+ PIECES OF PU RIBERS) THAT DE 8 USERS WHO VI: DNTRIBUTIONS OF RY ORGANIZATIOI ENDS ITS EXPERT JNITY IN FY18, U ND CULTURAL AF	CENTRAL FLORIDA REGIC GH READERSHIP RATE OF ON AND TO THE INDIVIDU Y RACK CARDS - INFORMA D INTERNATIONAL TOURIS AN EVENTS WEBSITE SER AS DINING, NATURE ACTIV O GO TO WHEN YOU ARE I FORMATION TO SHARE LO BLIC ART AND 141 RESTA LIVERS INFORMATION ON SITE 156,631 TF 100 OR MORE, THE ARTS VS OVER 2,000 CARDS AR TISE IN GRANTS ADMINIST NITED ARTS MANAGED OV FAIRS CAPACITY BUILDIN	DN PROGRAMS IN 450,000 ANNUALL ALS WHO MAKE I ALS WITH INFORM VING THE SEVEN-VITIES, FARMERS LOOKING FOR SO CALLY AND NATIC URANTS LISTED COMING EVENTS IMES AND VIEWE CARD PROVIDES ED DISTRIBUTED A FRATION AND MAYER 43 MILLION I G PROGRAMS - U	CLUDE ORLANDO ARTS MAY LY) THAT ACTS AS A REFERE T HAPPEN THE MAGAZINE IS LILABLE AT THE VISITOR'S C ATION ON THE EXCITING AR COUNTY CENTRAL FLORIDA MARKETS AND PUBLIC ART METHING TO DO AND THE A DIVALLY IN FY18, OVER 650 OF LIN ADDITION, SITE VISITOR AND FREE AND DISCOUNTE D 313,779 PAGES OF ARTS DISCOUNTED ADMISSIONS LINUALLY GRANTS MANAGE AND AND FREE AND THE AGEN AGEMENT FOR OTHER AGEN N CULTURAL TOURISM AND	DES A SOURCE OF EARNED INCOME FO GAZINE - A BI-MONTHLY PUBLICATION NCE AND GUIDE TO ARTS AND CULTUING ALSO OFFERED AS A DONOR PREMILE INTERS AT THE ORLANDO INTERNATIVETS AND CULTURAL HAPPENINGS GOID REGION THE SITE PROVIDES INFORM THE SITE SERVES RESIDENTS AND VIRTS COMMUNITY AS A CENTRAL LOCA' ORGANIZATIONS POSTED 3,000+ EVE S CAN SUBSCRIBE TO A WEEKLY E-NE D EVENTS TO THEIR INBOX EACH WEE AND CULTURAL EVENTS UNITED ARTS AND CLASSES FOR 24+ PARTICIPATIN MENT SERVICES - A FEE-FOR-SERVIC CULTURAL FACILITIES GRANT AWARD CULTURAL FACILITIES GRANT AWARD CORKSHOPS AND CAPACITY BUILDING	I (SIX ISSUES PUBLISHED RAL HAPPENINGS IN THE JIM FOR CONTRIBUTIONS OF DNAL AIRPORT PROVIDE IG ON IN CENTRAL FLORIDA IATION ON ARTS, SCIENCE SITORS AS A TION FOR CULTURAL NTS ON THE SITE, THERE WSLETTER (7,600 EK IN FY18, THE SITE HAD ICARD - A DONOR PREMIUM G AREA ART, SCIENCE, AND E PROGRAM WHERE UNITED TO THE ARTS AND CULTURAL S FOR ORANGE COUNTY

Other program services (Describe in Schedule O) 4d (Expenses \$ 76,496 including grants of \$ 76,496) (Revenue \$ 401,350)

5,724,745 Total program service expenses ▶ 4e Form **990** (2017) or X as applicable

Checklist of Required Schedules

Page 3

No

Nο

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Nο

Nο

Nο

Nο

No

Nο

Nο

Nο

Nο

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Nο

No

Nο

Form **990** (2017)

Yes

Yes

Yes

Yes

Yes

Yes

11a

11b

11c

11d

11e

11f

12a

12b

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14a

14b

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Did the organization maintain collections of works of art, historical treasures, or other similar assets? 8 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 9 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, 10 permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🕏 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX,

Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right

Did the organization receive or hold a conservation easement, including easements to preserve open space,

the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 🛸 . . .

c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its

d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported

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

the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 🛸

If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🕏

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

b Was the organization included in consolidated, independent audited financial statements for the tax year?

b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments

valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

14a Did the organization maintain an office, employees, or agents outside of the United States? . . .

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)

foreign organization? If "Yes," complete Schedule F, Parts II and IV

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV

assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🛸

b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total

to provide advice on the distribution or investment of amounts in such funds or accounts?

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10?

12a Did the organization obtain separate, independent audited financial statements for the tax year?

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101111 330 (2	2017)		Page 4
Part IV	Checklist of Required Schedules (continued)		
		Yes	No

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

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 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX.

Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's

current and former officers, directors, trustees, key employees, and highest compensated employees, If "Yes,"

24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and

b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . .

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . .

that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?

officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2

is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and

Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?

Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member

Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part

An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . $\,$

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note.

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

instructions for applicable filing thresholds, conditions, and exceptions)

Nο

20a

20b

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24a

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24c

24d

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25b

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28a

28b

28c

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35a

35h

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Yes

Form **990** (2017)

Yes

Yes

Yes

Yes

Νo

Nο

Νo

Nο

orm !	99 (2017)					Page
Par	Statements Regarding Other IRS Filings and Tax Compliance					
	Check if Schedule O contains a response or note to any line in this Part	V .	<u> </u>	•		
			ا م ب		Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	16			
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b				
	Did the organization comply with backup withholding rules for reportable payments to vo (gambling) winnings to prize winners?	endors a	and reportable gaming	1 c		
	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by					
	this return	2a	20			
b	If at least one is reported on line 2a, did the organization file all required federal employ			2b	Yes	
3а	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (so Did the organization have unrelated business gross income of \$1,000 or more during the		*	3a		No
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation	•		3b		140
	At any time during the calendar year, did the organization have an interest in, or a signal					
	financial account in a foreign country (such as a bank account, securities account, or oth			4a		No
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and	d Financ	cial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during t	he tax y	/ear?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax	shelter	transaction?	5b	_	No
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?					
				5c		
	Does the organization have annual gross receipts that are normally greater than \$100,0 solicit any contributions that were not tax deductible as charitable contributions?	•	-	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that si not tax deductible?	uch conf	tributions or gifts were	6 b		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution a provided to the payor?	nd partl	ly for goods and services • •	7a		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provi	ded? .		7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property f Form 8282?	or which	n it was required to file	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a pers	onal be	nefit contract?			
_			_	7e		No
	Did the organization, during the year, pay premiums, directly or indirectly, on a persona			7f		No
g	If the organization received a contribution of qualified intellectual property, did the orgai required?	nization	file Form 8899 as	7g		No
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, di	d the or	ganization file a Form	- 9		
••	1098-C?			7h		No
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess busine	ss holdı	ngs at any time during			
	the year?			8		
9a	Did the sponsoring organization make any taxable distributions under section 4966? .			9 a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related	d persor	1 [?]	9b		
0	Section 501(c)(7) organizations. Enter					
а	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
1	Section 501(c)(12) organizations. Enter					
а	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b				
2 -	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 9	ما ما ۱۵	au of Form 10/12	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		ed of Form 1041,	124		
U	in Tes, enter the amount of tax-exempt interest received of accided during the year	12b				
3	Section 501(c)(29) qualified nonprofit health insurance issuers.	,				
а	Is the organization licensed to issue qualified health plans in more than one state? Note. additional information the organization must report on Schedule O	See th	e instructions for	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b				
	Enter the amount of reserves on hand	13c				
c						I
	Did the organization receive any payments for indoor tanning services during the tax yea	ar? .		14a		No

OHIII				Page 0
Par	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions	" respo	nse to li	nes
	Check if Schedule O contains a response or note to any line in this Part VI			✓
Se	ection A. Governing Body and Management			
			Yes	No
1a	1 Enter the number of voting members of the governing body at the end of the tax year 41			
	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 in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 41			
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		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6		No
	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more	H		
	members of the governing body?	7a		No
	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
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 in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal Revenue	e Code	a.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
10a	Did the organization have local chapters, branches, or affiliates?			
10a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	10a		
10a b 11a	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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the	10a 10b	Yes	
10a b 11a 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10a 10b	Yes	
10a b 11a b 12a	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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990	10a 10b 11a	Yes	
10a b 11a b 12a 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to	10a 10b 11a	Yes Yes	
10a b 11a b 12a 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in	10a 10b 11a 12a 12b	Yes Yes Yes	
10a b 11a b 12a 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	10a 10b 11a 12a 12b	Yes Yes Yes Yes Yes	
10a b 11a b 12a b c	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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	
10a b 11a b 12a b c 13 14	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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? 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	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	
10a b 11a b 12a b c 13 14	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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? 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 persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	
10a b 11a b 12a b c 13 14	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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? 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 persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes Yes	
10a b 11a b 12a b c 13 14 15 a 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? 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 persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes Yes	
10a b 11a b 12a b c 13 14 15 a 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule 0 the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? 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 persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b 13 14 15 a 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? 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 persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	10a 10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15 a 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? 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 persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt	10a 10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15 a 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? 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 persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	10a 10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes Yes Yes	No

policy, and financial statements available to the public during the tax year

20

State the name, address, and telephone number of the person who possesses the organization's books and records

JULIANA STEELE 2450 MAITLAND CENTER PKWY STE 201 MAITLAND, FL 32751 (407) 628-0333

orm 990 (2	017)										Page 7
Part VII	Compensation of Officer and Independent Contra		Truste	es,	Key	En	ıploy	ees	, Highest Comp	ensated Employ	rees,
	Check if Schedule O contains a	response or no	te to an	y line	ın t	his	Part V	Π.			<u> </u>
Section	A. Officers, Directors, Tru	stees, Key E	mploy	ees	, an	d H	lighe	st C	Compensated En	nployees	
ear	e this table for all persons require										
of compensa	of the organization's current off tion Enter -0- in columns (D), (E), and (F) if no	compe	nsatı	on v	vas į	paid			-	
	of the organization's current key		•								
vho received organization	organization's five current high d reportable compensation (Box and any related organizations	5 of Form W-2	and/or E	Зох 7	of F	orm	1099	-MIS	SC) of more than \$1	00,000 from the	
of reportable	of the organization's former office compensation from the organiz	ation and any r	elated o	rganı	zatı	ons	-				
List all o organization	of the organization's former dire , more than \$10,000 of reportab	ectors or trust le compensation	ees that n from t	t rece the or	gan	l, ın ızatı	the ca	paci any	ty as a former direc v related organization	tor or trustee of the ons	2
	in the following order individua d employees, and former such p		ectors,	ınstıtı	utior	nal t	rustee	s, of	ficers, key employe	es, highest	
🗌 Check tl	his box if neither the organizatio	n nor any relate	ed organ	nzatio	on co	omp	ensate	d ar	ny current officer, di	rector, or trustee	
	(A) Name and Title		ne b	ox, ι n of or/t	t che unles ficer rust	s pers and a ee)	on	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and	
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	,	MISC)	related organizations
See Additiona	al Data Table										

Form 990 (2017) Page 8 Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

	(A) Name and Title	(B) Average hours per week (list any hours for related	Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)		(F) Estimated amount of other compensation from the organization and		
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-11136)	2) 1000 MISC)		relate organiza	ed	
See	Additional Data Table				\Box									
-					\Box									
					\Box									
					Г									
					\Box									
					Г									
	Sub-Total	ort VII. Soction					>							
	Total from continuation sheets to Pa Total (add lines 1b and 1c)			<u> </u>	·		>		296,466				30,484	
2	Total number of individuals (including of reportable compensation from the	but not limited	l to thos			bove	e) who	rece	eived more than \$10	00,000				
												Yes	No	
3	Did the organization list any former of line 1a? <i>If "Yes," complete Schedule 3</i>	•			•				•	employee on	3		No	
4	For any individual listed on line 1a, is organization and related organization individual									the	4	Yes		
5	Did any person listed on line 1a receiv services rendered to the organization								-		5	103	No No	
Se	ection B. Independent Contract	ors												
1	Complete this table for your five high- from the organization. Report comper										ensa	ation		
		(A)							T	(B)		(C		

Se	ection B. Independent Contractors			
1	Complete this table for your five highest compensated independent contractors that received from the organization. Report compensation for the calendar year ending with or within the contractors.		ipensa	ation
	(A)	/p\		10

S	ection B. Independent Contractors		
1	Complete this table for your five highest compensated independent contractors that received from the organization. Report compensation for the calendar year ending with or within the contractors.		isation
	(A) Name and business address	(B) Description of services	(C) Compensation

Name and business address	Description of services	Compensation

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

compensation from the organization > Form **990** (2017)

Part		(2017) Statement of	Revenue							Page 9
		Check if Schedul	e O contains	a respo	onse or note to any	(A) Total revenue	(B) Related or exempt function		(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
	1a	Federated campaigi	ns	1a			revenue			512-514
ints Ints	ŀ	b Membership dues		1b						
613 110		Fundraising events		1c						
fš. P	,	d Related organizatio	ns	1d						
<u>≅</u> ≅		e Government grants (co	ontributions)	1e	2,261,620					
tions, er Sin	f	All other contributions, and similar amounts no above	gıfts, grants, ot ıncluded	1f	2,810,624					
Contributions, Giffs, Grants and Other Similar Amounts	ç	Noncash contribution in lines 1a-1f \$	ons included	46,6	5 <u>53</u>					
<u>ප</u>	h	Total.Add lines 1a-1	f		<u> </u>	5,072,244				
Пе					Business	Code				
Program Service Revenue	2a	CONTRACTS & SERVICE	S			92	28,106	928,106		
a <u>¥</u>	b									
<u>ح</u>	C			_						
₹	d									
ran	e f	All other program se	rvice revenue							
700					9	28,106				
_		Total.Add lines 2a-2f Investment income (ir			unterest and other	1				1
		imilar amounts) .			interest, and other	7,523	3 7	,523		
		Income from investme								
	5 F	Royalties				1				
	62	Gross rents	(ı) Rea	ıl	(II) Personal	-				
	Va	Gloss lelits								
	b	Less rental expenses								
	c	Rental income or				-				
		(loss)				Ţ				
	d	Net rental income of			<u> </u>					
	7a	Gross amount from sales of assets other	(ı) Securi	ties	(II) Other					
	b	Less cost or other basis and sales expenses								
		Gain or (loss) Net gain or (loss)			•	<u> </u>				
		Gross income from for (not including \$	undraising ev	ents of						
Other Revenue	h	contributions reporte See Part IV, line 18 Less direct expenses		. а						
<u>.</u>		Net income or (loss)				J				
Oth	9a	Gross income from g See Part IV, line 19								
		Less direct expenses Net income or (loss)		a b						
		Gross sales of invent		activit	ies •					
		returns and allowand	es	a						
		Less cost of goods s		Ь		J				
-	С	Net income or (loss) Miscellaneous		finvent	Business Code					
-	11	aOTHER REVENUE	Revenue		999999	478	3	478		
	b	,								
	c	:								
		All other revenue .								
		• Total. Add lines 11a			•	478	3			
_	12	Total revenue. See	Instructions			6,008,351	936	,107		
										Form 000 (2017)

Form 990 (2017)				Page 10
Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all co	olumns All other orga	anizations must comp	lete column (A)	
Check if Schedule O contains a response or note to any	line in this Part IX			🗆
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	4,897,441	4,897,441		
2 Grants and other assistance to domestic individuals See Part IV, line 22	20,905	20,905		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16.				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	283,187	107,953	70,122	105,112
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	473,880	282,289	13,254	178,337
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	30,056	15,629	3,306	11,121
9 Other employee benefits	115,182	59,895	12,670	42,617
10 Payroll taxes	55,370	28,792	6,091	20,487
11 Fees for services (non-employees)				
a Management				
b Legal				
c Accounting	16,951	9,323	1,017	6,611
d Lobbying	2,000	2,000		
e Professional fundraising services See Part IV, line 17				
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	48,230	47,710	12	508
12 Advertising and promotion	97,427	71,942		25,485
13 Office expenses	14,630	8,516	2,193	3,921
14 Information technology	47,078	18,211	1,280	27,587
15 Royalties				
16 Occupancy	93,890	51,640	5,633	36,617
17 Travel	13,102	7,126	846	5,130
18 Payments of travel or entertainment expenses for any federal, state, or local public officials •	303	178	125	
19 Conferences, conventions, and meetings	25,487	15,108		10,379
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	16,626	9,144	998	6,484
23 Insurance	7,506	4,733	370	2,403
24 Other expenses Itemize expenses not covered above (List				

54,000

32,540

20,576

8,166

6,374,533

54,000

5,212

2,419

4,579

5,724,745

18,264

18,157

3,118

522,338

Form **990** (2017)

9,064

469

127,450

miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e

25 Total functional expenses. Add lines 1 through 24e 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 ▶ ☐ If following SOP 98-2 (ASC 958-720)

expenses on Schedule O)

c PRINTING & MATERIALS

a MAGAZINE PRINTING

b MISCELLANEOUS

e All other expenses

d POSTAGE

11

12

13

14

15

16

17

18

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21

23

24

25

26

27

28

29

31

32

33

34

Liabilities 22

Fund Balances

Assets or 30

Net

Page **11**

300

27,489

9,156

26.029

3.563.958

7.086,427

958,572

334,534

120,992

3,557,505

4,971,603

881.051

1.233.773

2,114,824

7.086.427

Form **990** (2017)

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

10a Land, buildings, and equipment cost or other

Investments—publicly traded securities .

Investments—other securities See Part IV, line 11 .

Total assets. Add lines 1 through 15 (must equal line 34) .

Escrow or custodial account liability Complete Part IV of Schedule D

key employees, highest compensated employees, and disqualified

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties

complete lines 27 through 29, and lines 33 and 34.

Organizations that do not follow SFAS 117 (ASC 958), check here

and complete lines 30 through 34.

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Loans and other payables to current and former officers, directors, trustees,

Other liabilities (including federal income tax, payables to related third parties,

Organizations that follow SFAS 117 (ASC 958), check here 🕨 🗹 and

Investments-program-related See Part IV, line 11

basis Complete Part VI of Schedule D

Intangible assets

Other assets See Part IV, line 11 .

Accounts payable and accrued expenses

Tax-exempt bond liabilities . . .

persons Complete Part II of Schedule L .

and other liabilities not included on lines 17-24)

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

Total liabilities. Add lines 17 through 25 .

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Unrestricted net assets

b Less accumulated depreciation

Grants payable . .

Deferred revenue .

	(A) Beginning of year		End of year
Cash-non-interest-bearing	300	1	
Savings and temporary cash investments	2.902.484	2	2.5

 _				
2	Savings and temporary cash investments	2,902,484	2	2,982,601
3	Pledges and grants receivable, net	1,023,097	3	476,894
4	Accounts receivable, net		4	
5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part		5	

129,811

120.655

25.782

25 272

3,801,943

7,818,915

982.015

439.847

132,059

3.784.701

5,338,622

813.916

1.666.377

2,480,293

7.818.915

10c

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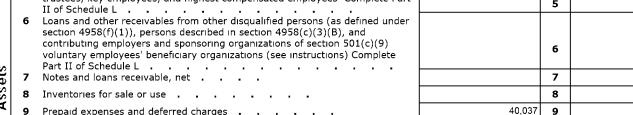
31

32

33

34

	4	Accounts receivable, net	4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	5	
	6	Loans and other receivables from other disqualified persons (as defined under section $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and contributing employers and sponsoring organizations of section $501(c)(9)$ voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L	6	
ets	7	Notes and loans receivable, net	7	
2 A I				



10a

10b

☐ Both consolidated and separate basis

☐ Both consolidated and separate basis

2b

2c

3a

3b

Yes

Yes

No

Form 990 (2017)

separate basis, consolidated basis, or both

Consolidated basis

Consolidated basis

If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis,

If the organization changed either its oversight process or selection process during the tax year, explain in 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

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

c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

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

b Were the organization's financial statements audited by an independent accountant?

☐ Separate basis

consolidated basis, or both

Separate basis

Audit Act and OMB Circular A-133?

Additional Data

Software ID:

Software Version:

EIN: 59-1166446

Name: UNITED ARTS OF CENTRAL FLORIDA INC

Form 990 (2017)

Form 990, Part III, Line 4a:

FUNDRAISING - UNITED ARTS OPERATES IN A FISCALLY CONSERVATIVE MANNER AND PREPARES ITS BUDGET ON A FORWARD-FUNDING MODEL. MEANING FUNDS RAISED

DURING THE ANNUAL CAMPAIGN IN ONE FISCAL YEAR ARE RESTRICTED TO FUND GRANTS AND OPERATIONS IN THE FOLLOWING FISCAL YEAR THIS MAY RESULT IN NET INCOME OR A DEFICIT DEPENDING ON THE ITMING OF WHEN FUNDS ARE RAISED AND EXPENDED THE FORWARD-FUNDING MODEL ENSURES THE AGENCY HAS THE COMMITTED FUNDS ON HAND EACH YEAR TO FUND THE GRANTS AND OPERATIONS PROPOSED IN ITS ANNUAL BUDGET UNITED ARTS ACTIVELY SEEKS FUNDING OPPORTUNITIES FOR ARTS AND CULTURAL ORGANIZATIONS THROUGH ANNUAL FUNDRAISING CAMPAIGNS UNITED ARTS COORDINATES THE LARGEST COLLABORATIVE FUNDRAISING CAMPAIGN IN SUPPORT OF ARTS AND CULTURE IN CENTRAL FLORIDA FOURTEEN OF THE REGION'S CORNERSTONE ARTS AND CULTURAL ORGANIZATIONS ACTIVELY PARTICIPATE IN RAISING UNRESTRICTED OPERATING SUPPORT FOR THE ARTS COMMUNITY DONATIONS DESIGNATED TO ONE OR MORE OF THESE COLLABORATING ARTS AND CULTURAL ORGANIZATIONS DURING THE COLLABORATIVE CAMPAIGN, WHICH RUNS FROM FEBRUARY 1 - APRIL 30 ANNUALLY, ARE MATCHED AT 15% BY UNITED ARTS DONORS ALSO HAVE THE OPTION TO WRITE IN THE NAME OF ANY NONPROFIT ARTS AND CULTURAL ORGANIZATION THEY WISH AND INCLUDE

THEM IN THEIR CAMPAIGN GIFT IN FY18, UNITED ARTS RAISED OVER 6 MILLION IN SUPPORT OF ARTS AND CULTURE, 2 0 MILLION WAS DESIGNATED DIRECTLY TO REGIONAL ARTS, SCIENCE AND HISTORY ORGANIZATIONS OVER 2 0 MILLION IN FUNDING WAS RAISED DURING THE COLLABORATIVE CAMPAIGN AND AN ADDITIONAL

1 3 MILLION WAS RAISED THROUGH CONTRACTS FOR SERVICES, SPONSORSHIPS AND EVENTS, GRANTS AND OTHER GIFTS AND IN-KIND DONATIONS

Form 990, Part III, Line 4b:

SERVICE OPPORTUNITIES. UNITED ARTS' TWO CORE GRANT PROGRAMS THAT SUPPORT ARTS ORGANIZATIONS AND INDIVIDUAL ARTISTS THROUGHOUT THE FOUR-COUNTY REGION ARE 1) OPERATING SUPPORT GRANTS (OSG) PROVIDE STABILIZING OPERATING SUPPORT FOR THE REGION'S ARTS AND CULTURAL ORGANIZATIONS WITH FULL SEASONS OF PROGRAMMING AND OPERATING BUDGETS IN EXCESS OF 25,000 IN FY18, 1,480,000 IN FUNDING WAS AWARDED TO 37 ORGANIZATIONS 2) MINI GRANTS - THIS PROGRAM PROVIDES MUCH NEEDED FUNDING IN SUPPORT OF THE NUMEROUS FAIRS AND FESTIVALS THAT CELEBRATE AND HONOR THE REGION'S DIVERSITY IN FY18. UNITED ARTS AWARDED 30.000 IN MINI GRANT FUNDING TO 22 NONPROFIT ARTS AND CULTURAL ORGANIZATIONS WITH BUDGETS OF 25.000 AND

INVESTING IN THE COMMUNITY - UNITED ARTS INVESTS DIRECTLY IN THE ARTS COMMUNITY THROUGH GRANTS, COLLABORATIVE FUNDRAISING AND CONTRACT

LESS OR DID NOT PROVIDE A FULL YEAR OF PROGRAMMING ADDITIONAL GRANT OPPORTUNITIES INCLUDE 1) ARTS LEARNING GRANTS - FUNDED THROUGH ORANGE COUNTY, THIS PROGRAM SUPPORTS ARTS EDUCATION PROGRAMMING FOR INDIVIDUALS OF ALL AGES AS WELL AS TARGETS UNDERSERVED POPULATIONS IN FY18.

UNITED ARTS AWARDED 22.100 IN FUNDING TO 15 ORGANIZATIONS FOR NON-SCHOOL BASED ARTS EDUCATION 2) DIVERSE PROGRAMMING GRANTS - FUNDED THROUGH A GRANT FROM DUKE ENERGY. THIS PROGRAM PROVIDES GRANTS FOR ARTS AND CULTURAL PROGRAMMING THAT WILL APPEAL TO A WIDE RANGE OF AUDIENCES AND BE REFLECTIVE OF THE RACIALLY/ETHNICALLY DIVERSE COMMUNITIES WE LIVE IN IN FY18. UNITED ARTS PROVIDED 31.000 IN FUNDING TO 10 ORGANIZATIONS COMBINED WITH OTHER CAPACITY BUILDING AND INCENTIVE GRANT PROGRAMS, UNITED ARTS AWARDED OVER 1 8 MILLION IN GRANT FUNDS IN FY18 COMBINED WITH CONTRACT SERVICE OPPORTUNITIES, DESIGNATED GIVING AND MATCHING FUNDS, UNITED ARTS INVESTED OVER 4 9 MILLION INTO THE ARTS AND CULTURAL COMMUNITY IN FY18

Form 990, Part III, Line 4c: ARTS EDUCATION PROGRAMMING - STATISTICS SHOW THAT CHILDREN WHO HAVE ARTS CREDITS IN THEIR CURRICULUM HAVE IMPROVED PERFORMANCE. ARE MORE

THEN GO ON TO PAID POSITIONS IN THE REGIONS CREATIVE SECTOR

ENGAGEMENT IN THE LEARNING PROCESS AND FEWER DISCIPLINE PROBLEMS THIS APPLIES TO ALL STUDENTS REGARDLESS OF ETHNICITY AND SOCIO-ECONOMIC BACKGROUND ARTS EXPERIENCES IN OUR SCHOOLS ARE A VITAL COMPONENT OF THE EDUCATION PROCESS. UNITED ARTS FACILITATES CURRICULUM-BASED K-12 ARTS EDUCATION PROGRAMMING IN THE COMMUNITY THROUGH CONTACTED SERVICES WITH LOCAL SCHOOL DISTRICTS AND OUR GRANTEE ORGANIZATIONS. UNITED

LIKELY TO STAY IN SCHOOL AND ARE MORE LIKELY TO GRADUATE ENGAGING WITH THE ARTS ENCOURAGES CRITICAL THINKING, RESULTING IN MORE STUDENT

ARTS' ARTS EDUCATION INITIATIVES EXPOSE STUDENTS TO MUSIC. THEATER, DANCE, FILM, BALLET, AND MUSEUMS OF ART, HISTORY AND SCIENCE, IN FY18, 74 DIVERSE CULTURAL ORGANIZATIONS - ALL OF THEM FUNDED BY UNITED ARTS - PROVIDED 972,264 CURRICULUM-BASED ARTS EDUCATION EXPERIENCES FOR

STUDENTS IN GRADES K-12 UNITED ARTS LARGEST EDUCATION CONTRACT IS WITH ORANGE COUNTY PUBLIC SCHOOLS (OCPS) TO PROVIDE CURRICULUM-BASED ARTS EDUCATION SERVICES TO OCPS STUDENTS IN K-12 (CONTRACT AMOUNT - 454,656) IN FY18, THIS CONTRACT FACILITATED 97.878 K-12 CURRICULUM-BASED ARTS EDUCATION EXPERIENCES UNITED ARTS ACTIVELY SEEKS GRANT OPPORTUNITIES TO INCREASE THE BREADTH OF ARTS EDUCATION EXPERIENCES EACH STUDENT WILL HAVE AND THE NUMBER OF STUDENTS THAT ARE SERVED EACH YEAR IN FY18. UNITED ARTS RECEIVED 80,000 IN GRANTS SPECIFICALLY FOR ARTS EDUCATION THROUGHOUT LAKE, ORANGE, OSCEOLA AND SEMINOLE COUNTIES, RESULTING IN AN ADDITIONAL 47,707 ARTS EDUCATION EXPERIENCES THESE STUDENT WOULD NOT

OTHERWISE HAVE HAD ACCESS TO IN FY18, UNITED ARTS COMPLETED THE SECOND YEAR OF A TWO-YEAR CREATIVE INDUSTRIES CURRICULUM DEVELOPMENT PROGRAM FUNDED THROUGH A GRANT FROM THE JP MORGAN CHASE FOUNDATION. THROUGH A COLLABORATION WITH UNITED ARTS, VALENCIA COLLEGE, AND THE SCHOOL DISTRICT OF OSCEOLA COUNTY, THIS FUNDING WILL ALLOW A PLANNED STEM (SCIENCE, TECHNOLOGY, ENGINEERING, AND MATHEMATICS) HIGH SCHOOL TO ADD ARTS TO THE CURRICULUM, MAKING IT A STEAM SCHOOL (OPENING FALL OF 2018) OVER FIVE HUNDRED STUDENTS HAVE REGISTERED FOR THE FIRST YEAR OF

THE PROGRAM. THIS IS UNITED ARTS' SECOND GRANT OF ITS KIND FROM THE JPMORGAN CHASE FOUNDATION. WITH THE FIRST FUNDING THE CREATION OF A PILOT CREATIVE INDUSTRY BACK-OF-HOUSE SKILLS PROGRAM AT EVANS HIGH SCHOOL (OCPS) EVANS IS NOW AN ARTS MAGNATE SCHOOL IN THESE PROGRAMS.

PARTICIPATING STUDENTS CAN GRADUATE HIGH SCHOOL WITH EITHER TECHNICAL SKILLS CERTIFICATIONS OR CONTINUE ON FOR A TWO-YEAR OR FOUR-YEAR DEGREE STUDENTS ENROLLED IN THE PROGRAM HAVE OPPORTUNITIES TO INTERN WITH ART, SCIENCE AND HISTORY ORGANIZATIONS AS WELL AS LOCAL THEME PARKS, CONVENTION CENTERS AND OTHER CREATIVE INDUSTRY ENVIRONMENTS AND WORK WITH CREATIVES IN THEIR FIELDS TO GET FIRSTHAND JOB EXPERIENCE,

(A) (D) (E) (B) (C) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless compensation hours per compensation amount of other person is both an officer week (list from the from related compensation and a director/trustee) any hours organization organizations from the

1	any nours	and a director/trustee)					·	organization	organizations	from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee		key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
FLORA MARIA GARCIA PRESIDENT &	60 00	x		×				199,631	0	17,798	
KATE WILSON CHAIR	1 00	х		x				0	0	0	
STEPHANIE GHERTNER VICE CHAIR	1 00	х		х				0	0	0	
JENNIFER QUIGLEY SECRETARY	1 00	х		x				0	0	0	
DANIEL O'KEEFE TREASURER	1 00	x		×				0	0	0	
JEAN GRONO-NOWRY DIRECTOR, EX	1 00	х						0	0	0	

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JENNIFER QUIGLEY
SECRETARY
DANIEL O'KEEFE
TREASURER

BONNIE HUBBARD

CECELIA BONIFAY

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DEBBIE FAHMIE

.......

DANIELLE SABA HOLLANDER

(A) (D) (E) (B) (C) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average amount of other than one box, unless compensation hours per compensation person is both an officer week (list from the from related compensation and a director/trustee) any hours organization organizations from the

	ally flours	and a director/trustee)						Organization	organizations	moniture	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
DIANE O'DELL DIRECTOR	1 00	×						0	0	0	
DR BARBARA JENKINS DIRECTOR	1 00	x						0	0	0	
DR RICHARD SANDLER DIRECTOR	1 00	x						0	0	0	
DR STACEY JOHNSON DIRECTOR	1 00	х						0	0	0	

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DR RICHARD SANDLER
DIRECTOR
DR STACEY JOHNSON
DIRECTOR
EDWARD HENSLEY

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

FRANK IOPPOLO

HONORABLE BUDDY DYER

HONORABLE CHRISTINE MOORE

HONORABLE BETSY VANDERLEY

HONORABLE LEE CONSTANTINE

(A) (D) (B) (C) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless compensation amount of other hours per compensation person is both an officer week (list from the from related compensation

	any hours	and	a dır	ecto	r/tr	ustee))	organization	organizations	from the	
	for related organizations below dotted line)		Institutional Trustee	Officer		Highest compensated	Former	(W- 2/1099- MISC)	(Ŵ- 2/1099- MISC)	organization and related organizations	
HOWARD BRITT DIRECTOR	1 00	X						0	0	0	
JOSEPH TERRY DIRECTOR	1 00	х						0	0	0	
KAREN SHEEHAN DIRECTOR	1 00	х						0	0	0	
LARRY MEADOR DIRECTOR	1 00	х						0	0	0	

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KAREN SHEEHAN
DIRECTOR
LARRY MEADOR
DIRECTOR
LESLIE MCCLELLAND

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

RIZWAN ZAMAN

SHARRON ARROYO

MARK JONES

PAUL LARTONOIX

PENELOPE PEREZ-KELLEY

(A) (D) (E) (B) (C) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless compensation hours per compensation amount of other person is both an officer week (list from the from related compensation from the

	any hours		a dır	recto		ustee))	organization	organizations	from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee		key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
SUZANNE GILBERT DIRECTOR	1 00	х						0	0	0	
TERRY OLSON DIRECTOR, EX	1 00	x						0	0	0	
S BRENDAN LYNCH DIRECTOR	1 00	х						0	0	0	
WILSON LOPEZ DIRECTOR	1 00	x						0	0	0	

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WILSON LOPEZ
DIRECTOR
BETTINA BUCKLEY
DIRECTOR
BRYAN KNIBBS
DIRECTOR

HONORABLE BELVIN PERRY

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

MALIKA HARRISON

MARC MCMURRIN

NARIA RUIZ-HAYS

and Independent Contractors (A) Name and Title

SANT HATMAN-MARRERO

DIRECTOR

DIRECTOR

SURESH GUPTA

JULIANA STEELE

VP OF ADMIN

nours per week (list any hours for related organizations below dotted line)
1 00
1 00
60 00

................

(B)

Average

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

Institutio

(C)

(D)

Reportable

compensation

from the

organization

(W- 2/1099-

MISC)

96,835

(E)

Reportable

compensation

from related

organizations

(W- 2/1099-

MISC)

(F)

Estimated

amount of other

compensation

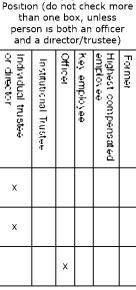
from the

organization and

related

organizations

12,686



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efil	e GR/	APHIC pri	nt - DO NO	T PROCESS	As Filed Data -			DLN: 9:	3493298010658
SC	H ED m 99	ULE A		Public (Charity Staturganization is a sect	ion 501(c)(3) o mpt charitable	organization or trust.	ort	2017
Depar	lment of	f the Treasury	▶ Infe	ormation abou	► Attach to Form it Schedule A (Form www.irs.q			ections is at	Open to Public Inspection
Nam	e of th	he organiza S OF CENTRAL						Employer identific	ation number
		_						59-1166446	
	rt I rganiz				us (All organization : it is (For lines 1 thro			see instructions.	
1			•		sociation of churches	5 ,	,	(A)(i).	
2		•		·	1)(A)(ii). (Attach Sch				
3					vice organization desc	•	• •		
4		·	•	•	ed in conjunction with			•	nter the hospital's
-	Ш		and state _		ed in conjunction with	- Trospital acsert	Dea III Section .		
5		(b)(1)(A)	(iv). (Comple	ete Part II)	t of a college or unive				ped in section 170
6		•	·	_	governmental unit de				
7	✓	_		mally receives (vi). (Complete	a substantial part of it Part II)	s support from a	governmental u	init or from the genera	al public described in
8					170(b)(1)(A)(vi)	(Complete Part I	I)		
9					escribed in 170(b)(1) ee instructions Enter				ege or university or a
10		from activit	ies related to income and	its exempt fur unrelated busin	(1) more than 331/39 ctions—subject to cer ess taxable income (lemplete Part III)	taın exceptions, a	and (2) no more	than 331/3% of its su	
11		An organiza	ition organize	ed and operated	l exclusively to test fo	r public safety S	ee section 509	(a)(4).	
12		more public	ly supported:	organizations of	dexclusively for the be described in section 5 the type of supporting	09(a)(1) or se d	ction 509(a)(2). See section 509(a	
а		Type I. A so	supporting or n(s) the pow	ganızatıon oper	ated, supervised, or componit or elect a major	ontrolled by its s	upported organi	zation(s), typically by	
b		Type II. A manageme	supporting on t of the sup	rganization sup porting organiza	ervised or controlled i				
c		Type III f	unctionally		and C. supporting organizatio ons) You must com				ted with, its
d		Type III n functionally	on-function integrated	ally integrate The organizatio	d. A supporting organi n generally must satis t IV, Sections A and	ization operated fy a distribution i	ın connection wi requirement and	th its supported orgar	
e		Check this	box if the org	anızatıon recei	ved a written determir	nation from the II		pe I, Type II, Type II	[functionally
f	Ento			ion-functionally Lorganizations	integrated supporting	organization			
g				-	ipported organization(e)		_	
		Name of support	orted	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organic forms of the control of the con		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
						Yes	No		
T - ·									
Tota		work Body	tion Act No.	ice, see the I	estructions for	Cat No 11285	<u> </u>	 Schedule A (Form 9	

organization

instructions

supported organization

▶□

Schedule A (Form 990 or 990-EZ) 2017

Page 2

III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (h) 2014 (a) 2013 (c) 2015 (d) 2016 (a) 2017 (f) Total

	(or fiscal year beginning in) ▶	(a) 2013	(0) 2014	(0) 2013	(u) 2010	(6) 2017	(1) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant")	5,452,151	5,193,117	5,241,308	5,695,498	5,072,244	26,654,318
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	5,452,151	5,193,117	5,241,308	5,695,498	5,072,244	26,654,318
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						

_	I Otali. Add lilles I till odgil 3	3,432,131	3,133,117	3,241,300	5,055,450	3,072,244	20,034,310
5	The portion of total contributions by						
	each person (other than a						
	governmental unit or publicly						
	supported organization) included on						
	line 1 that exceeds 2% of the						
	amount shown on line 11, column (f)						
6	Public support. Subtract line 5						26,654,318
	from line 4						20,054,510
:	Section B. Total Support						
	Calendar year	(a)2013	(b) 2014	(c)2015	(d)2016	(e) 2017	(f)Total
	(or fiscal year beginning in) ▶	(a)2013	(0)2014	(6)2013	(d)2010	(e)2017	(T)TOtal
7	Amounts from line 4	5,452,151	5,193,117	5,241,308	5,695,498	5,072,244	26,654,318
	Gross income from interest						

	amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						26,654,318
9	Section B. Total Support						
	Calendar year (or fiscal year beginning in) ▶	(a)2013	(b) 2014	(c)2015	(d) 2016	(e) 2017	(f)Total
7	Amounts from line 4	5,452,151	5,193,117	5,241,308	5,695,498	5,072,244	26,654,318
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	2,422	2,123	3,857	2,256	7,523	18,181
9	Net income from unrelated business						

- activities, whether or not the business is regularly carried on Other income Do not include gain 10 or loss from the sale of capital 300,184 assets (Explain in Part VI)
 - 300,184 Total support. Add lines 7 through 26,972,683 Gross receipts from related activities, etc. (see instructions) 12 1,939,319
- 11 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,

 - Section C. Computation of Public Support Percentage Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f)) 14 98 820 %
 - 98 830 %
- 15 Public support percentage for 2016 Schedule A, Part II, line 14
 - ▶ ☑ and stop here. The organization qualifies as a publicly supported organization 33 1/3% support test-2016. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this
- 16a 33 1/3% support test-2017. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test-2017. 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

h 10%-facts-and-circumstances test—2016. 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 gualifies as a publicly

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

Р	Support Schedule for						
	(Complete only if you cl the organization fails to						er Part II. If
Se	ection A. Public Support	quality under t	ine tests listed i	below, please co	ompiete Part II.,)	
	Calendar year	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
_	(or fiscal year beginning in) ▶	(a) 2013	(0) 2014	(6) 2015	(4) 2016	(e) 2017	(I) Iotai
1	Gifts, grants, contributions, and membership fees received (Do not						
	include any "unusual grants ")						
2	Gross receipts from admissions,						
	merchandise sold or services						
	performed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are						
	not an unrelated trade or business						
4	under section 513 Tax revenues levied for the						
-	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3						
	received from other than disqualified persons that exceed the greater of						
	\$5,000 or 1% of the amount on line						
	13 for the year						
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
S	from line 6) ection B. Total Support						
	Calendar year						
	(or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9							
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and income from similar sources						
ь	Unrelated business taxable income						
	(less section 511 taxes) from						
	businesses acquired after June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b,						
	whether or not the business is						
12	regularly carried on Other income Do not include gain or						
12	loss from the sale of capital assets						
	(Explain in Part VI)						
13	Total support. (Add lines 9, 10c,						
14	11, and 12) First five years. If the Form 990 is for	l r the organization	l 's first, second, th	L urd, fourth, or fift	l lax vear as a sec	ction 501(c)(3) o	l rganization
	check this box and stop here			,,	,		▶ □
Se	ection C. Computation of Public S	Support Perce	ntage				
15	Public support percentage for 2017 (lin			column (f))		15	
16	Public support percentage from 2016 S	chedule A, Part II	II, line 15			16	
Se	ction D. Computation of Investr	nent Income	Percentage				
17	Investment income percentage for 201	7 (line 10c, colur	nn (f) divided by	lıne 13, column (f	·))	17	
18	Investment income percentage from 20	016 Schedule A, I	Part III, line 17			18	
	331/3% support tests—2017. If the	organization did n	ot check the box	on line 14, and lir	ne 15 is more than		e 17 is not
	more than 33 1/3%, check this box and s						ightharpoons
	33 1/3% support tests—2016. If the						. —
_	not more than 33 1/3%, check this box	-			· ·		ightharpoons
20	Private foundation. If the organization	-	-				ightharpoons

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

Yes

5b

5c

7

9b

9с

10a

10b

Schedule A (Form 990 or 990-EZ) 2017

No

1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose,			
	describe the designation If historic and continuing relationship, explain	1	İ	
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)			
	in section 309(a)(1) or (2)	2		
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)			
	below	3a	İ	
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the			
	determination	3b		

b	organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? explain in Part VI what controls the organization put in place to ensure such use supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you	·	
	determination	3b	
c Did th	Old 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		

c	Did the organization ensure that all support to such organizations was used exclusively for section $170(c)(2)(B)$ purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use		
		3с	
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you		
	checked 12a or 12b ın Part I, answer (b) and (c) below	4a	
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported		
	organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations	4b	
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support		
	to the foreign supported organization was used exclusively for section $170(c)(2)(B)$ purposes	4c	
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and		

			, ,	
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	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported			
	organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support			
	to the foreign supported organization was used exclusively for section $170(c)(2)(B)$ purposes	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (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)	5a		

6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing		
	organization's supported organizations? If "Yes," provide detail in Part VI.	6	
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (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)		

Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the

Substitutions only. Was the substitution the result of an event beyond the organization's control?

which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

organization's organizing document?

10a

answer line 10b below

organization had an interest? If "Yes," provide detail in Part VI.

the organization had excess business holdings)

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)	8	
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as		i

```
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.
```

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

```
9a
Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting
```

Pa	rt IV Supporting Organizations (continued)			-9
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	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?	11a		
b	A family member of a person described in (a) above?	11b		
	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		
	ection B. Type I Supporting Organizations			
			Yes	No
1	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			
_		1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization	2		
5	ection C. Type II Supporting Organizations			
	cetion c. Type 11 Supporting Organizations		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the			
	supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1		
S	ection D. All Type III Supporting Organizations			
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		Yes	No
		1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)			
		2		
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	3		
s	ection E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruct 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		ctions)	
2	Activities Test Answer (a) and (b) below.		Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	2a		
	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	2b		
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? <i>Provide details in Part VI</i> .	3a		
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI.</i> the role played by the organization in this regard	3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 (explain in Part VI) See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E (A) Prior Year (B) Current Year Section A - Adjusted Net Income (optional)

Page 6

(B) Current Year

(optional)

Current Year

Schedule A (Form 990 or 990-F7) 2017

1 Net short-term capital gain 1 Recoveries of prior-year distributions 2 3 Other gross income (see instructions) 3 4 4 Add lines 1 through 3 Depreciation and depletion 5 5

Portion of operating expenses paid or incurred for production or collection of gross 6 income or for management, conservation, or maintenance of property held for production of income (see instructions) 7 Other expenses (see instructions)

Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) 8 (A) Prior Year Section B - Minimum Asset Amount 1 1a

Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year) a Average monthly value of securities **b** Average monthly cash balances **1**b c Fair market value of other non-exempt-use assets 1c 1d d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors 2

(explain in detail in Part VI) 2 Acquisition indebtedness applicable to non-exempt use assets Subtract line 2 from line 1d 3 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see 4 instructions) 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 6

6 Multiply line 5 by 035 7 Recoveries of prior-year distributions 8

3

5

7

Schedule A (Form 990 or 990-EZ) 2017

Section C - Distributable Amount

Minimum Asset Amount (add line 7 to line 6) Adjusted net income for prior year (from Section A, line 8, Column A)

Enter 85% of line 1

2

temporary reduction (see instructions)

Income tax imposed in prior year

instructions)

Minimum asset amount for prior year (from Section B, line 8, Column A)

4 Enter greater of line 2 or line 3

Distributable Amount. Subtract line 5 from line 4, unless subject to emergency

Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see

2 3

7

8

1

4 5

6

3	Administrative expenses paid to accomplish exempt purposes of supported organizations	<u> </u>
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 organization is responsive (provide details in Part VI) See instructions	
9	Distributable amount for 2017 from Section C, line 6	
10	Line 8 amount divided by Line 9 amount	

8	Distributions to attentive supported organizations to wh details in Part VI) See instructions						
9	Distributable amount for 2017 from Section C, line 6						
10	Line 8 amount divided by Line 9 amount						
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017			
1	1 Distributable amount for 2017 from Section C, line 6						

details in Part VI) See instructions					
9 Distributable amount for 2017 from Section C, line 6					
(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017			
	(i)	(i) (ii) Underdistributions			

9 Distributable amount for 2017 from Section C, line 6			
10 Line 8 amount divided by Line 9 amount			
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
Distributable amount for 2017 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2017			
a			
b From 2013			
c From 2014			_
d From 2015			

e From 2016. f Total of lines 3a through e

d Excess from 2016. . . . e Excess from 2017.

instructions)

g Applied to underdistributions of prior years h Applied to 2017 distributable amount i Carryover from 2012 not applied (see

j Remainder Subtract lines 3g, 3h, and 3i from 3f 4 Distributions for 2017 from Section D, line 7

a Applied to underdistributions of prior years **b** Applied to 2017 distributable amount

c Remainder Subtract lines 4a and 4b from 4		
5 Remaining underdistributions for years prior to 2017, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI See instructions		
6 Remaining underdistributions for 2017 Subtract lines 3h and 4b from line 1 If the amount is greater than zero, explain in Part VI See instructions		
7 Excess distributions carryover to 2018. Add lines 3 ₁ and 4c		

lines 3h and 4b from line 1 If the amount is greater than zero, explain in Part VI See instructions		
7 Excess distributions carryover to 2018. Add lines 3 ₁ and 4c		
8 Breakdown of line 7		
a Excess from 2013		
b Excess from 2014		
c Excess from 2015		

Schedule A (Form 990 or 990-EZ) (2017)

Schedule A	(Form 990 or 990-EZ) 2	2017	Page 8						
Part VI	Section A, lines 1, 2, Part IV, Section D, lin	mation. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Par 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1, Part V, Section B, line 1e, Part V and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information (See							
	Facts And Circumstances Test								
990 Sche	dule A, Supplemen	atal Information							
	turn Reference	Explanation							

PART II, LINE 10

COLLECTION OF PY WRITE-OFF 150,000 CONSOLIDATED-ARTS & CULTURAL ALLIANC 150,184

SCHEDULE C

• Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

DLN: 93493298010658

Open to Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

EZ)

(Form 990 or 990-

▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ. ▶Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

• Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B

Inspection

• 5	Section 527 organizations Complet	te Part I-A only						
		n Form 990, Part IV, Line 4, or Form 9						_
		t have filed Form 5768 (election under s						
		t have NOT filed Form 5768 (election ur n Form 990, Part IV, Line 5 (Proxy Ta)						
	xy Tax) (see separate instruction		i) (see separate i	iisti uctioi	15) 01 1 01111 3	50-LZ, F	21 t V, 1111	- 33C
	Section 501(c)(4), (5), or (6) organia							
	me of the organization	·			Employer id	entificat	ion nun	nber
UNI	ITED ARTS OF CENTRAL FLORIDA INC				=0.4466446			
	. Complete Stille and		- 504(-):-		59-1166446			
(e)	t I-A Complete if the orga	nization is exempt under section	n 501(c) or is	a sectio	n 527 orgai	nizatioi	1.	
1	Provide a description of the orgar "political campaign activities")	nization's direct and indirect political can	npaign activities in	n Part IV (s	see instruction	s for defi	nition of	
2	Political campaign activity expend	ditures (see instructions)			>	\$		
3	Volunteer hours for political camp	paign activities (see instructions)						
Par	t I-B Complete if the orga	nization is exempt under sectio	n 501(c)(3).					
1	Enter the amount of any excise to	ax incurred by the organization under se	ection 4955		>	\$		
2	Enter the amount of any excise to	ax incurred by organization managers u	nder section 4955		>	\$		
3	If the organization incurred a sec	tion 4955 tax, did it file Form 4720 for t	hıs year?				Yes	□ No
4a	Was a correction made?						Yes	□ No
b	If "Yes," describe in Part IV							
		nization is exempt under sectio	n 501(c), exc	ept secti	on 501(c)(3	3).		
1	Enter the amount directly expend	led by the filing organization for section	527 exempt funct	tion activiti	es 🕨	\$		
2	Enter the amount of the filing org	janization's funds contributed to other o	rganizations for se	ection 527	exempt •	\$		
3		res Add lines 1 and 2 Enter here and or	n Form 1120-POL,	line 17b	.	φ ——		
4	Did the filing organization file For		·			[*] — _ г	Yes	□ No
5		employer identification number (EIN) of	-IIti F27	احدطاء				□ N0
5	organization made payments For	r each organization listed, enter the amo that were promptly and directly deliver	ount paid from the	filing orga	anızatıon's fund	ds Also e	enter the	
		ee (PAC) If additional space is needed,						- 9 9
	(a) Name	(b) Address	(c) EIN		ount paid from			of political
				filing o	organization's If none, enter			s received
				Tunas	-0-		nd promp ctly deliv	vered to a
					-		eparate p	
						orga		If none,
							enter ·	-0-
L								
2								
3								
1								
				1				
5								
or P	aperwork Reduction Act Notice, see	the instructions for Form 990 or 990-EZ.	Cat	No 500849	S Schedule (C (Form 9	90 or 99	0-EZ) 2017

2a Lobbying nontaxable amount Lobbying ceiling amount (150% of line 2a, column(e)) Total lobbying expenditures Grassroots nontaxable amount Grassroots ceiling amount (150% of line 2d, column (e)) Grassroots lobbying expenditures

Return Reference

SCHEDULE C, PART II-B, LINE 1

activity

(b)

Amount

(a)

No

Yes

1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			_
а	Volunteers?	Yes		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes		
С	Media advertisements?		No	
d	Mailings to members, legislators, or the public?		No	
е	Publications, or published or broadcast statements?		No	
f	Grants to other organizations for lobbying purposes?	Yes		2,000
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No	
i	Other activities?		No	
j	Total Add lines 1c through 1i			2,000
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No	
b	If "Yes," enter the amount of any tax incurred under section 4912			
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).	(5), o	r sectio	n
				Yes No
1	Were substantially all (90% or more) dues received nondeductible by members?		1	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2	!
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?		3	
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes."			
1	Dues, assessments and similar amounts from members	1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).			
a	Current year	2a		
ь	Carryover from last year	2b		
С	Total	2c		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4		
5	Taxable amount of lobbying and political expenditures (see instructions)	5		
Pa	art IV Supplemental Information			
	vide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), rructions), and Part II-B, line 1 Also, complete this part for any additional information	Part II-	A, lines 1	and 2 (see

Explanation

THE ORGANIZATIONS TRAVELS TO TALLAHASSEE EACH YEAR FOR ARTS DAY TO MEET WITH LEGISLATURES AND DISCUSS THE IMPORTANCE OF ARTS AND CULTURAL ORGANIZATION TO THE CENTRAL FLORIDA

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying

ECONOMY AND QUALITY OF LIFE

As Filed Data efile GRAPHIC print - DO NOT PROCESS **SCHEDULE D**

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.

DLN: 93493298010658 OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

(Form 990)

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Inspection

	TED ARTS OF CENTRAL FLORIDA INC				Employer Ide	enuncation	пишьег
					59-1166446		
Pa	rt I Organizations Maintaining Donor Adv				r Accounts.		
	Complete if the organization answered "Ye			sed funds	(b)Fund	s and other a	accounts
_	Total number at end of year	(u) Bollo	uuvi	sea ranas	(B) and	o and other t	accounts
,	Aggregate value of contributions to (during year)						
	Aggregate value of grants from (during year)						
L	Aggregate value at end of year						
•	Did the organization inform all donors and donor advise			te bold in donor od	hused finds are	+h-a	
	organization's property, subject to the organization's e. Did the organization inform all grantees, donors, and d	xclusive legal contro	?				Yes 🗌 No
	charitable purposes and not for the benefit of the dono private benefit?					missible	Yes 🗌 No
Pa	t III Conservation Easements. Complete if t	he organization a	nswe	red "Yes" on Forr	n 990, Part IV	, line 7.	
	Purpose(s) of conservation easements held by the orga	nızatıon (check all i	hat a	pply)			
	Preservation of land for public use (e g , recreation	n or education)		Preservation of an	historically imp	ortant land a	area
	Protection of natural habitat			Preservation of a d	ertified historic	structure	
	Preservation of open space						
<u>!</u>	Complete lines 2a through 2d if the organization held a easement on the last day of the tax year	qualified conservat	ion co	ntribution in the for		ation at the End o	f the Year
а	Total number of conservation easements				2a	it the End t	i tile real
b	Total acreage restricted by conservation easements				2b		
c	Number of conservation easements on a certified histor	ic structure include	l ın (a)	2c		
d	Number of conservation easements included in (c) acquistructure listed in the National Register		,	'	2d		
1	Number of conservation easements modified, transferred tax year ▶	ed, released, exting	uished	, or terminated by	the organizatior	during the	
ı	Number of states where property subject to conservati	on easement is loca	ted 🕨				
i	Does the organization have a written policy regarding t and enforcement of the conservation easements it hold		ng, ır	spection, handling	of violations,	☐ Yes	□ No
;	Staff and volunteer hours devoted to monitoring, inspe	cting, handling of v	olatio	ns, and enforcing co	onservation ease	ements durir	ng the year
,	Amount of expenses incurred in monitoring, inspecting \$ \ \\$, handling of violation	ns, a	nd enforcing conser	vation easemen	ts during the	e year
,	Does each conservation easement reported on line 2(d) above satisfy the	eaur	ments of section 1	70(h)(4)(B)(ı)		
,	and section $170(h)(4)(B)(II)$?) above satisfy the	equii	sillents of section 1	/ U(II)(+)(D)(I)	☐ Yes	□ No
)	In Part XIII, describe how the organization reports con balance sheet, and include, if applicable, the text of the the organization's accounting for conservation easeme	e footnote to the org				and	_ NO
ar	t III Organizations Maintaining Collections Complete if the organization answered "Ye	of Art, Historic			er Similar As	sets.	
.a	If the organization elected, as permitted under SFAS 1 art, historical treasures, or other similar assets held for provide, in Part XIII, the text of the footnote to its fina	16 (ASC 958), not t public exhibition, e	repo ducat	rt in its revenue sta on, or research in f			
b	If the organization elected, as permitted under SFAS 1 historical treasures, or other similar assets held for put following amounts relating to these items	16 (ASC 958), to re	ort ir	ıts revenue statem			
(i) Revenue included on Form 990, Part VIII, line 1				▶ \$		
	i)Assets included in Form 990, Part X				· <u> </u>		
:	If the organization received or held works of art, histor following amounts required to be reported under SFAS						
а	Revenue included on Form 990, Part VIII, line 1	, , , , , , ,	_		▶ \$		
b	Assets included in Form 990, Part X				· <u> </u>		
_		·					

		Organizations Ma	intaining Coi	lections of Art,	, HISTOI	rıcaı ı	reas	ures, o	otner	Similar Ass	ets (continued)	
3		the organization's acqu (check all that apply)	isition, accession	n, and other record	ds, check	cany of	the f	ollowing t	hat are a	significant use	e of its	s collection	
а		Public exhibition			d		Loar	or exch	ange prog	grams			
b		Scholarly research			e		Othe	er					
c		Preservation for future	generations										
4	Provide Part	de a description of the o	rganızatıon's col	lections and explai	ın how tl	hey furt	her th	ne organiz	ation's e	xempt purpose	e in		
5	Durin	g the year, did the orga s to be sold to raise fund								nılar	□ Y €	es 🗌 No	o
Pa	rt IV	Escrow and Custo				_							
		Complete if the org X, line 21.	anization answ	vered "Yes" on F	orm 99	0, Parl	t IV, I	ine 9, o	r reporte	ed an amoun	t on I	-orm 990,	Part
1a	· · · · · · · · · · · · · · · · · · ·												
ь	If "Y∈	es," explain the arranger	ment in Part XIII	and complete the	followin	a table				Am	ount		_
c		nning balance		·		_			1c				_
d	Addıt	ions during the year							1d				_
е	Dıstrı	butions during the year							1e				_
f	Endın	ig balance							1f				
2 a	Did th	ne organization include a	an amount on Fo	rm 990, Part X, lin	ne 21, fo	r escro	w or c	ustodial a	ccount li	ability?	∀ γ∈	es 🗆 No	D
b	If "Ye	es," explain the arrangen	nent in Part XIII	Check here if the	evnlana	ation ha	s haar	n provide	d in Part				
	rt V	Endowment Fund			•			•				<u> </u>	
			Di Compicce ii	(a)Current year		Prior yea				(d)Three years		(e)Four year	s back
1 a	Beginn	ing of year balance .		25,27			3,291	, , ,	24,937		5,209		22,913
b	Contrib	outions											
С	Net inv	estment earnings, gains	s, and losses	2,01	9		3,222		-438	3	70		2,648
d	Grants	or scholarships		93	7		900		874				
e		expenditures for facilities	s										
f	Admını	strative expenses .		32	.5		341		334		342		352
g	End of	year balance		26,02	.9	2	5,272		23,291	. 2	4,937		25,209
2	Provid	de the estimated percen	tage of the curre	ent year end balan	ce (line	1g, colu	ımn (a	a)) held a	s				
а	Board	d designated or quasi-en	idowment 🕨 🗀	100 000 %									
b	Perm	anent endowment 🟲											
c	Temp	orarily restricted endow	ment 🟲										
	The p	ercentages on lines 2a,	2b, and 2c shou	ld equal 100%									
3а		here endowment funds r nization by	not in the posses	sion of the organiz	zation th	at are h	neld a	nd admin	istered fo	r the		Yes	No
	-	nrelated organizations									3	a(i) Yes	110
		elated organizations .										a(ii)	No
b		es" on 3a(II), are the rela		ns listed as require	d on Sch	nedule F	۲۶.					3b	
4	Descr	ribe in Part XIII the inter	nded uses of the	organization's end	dowment	t funds					_		
Pa	rt VI	Land, Buildings, a	• •										
	D	Complete if the org	anization answ (a) Cost or oth		orm 99 ost or othe					rm 990, Part depreciation		ne 10. (d) Book value	
	Descri	ption of property	(investme		ost or othe	ei Dasis ((other)	(C) Acc	umulateu	зергестацоп		(d) Book Value	:
1a	Land												
b	Buildin	gs											
c	Leaseh	old improvements											
d	Equipn	nent					43,103	3		38,661			4,442
е	Other						86,708	3		81,994			4,714
Tota	1 Add	lines 1a through 1e (Col	lumn (d) must e	qual Form 990 Pa	rt X coli	umn (R	line	10(c)		—			0.156

Part VII	Investments—Other Securities. Complete if the of See Form 990, Part X, line 12.	organizatio	n answ	vered "Yes" on F	orm 990, Part IV, l	ne 11b.
	(a) Description of security or category (including name of security)		(b) Book value		e) Method of valuation r end-of-year market	
(1) Financia						
(2) Closely- (3)Other	held equity interests	· · ·				
(A)						
(B)						
(C)						
(D)						
(E)						
(F)						
(G)						
(H)						
Total. (Colum	n (b) must equal Form 990, Part X, col (B) line 12)	•				
Part VIII	Investments—Program Related.		+ T) ()	11- C F	000 Post V June	4.2
	Complete if the organization answered 'Yes' on Form (a) Description of investment	m 990, Par (b) Boo		(c) Method of valuation	ı
(1)				Cost o	r end-of-year market	value
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9) ————						
Part IX	n (b) must equal Form 990, Part X, col (B) line 13) Other Assets. Complete if the organization answered 'Ye	es' on Form	990, Pa	rt IV, line 11d See	Form 990, Part X, III	ne 15
	(a) Description			,		3,557,505
(2) OTHER A						6,453
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
	mn (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization answ		on Fo	rm 990 Part IV	. ▶	3,563,958
	See Form 990, Part X, line 25.	wered res			mie 11e or 11r.	
(1) Federal :	(a) Description of liability		(0) 6	ook value		
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
	n (b) must equal Form 990, Part X, col (B) line 25)	p footnata i	0 th = -	ganization's for-	ual statements +1+	norte the
•	or uncertain tax positions In Part XIII, provide the text of the 's liability for uncertain tax positions under FIN 48 (ASC 740)			=		

Part XI

2

3

Schedule D (Form 990) 2017

1

2e

3

4c

2,064,448

713

Page 4

713 3,943,903

4,310,085

2,064,448 6 274 E22

c	Recoveries of prior year grants	2с				
d	Other (Describe in Part XIII)	2d				
е	Add lines 2a through 2d				2e	

Amounts included on line 1 but not on Form 990, Part VIII, line 12

Add lines **4a** and **4b**

Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b . . .

Other losses

Other (Describe in Part XIII)

Add lines 2a through 2d

Net unrealized gains (losses) on investments

Donated services and use of facilities

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

2a

2b

2a 2b

2c

2d

4a 4b

3	Subtract line 2e from line 1				3	
4	Amounts included on Form 990, Part VIII, line 12, 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		2,064,448		
С	Add lines 4a and 4b	· ·			4c	
5	Total revenue Add lines ${\bf 3}$ and ${\bf 4c.}$ (This must equal Form 990, Part I, line 12)				5	
Par	Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered 'Yes' on Form 990, Part		•	ises per R	eturi	n.
1	Total expenses and losses per audited financial statements				1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25					

2,064,448
6,008,351
n.
4,310,085

Schedule D (Form 990) 2017

5 Total expenses Add lines 3 and	4c. (This must equal Form 990, Part I, line 18)	5	6,374,533
Part XIIII Supplemental Info	ormation		
	art II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part 2d and 4b Also complete this part to provide any additional information	V, line	4, Part X, line 2, Part
Return Reference	Explanation		
See Additional Data Table			

Page 5	9 (Form 990) 2017		
	ormation <i>(continued)</i>	Part XIII Supplemental Info	
	Explanation	Return Reference	

Schedule D (Form 990) 2017

Additional Data

Software ID: Software Version:

EIN: 59-1166446

Name: UNITED ARTS OF CENTRAL FLORIDA INC

Supplemental Information

Supplemental Information	
Return Reference	Explanation
SCHEDULE D, PAGE 2, PART IV, LINE 2B	UNITED ARTS ACTS AS A FIDUCIARY AND MANAGES TWO GRANT PROGRAMS ON BEHALF OF ORANGE COUNTY, FL IN ADDITION, UNITED ARTS HOLDS FUNDS FOR THE ORANGE COUNTY ARTS & CULTURAL AFFAIRS OF FICE CASH HELD IS RECORDED ON THE BALANCE SHEET (FORM 990, PART X, LINE 21) CASH ON HAND IS FOR AWARDED GRANTS THAT SUPPORT ARTS AND CULTURAL PROGRAMMING, FACILITIES IMPROVEMENT AND THE ACQUISITION OF PUBLIC ART

Return Reference	Explanation
SCHEDULE D, PAGE 2, PART V, LINE 4	THE ORGANIZATION HAS TWO ENDOWMENT FUNDS HELD BY THE CENTRAL FLORIDA FOUNDATION THE UNITE D ARTS OF CENTRAL FLORIDA ENDOWMENT FUND IS INTENDED TO SUPPORT ARTS AND CULTURAL ACTIVITI ES IN THE ORGANIZATION'S SERVICE AREA THE UNITED ARTS OF CENTRAL FLORIDA ARTS AND EDUCATI ON ENDOWMENT FUND IS INTENDED TO SUPPORT AND PROMOTE ARTS EDUCATION PROGRAMMING FOR ALL AG ES IN LAKE, ORANGE, OSCEOLA AND SEMINOLE COUNTIES

Supplemental Information

Supplemental Information	
Return Reference	Explanation
SCHEDULE D, PAGE 3, PART X	THE ORGANIZATION IS EXEMPT FROM FEDERAL INCOME TAX PROVISIONS OF SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND FROM STATE INCOME TAXES UNDER SIMILAR PROVISIONS OF THE FLORIDA INCOME TAX CODE THE ORGANIZATION IDENTIFIES AND EVALUATES UNCERTAIN TAX POSITIONS, IF ANY, AND RECOGNIZES THE IMPACT OF UNCERTAIN TAX POSITIONS FOR WHICH THERE IS A LESS THAN MORE -LIKELY-THAN-NOT PROBABILITY OF THE POSITION BEING UPHELD WHEN REVIEWED BY THE RELVANT TAX ING AUTHORITY SUCH POSITIONS ARE DEEMED TO BE UNRECOGNIZED TAX BENEFITS AND A CORRESPONDI NG LIABILITY IS ESTABLISHED ON THE STATEMENT OF FINANCIAL POSITION THE ORGANIZATION HAS N OT RECOGNIZED A LIABILITY FOR UNCERTAIN TAX POSITIONS IF THERE WERE AN UNRECOGNIZED TAX B ENEFIT, THE ORGANIZATION WOULD RECOGNIZE INTEREST ACCRUED RELATED TO UNRECOGNIZED TAX BENE FITS IN INTEREST EXPENSE AND PENALTIES IN OPERATING EXPENSES THE ORGANIZATION'S REMAINING OPEN TAX YEARS SUBJECT TO EXAMINATION BY THE INTERNAL REVENUE SERVICE GENERALLY REMAIN OP EN FOR THREE YEARS FROM THE DATE OF FILING

upplemental Information	
Return Reference	Explanation
CHEDULE D, PAGE 4, PART XI, INE 4B	DONOR DESIGNATED CONTRIBUTIONS 2,064,448

Su

upplemental Information	
Return Reference	Explanation
SCHEDULE D, PAGE 4, PART XII, INE 4B	DONOR DESIGNATED GRANTS 2,064,448

Su

efile GRAPHIC print - DO NOT PROCESS As Filed Data DLN: 93493298010658 OMB No 1545-0047 Schedule I **Grants and Other Assistance to Organizations**, (Form 990) Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Open to Public Attach to Form 990. Department of the Inspection ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Treasury Internal Revenue Service Name of the organization **Employer identification number** UNITED ARTS OF CENTRAL FLORIDA INC 59-1166446 Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and ✓ Yes Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part III Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed (c) IRC section (a) Name and address of (b) EIN (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant (if applicable) (book, FMV, appraisal, noncash assistance organization grant cash or assistance or government assistance other) (1) See Additional Data (3) (5) (6)(7) (8)(9)(10)(11)(12)Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50055P Schedule I (Form 990) 2017

(6) (7) **Explanation**

Schedule I (Form 990) 2017

SCHEDULE I, PAGE 1, PART I, LINE ORGANIZATIONS AND INDIVIDUALS SUBMIT GRANT APPLICATIONS DESCRIBING THE PROJECT OR PROGRAM THE GRANT BEING REQUESTED WILL BE USED FOR APPLICATIONS INCLUDE A COMPREHENSIVE NARRATIVE DESCRIBING THE ORGANIZATION AND ITS PROGRAMMING, OR THE INDIVIDUAL AND THEIR PROJECT. ALONG WITH A DETAILED BUDGET AND WHERE FUNDING TO ACCOMPLISH THE PROJECT WILL COME FROM A VOLUNTEER COMMITTEE OF DIVERSE PROFESSIONALS REVIEWS AND AWARDS FUNDING BASED ON ESTABLISHED CRITERIA ONCE AWARDED, GRANTEES MUST SUBMIT REPORTS DETAILING THE CURRENT STATUS OF THE PROGRAM OR PROJECT IN ORDER TO GET INITIAL DISBURSEMENTS AND A PROGRESS REPORT AND FINAL REPORT IN ORDER TO GET THE BALANCE OF FUNDS

Page 2

Schedule I (Form 990) 2017

Additional Data

PO BOX 1691

MAITLAND

WINTER PARK, FL 32790 ART & HISTORY MUSEUMS -

231 W PACKWOOD AVE MAITLAND, FL 32751

Software ID: Software Version:

59-1710129

EIN: 59-1166446

Name: UNITED ARTS OF CENTRAL FLORIDA INC

104,089

organization or government		ıf applicable	grant	cash assistance	(book, FMV, appraisal, other)	
ALBIN POLASEK MUSEUM & SCUL GARDEN	59-1102352	501C3	15,275			

501C3

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non- (f) Method of valuation

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(q) Description of

(h) Purpose of grant

non-cash assistance or assistance **GENL**

GENL

SUPPORT/PROGRAM

SUPPORT/PROGRAM

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 59-3195479 501C3 10.678 GENL ASTAN CULTURAL ASSOCIATION SUPPORT/PROGRAM 2759 MARSH WREN CIRCLE

2759 MARSH WREN CIRCLE
LONGWOOD, FL 32779

BACH FESTIVAL SOC OF 59-6015959 501C3 258,488
WINTER PARK
ROLLINS COLLEGE 1000 HOLT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

AVE 2763

WINTER PARK, FL 327894499

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 59-1789108 501C3 8.100 BAY STREET PLAYERS GENL PO BOX 1405 SUPPORT/PROGRAM EUSTIS, FL 32727

EUSTIS, FL 32727

CENTER FOR CONTEMPORARY 20-1694826 501C3 32,389

DANCE THE SUPPORT/PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

3580 ALOMA AVE 7 WINTER PARK, FL 32792

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance CENTRAL FLORIDA BALLET 59-3658167 501C3 23.800 GENL 4525 VINELAND RD SUITE 204 SUPPORT/PROGRAM ORLANDO, FL 32811 CENTRAL FLORIDA 45-2324172 501C3 61,700 GENL

ISUPPORT/PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

COMMUNITY ARTS

PO BOX 720517 ORLANDO, FL 32872

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 59-1887887 501C3 142.743 CREALDE SCHOOL OF ART GENL 600 ST ANDREWS BLVD SUPPORT/PROGRAM

WINTER PARK, FL 32792 30-0086039 501C3 56,109 GENL DOWNTOWN ARTS DISTCITYARTS FACTORY ISUPPORT/PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

29 SOUTH ORANGE AVE ORLANDO, FL 32801

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 20-0695917 501C3 27.007 DR PHILLIPS CTR FOR GENL PERFORM ARTS SUPPORT/PROGRAM

GENL

SUPPORT/PROGRAM

150.846

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501C3

155 FAST ANDERSON ST ORLANDO, FL 32801 FN7TAN

MAITLAND, FL 32751

1300 SOUTH ORLANDO AVE

59-2719581

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 59-2225301 501C3 15.530 GENL FLORIDA SYMPHONY YOUTH ORCHESTRA SUPPORT/PROGRAM

PO BOX 2328 WINTER PARK, FL 32790 FOUND FOR ORANGE CO 59-2788435 501C3 5.504 GENL PUBLIC SCHOOLS SUPPORT/PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

445 W AMELIA ST ORLANDO, FL 32801

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 59-2960396 501C3 13.000 FOUND FOR OSCEOLA CO GENL PUBLIC SCHOOLS SUPPORT/PROGRAM

SUPPORT/PROGRAM

PUBLIC SCHOOLS
2310 NEW BEGINNINGS RD
KISSIMMEE, FL 34744

GARDEN THEATRE 27-2577059 501C3 51.337

GENL

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

160 W PLANT ST

WINTER GARDEN, FL 34787

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 20-0117158 501C3 7.690 GLOBAL PEACE FILM FESTIVAL GENL PO BOX 3310 SUPPORT/PROGRAM

WINTER PARK, FL 327903310

HOLOCAUST MEMORIAL 59-2219851 501C3 30,050

GENL SUPPORT/PROGRAM S51 NORTH MAITLAND AVE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

MAITLAND, FL 32751

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 59-1830071 501C3 6.563 LEESBURG CENTER FOR THE GENL ARTS SUPPORT/PROGRAM PO BOX 492857

GENL

SUPPORT/PROGRAM

7.744

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501C3

LEESBURG, FL 34749 MAD COW THEATRE

ORLANDO, FL 32801

PO BOX 3109

59-3575599

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 59-3618760 501C3 24.270 GENL MENNELLO MUSEUM OF AMERICAN ART SUPPORT/PROGRAM 900 F PRINCETON ST

GENL

SUPPORT/PROGRAM

19.857

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501C3

ORLANDO, FL 32803

MICHELEE PUPPETS
3655 MAGUIRE BLVD SUITE

ORLANDO, FL 32803

130

59-2616456

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 59-2470958 501C3 15.150 MT DORA CENTER FOR THE GENL ARTS SUPPORT/PROGRAM 138 F FIFTH AVE MT DORA, FL 32757

SUPPORT/PROGRAM

27-0406958 501C3 28.106 GENL

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

OPERA ORI ANDO PO BOX 547937

ORLANDO, FL 328547937

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 59-1860444 501C3 98.108 ORANGE COUNTY REGIONAL GENL HISTORY CTR SUPPORT/PROGRAM

65 F CENTRAL BLVD ORLANDO, FL 32801

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

ORLANDO, FL 32803

ORLANDO BALLET 23-7427817 501C3 569.221 GENL 415 E PRINCETON ST SUPPORT/PROGRAM

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 59-3008188 501C3 9.339 ORLANDO GAY CHORUS GENL SUPPORT/PROGRAM

PO BOX 3103 ORLANDO, FL 328023103 ORLANDO INT'L FRINGE 75-3012108 501C3 46,321 GENL FESTIVAL SUPPORT/PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

812 E ROLLINS ST SUITE 300 ORLANDO, FL 32803

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 59-0910352 501C3 272.129 ORLANDO MUSEUM OF ART GENL 2416 N MILLS AVE SUPPORT/PROGRAM

ORLANDO, FL 32804 ORLANDO PHILHARMONIC 59-3058884 501C3 853.727 GENL ORCHESTRA ISUPPORT/PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

812 E ROLLINS ST SUITE 300 ORLANDO, FL 32803

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 20-1813523 501C3 213.397 ORLANDO REPERTORY GENL THEATRE SUPPORT/PROGRAM 1001 F PRINCETON ST ORLANDO, FL 328540203

GENL

SUPPORT/PROGRAM

380.915

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501C3

ORI ANDO SCIENCE CENTER

777 E PRINCETON ST

ORLANDO, FL 32803

59-0896343

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 59-2931698 501C3 756.676 GENL ORLANDO SHAKESPEARE THEATER SUPPORT/PROGRAM

812 E ROLLINS ST SUITE 100 ORLANDO FL 32803 OSCEOLA ARTS 59-6179937 501C3 53.425 GENL

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

KISSIMMEE, FL 34744

2411 E IRLO BRONSON SUPPORT/PROGRAM HIGHWAY

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 59-2713072 501C3 8.300 GENL OSCEOLA CO HISTORICAL SOCIETY SUPPORT/PROGRAM 750 N BASS RD

KISSIMMEE. FL 34746 PLAYWRIGHT'S ROUND TABLE 59-3733179 501C3 6.724

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

ORLANDO, FL 32811

GENL 4696 MIDDLEBROOK RD SUITE SUPPORT/PROGRAM

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance SCHOOL BOARD OF ORANGE 59-6000771 GOV 50.831 GENL CO FL SUPPORT/PROGRAM 445 W AMFLIA ST ORLANDO, FL 32801

GENL

SUPPORT/PROGRAM

133.869

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

GOV

SCHOOL DISTRICT OF

817 BILL BECK BLVD KISSIMMEE, FL 34744

OSCEOLA COUNTY

59-6000779

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance or government other) assistance SEMINOLE CULTURAL ARTS 59-3312429 501C3 47.165 GENL COUNCIL SUPPORT/PROGRAM PO BOX 4100 SANFORD, FL 32772 20-5532663 501C3 7.704 GENL STEINWAY SOCIETY OF CENTRAL FLORIDA SUPPORT/PROGRAM 303 E ALTAMONTE DR SUITE 1225 ALTAMONTE SPRINGS, FL

32701

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 26-2534274 501C3 9.080 URBAN THINK FOUNDATION GENL PO BOX 533709 SUPPORT/PROGRAM

PO BOX 533709
ORLANDO, FL 328533709

WAYNE DENSCH PERFORMING 59-3274090 501C3 58,788

ARTS CTR

SUPPORT/PROGRAM

GENL
SUPPORT/PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

PO BOX 4321

SANFORD, FL 327724321

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 59-3201766 501C3 8.643 WINTER GARDEN HERITAGE GENL FOUNDATION SUPPORT/PROGRAM PO BOX 770657

GENL

SUPPORT/PROGRAM

19.415

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501C3

WINTER GARDEN, FL 34777

WINTER PARK, FL 32789

711-B ORANGE AVE

WINTER PARK PLAYHOUSE THE

31-1786833

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (d) Amount of cash (e) Amount of non- (f) Method of valuation (a) Description of (h) Purpose of grant (b) EIN (c) IRC section organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 501C3 177.639 GRANTS OF 5000 OR LESS GENL ISUPPORT/PROGRAM

efil	e GRAPHIC pr	int - DO NOT PROCESS As Filed	Dat	a -	DLN: 934	19329	8010	658
Sch	edule J	Comper	sat	ion Information	OM	1B No	1545-0	0047
(For	n 990)			rustees, Key Employees, and High	nest			
				ated Employees /ered "Yes" on Form 990, Part IV,	line 23.	20	17	7
_		▶ <i>i</i>	Attach	i to Form 990.			to Pul	
•	tment of the Treasury al Revenue Service			(Form 990) and its instructions in a contractions in a contraction in a co	s at		ectio	
	ne of the organiza				Employer identificat	ion nu	ımber	
OINI	TED ARTS OF CENTR	AL FLORIDA INC			59-1166446			
Pa	rt I Questi	ons Regarding Compensation		·				
							Yes	No
1a		piate box(es) if the organization provided ection A, line 1a Complete Part III to prov						
		or charter travel		Housing allowance or residence for p				
		companions	님	Payments for business use of persor				
		nification and gross-up payments	H	Health or social club dues or initiatio				
	☐ Discretion	ary spending account	Ш	Personal services (e g , maid, chaufi	reur, cner)			
b		kes in line 1a are checked, did the organiz Il of the expenses described above? If "No			ent or reimbursement	1b		
2		tion require substantiation prior to reimbu			1-2	2		
	directors, truste	es, officers, including the CEO/Executive [recto	r, regarding the items checked in line	lar			
3		of any, of the following the filing organizati			e			
		EO/Executive Director Check all that appl d organization to establish compensation i			n Part III			
	✓ Compens			Markon and a contract				
		ition committee ent compensation consultant	✓	Written employment contract Compensation survey or study				
		of other organizations	√	Approval by the board or compensat	rion committee			
		-	/II C-					
4	related organiza	did any person listed on Form 990, Part \ tion	/II, SE	ction A, line 1a, with respect to the hi	ing organization of a			
а	Receive a sever	ance payment or change-of-control payme	nt?			4a		No
b		receive payment from, a supplemental n		ified retirement plan?		4b		No
c		receive payment from, an equity-based o				4c		No
	If "Yes" to any o	f lines 4a-c, list the persons and provide t	he app	plicable amounts for each item in Part	III			
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organiza	tions	must complete lines 5-9.				
5		ed on Form 990, Part VII, Section A, line 1		-				
	compensation c	ontingent on the revenues of						
а	The organization	٦٦				5a		No
b	Any related orga					5b		No
_	•	5a or 5b, describe in Part III						
6		d on Form 990, Part VII, Section A, line 1 ontingent on the net earnings of	a, did	the organization pay or accrue any				
a	The organization					6a		No
b	Any related orga					6b		No_
7	•	6a or 6b, describe in Part III	اد.ام	the every matter against a series of the	ı			
7		ed on Form 990, Part VII, Section A, line 1 escribed in lines 5 and 67 If "Yes," describ			ı	7		No
8		nts reported on Form 990, Part VII, paid o itial contract exception described in Regul			escribe	8		No
9	If "Yes" on line 5 53 4958-6(c)?	3, did the organization also follow the rebu	ttable	presumption procedure described in l	Regulations section	9		INU
For I	Danarwark Badı	ction Act Notice, see the Instructions	for E	orm 990 Cat No. 5	0053T Schedule 1	/Eorn	2 990)	2017

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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 are not 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 (A) Name and Title (B) Breakdown of W-2 and/or 1099-MISC compensation (D) Nontaxable (C) Retirement and (E) Total of columns (F) Compensation in column (B) reported other deferred benefits (B)(i)-(D)(i) Base (ii) Bonus & incentive (iii) Other compensation as deferred on prior compensation compensation reportable Form 990 compensation 1 FLORA MARIA GARCIA 175,531 (i) 14,500 9.600 9.502 8.296 217,429 PRESIDENT & CEO (ii)

Schedule J (Form 990) 2017

	Tage 5
Part III Supplemental Inform	nation
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
Return Reference	Explanation
·	PART I, LINE 3 FOR THE ORGANIZATION'S PRESIDENT & CEO, A REVIEW COMMITTEE IS FORMED FROM MEMBERS OF THE EXECUTIVE COMMITTEE THE COMMITTEE SOLICITS FEEDBACK ON THE PERFORMANCE OF THE PRESIDENT AND CEO FROM MEMBERS OF THE EXECUTIVE COMMITTEE THE REVIEW COMMITTEE REVIEWS THE FEEDBACK AND MEETS IN EXECUTIVE SESSION WITH THE ORGANIZATION'S EXECUTIVE COMMITTEE A RECOMMENDATION ON A COMPENSATION PACKAGE FOR THE COMING YEAR IS PRESENTED TO THE EXECUTIVE COMMITTEE FOR DISCUSSION AND APPROVAL THE COMPENSATION PACKAGE

Page 3

Schedule J (Form 990) 2017

Schedule J (Form 990) 2017

RECOMMENDATION IS BASED ON COMPARABLE COMPENSATIONS FOR INDIVIDUALS IN LIKE POSITIONS NATIONALLY, COMPARABLE POSITIONS LOCALLY AND PERFORMANCE

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493298010658 SCHEDULE M OMB No 1545-0047 **Noncash Contributions** (Form 990) 2017 ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ▶ Attach to Form 990. ▶Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990 Open to Public Department of the Treasury Internal Revenue Service Inspection Name of the organization **Employer identification number** UNITED ARTS OF CENTRAL FLORIDA INC 59-1166446 **Types of Property** (b) (d) (a) (c) Check if Number of contributions or Noncash contribution Method of determining applicable items contributed amounts reported on noncash contribution amounts Form 990, Part VIII, line 1g 1 Art—Works of art . . Art-Historical treasures 3 Art—Fractional interests Books and publications Clothing and household goods Cars and other vehicles Boats and planes . . Intellectual property . . Χ 46,483 AVG SHARE PRICE Securities—Publicly traded . 10 Securities—Closely held stock . Securities—Partnership, LLC, or trust interests 12 Securities—Miscellaneous . Qualified conservation contribution—Historic structures 14 Qualified conservation contribution—Other . Real estate—Residential . 15 Real estate—Commercial . 17 Real estate—Other . . Collectibles 18 19 Food inventory . . . 20 Drugs and medical supplies . Taxidermy 21 22 Historical artifacts . 23 Scientific specimens . 24 Archeological artifacts . . 25 Other ▶ (Χ 170 PER DONOR JEWELRY) 26 28 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? 30a Nο **b** If "Yes," describe the arrangement in Part II 31 Νo Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 32a Nο b If "Yes," describe in Part II If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II Schedule M (Form 990) (2017) For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 51227J

Schedule M (Fo	rm 990) (2017)	Page 2
Part II	Supplemental Info	rmation.
	Provide the informat	ion required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part
	I, column (b), the nu	imber of contributions, the number of items received, or a combination of both. Also complete
	this part for any add	itional information.
Ret	urn Reference	Explanation
		Schedule M (Form 990) (2017)

efile GRAPH	IC print - DO NOT PROCESS As Filed Data -	DLN:	93493298010658		
SCHEDUL (Form 990 or EZ)	990- Complete to provide information for responses to sperification for provide any additional ► Attach to Form 990 or 990-EZ. ► Information about Schedule O (Form 990 or 990-EZ) an www.irs.gov/form990.	tion to Form 990 or 990-EZ for responses to specific questions on rovide any additional information. orm 990 or 990-EZ. rm 990 or 990-EZ) and its instructions is at			
	e O, Supplemental Information	Employer ident 59-1166446	ification number		
Return Reference	Explanation				
FORM 990, PAGE 2, PART III, LINE 4A	CULTURAL ORGANIZATIONS ACTIVELY PARTICIPATE IN RAISING UNRE THE ARTS COMMUNITY DONATIONS DESIGNATED TO ONE OR MORE OF LTURAL ORGANIZATIONS DURING THE COLLABORATIVE CAMPAIGN, WE SEE AN ANNUALLY, ARE MATCHED AT 15% BY UNITED ARTS DONORS ALSO HE NAME OF ANY NONPROFIT ARTS AND CULTURAL ORGANIZATION THE CAMPAIGN GIFT IN FY18, UNITED ARTS RAISED OVER 6 MILLION IN SECTION OVER 2 OF MILLION IN FUNDING WAS RAISED DURING THE COLLABORATED AND MILLION WAS RAISED THROUGH CONTRACTS FOR SERVICES, SPEND OTHER GIFTS AND IN-KIND DONATIONS	OF THESE COLLABORATING HICH RUNS FROM FEBRUA HAVE THE OPTION TO WR HEY WISH AND INCLUDE TH SUPPORT OF ARTS AND CU CE AND HISTORY ORGANIZ FIVE CAMPAIGN AND AN AC	ARTS AND CU RY 1 - APRIL ITE IN T HEM IN THEI LTURE ATIONS DITIONA		

Return Reference	Explanation
FORM 990, PAGE 2, PART III, LINE 4B	CULTURAL ORGANIZATIONS WITH BUDGETS OF 25,000 AND LESS OR DID NOT PROVIDE A FULL YEAR OF P ROGRAMMING ADDITIONAL GRANT OPPORTUNITIES INCLUDE 1) ARTS LEARNING GRANTS - FUNDED THROUG H ORANGE COUNTY, THIS PROGRAM SUPPORTS ARTS EDUCATION PROGRAMMING FOR INDIVIDUALS OF ALL A GES AS WELL AS TARGETS UNDERSERVED POPULATIONS IN FY18, UNITED ARTS AWARDED 22,100 IN FUN DING TO 15 ORGANIZATIONS FOR NON-SCHOOL BASED ARTS EDUCATION 2) DIVERSE PROGRAMMING GRANT S - FUNDED THROUGH A GRANT FROM DUKE ENERGY, THIS PROGRAM PROVIDES GRANTS FOR ARTS AND CUL TURAL PROGRAMMING THAT WILL APPEAL TO A WIDE RANGE OF AUDIENCES AND BE REFLECTIVE OF THE R ACIALLY/ETHNICALLY DIVERSE COMMUNITIES WE LIVE IN IN FY18, UNITED ARTS PROVIDED 31,000 IN FUNDING TO 10 ORGANIZATIONS COMBINED WITH OTHER CAPACITY BUILDING AND INCENTIVE GRANT PR OGRAMS, UNITED ARTS AWARDED OVER 1 8 MILLION IN GRANT FUNDS IN FY18 COMBINED WITH CONTRAC T SERVICE OPPORTUNITIES, DESIGNATED GIVING AND MATCHING FUNDS, UNITED ARTS INVESTED OVER 4 9 MILLION INTO THE ARTS AND CULTURAL COMMUNITY IN FY18

Return Reference	Explanation
FORM 990, PAGE 2, PART III, LINE 4C	HISTORY AND SCIENCE IN FY18, 74 DIVERSE CULTURAL ORGANIZATIONS - ALL OF THEM FUNDED BY UN ITED ARTS - PROVIDED 972,264 CURRICULUM-BASED ARTS EDUCATION EXPERIENCES FOR STUDENTS IN G RADES K-12 UNITED ARTS LARGEST EDUCATION CONTRACT IS WITH ORANGE COUNTY PUBLIC SCHOOLS (O CPS) TO PROVIDE CURRICULUM-BASED ARTS EDUCATION SERVICES TO OCPS STUDENTS IN K-12 (CONTRAC T AMOUNT - 454,656). IN FY18, THIS CONTRACT FACILITATED 97,878 K-12 CURRICULUM-BASED ARTS EDUCATION EXPERIENCES UNITED ARTS ACTIVELY SEEKS GRANT OPPORTUNITIES TO INCREASE THE BREA DTH OF ARTS EDUCATION EXPERIENCES EACH STUDENT WILL HAVE AND THE NUMBER OF STUDENTS THAT A RE SERVED EACH YEAR IN FY18, UNITED ARTS RECEIVED 80,000 IN GRANTS SPECIFICALLY FOR ARTS EDUCATION THROUGHOUT LAKE, ORANGE, OSCEOLA AND SEMINOLE COUNTIES, RESULTING IN AN ADDITION AL 47,707 ARTS EDUCATION EXPERIENCES THESE STUDENT WOULD NOT OTHERWISE HAVE HAD ACCESS TO IN FY18, UNITED ARTS COMPLETED THE SECOND YEAR OF A TWO-YEAR CREATIVE INDUSTRIES CURRICUL UM DEVELOPMENT PROGRAM FUNDED THROUGH A GRANT FROM THE JP MORGAN CHASE FOUNDATION THROUGH A COLLABORATION WITH UNITED ARTS, VALENCIA COLLEGE, AND THE SCHOOL DISTRICT OF OSCEOLA CO UNTY, THIS FUNDING WILL ALLOW A PLANNED STEM (SCIENCE, TECHNOLOGY, ENGINEERING, AND MATHEM ATICS) HIGH SCHOOL TO ADD ARTS TO THE CURRICULUM, MAKING IT A STEAM SCHOOL (OPENING FALL O F 2018) OVER FIVE HUNDRED STUDENTS HAVE REGISTERED FOR THE FIRST YEAR OF THE PROGRAM THI S IS UNITED ARTS' SECOND GRANT OF ITS KIND FROM THE JPMORGAN CHASE FOUNDATION, WITH THE FI RST FUNDING THE CREATION OF A PILOT CREATIVE INDUSTRY BACK-OF-HOUSE SKILLS PROGRAMS, PARTICIPATIN G STUDENTS CAN GRADUATE HIGH SCHOOL (OCPS) EVANS IS NOW AN ARTS MAGNATE SCHOOL IN THESE PROGRAMS, PARTICIPATIN G STUDENTS CAN GRADUATE HIGH SCHOOL WITH EITHER TECHNICAL SKILLS CERTIFICATIONS OR CONTINU E ON FOR A TWO-YEAR OR FOUR-YEAR DEGREE STUDENTS ENROLLED IN THE PROGRAM HAVE OPPORTUNITI ES TO INTERN WITH ART, SCIENCE AND HISTORY ORGANIZATIONS AN WELL AS LOCAL THEME PARKS, CON VENTION CENTERS AND OTHER CREA

Return Reference	Explanation
FORM 990, PAGE 2, PART III, LINE 4D	UNITED ARTS PROVIDES PROGRAMMING THAT RAISES AWARENESS FOR THE ARTS AND PROVIDES A SOURCE OF EARNED INCOME FOR THE ARTS AND CULTURAL ORGANIZATIONS IN THE CENTRAL FLORIDA REGION PR OGRAMS INCLUDE ORLANDO ARTS MAGAZINE - A BI-MONTHLY PUBLICATION (SIX ISSUES PUBLISHED PER YEAR, PASS THROUGH READERSHIP RATE OF 450,000 ANNUALLY) THAT ACTS AS A REFERENCE AND GUID E TO ARTS AND CULTURAL HAPPENINGS IN THE CENTRAL FLORIDA REGION AND TO THE INDIVIDUALS WHO MAKE IT HAPPEN THE MAGAZINE IS ALSO OFFERED AS A DONOR PREMIUM FOR CONTRIBUTIONS OF 50 O R MORE QUARTERLY RACK CARDS - INFORMATION CARDS AVAILABLE AT THE VISITOR'S CENTERS AT THE ORLANDO INTERNATIONAL AIRPORT PROVIDE VISITING NATIONAL AND INTERNATIONAL TOURISTS WITH I NFORMATION ON THE EXCITING ARTS AND CULTURAL HAPPENINGS GOING ON IN CENTRAL FLORIDA ORLAN DOATPLAY COM - AN EVENTS WEBSITE SERVING THE SEVEN-COUNTY CENTRAL FLORIDA REGION THE SITE PROVIDES INFORMATION ON ARTS, SCIENCE AND HISTORY AS WELL AS DINING, NATURE ACTIVITIES, FA RMERS MARKETS AND PUBLIC ART THE SITE SERVES RESIDENTS AND VISITORS AS A COMPREHENSIVE SI TE TO GO TO WHEN YOU ARE LOOKING FOR SOMETHING TO DO AND THE ARTS COMMUNITY AS A CENTRAL L OCATION FOR CULTURAL PROVIDERS TO POST INFORMATION TO SHARE LOCALLY AND NATIONALLY IN FY1 8, OVER 650 ORGANIZATIONS POSTED 3,000+ EVENTS ON THE SITE, THERE ARE 200+ PIECES OF PUBLIC CART AND 141 RESTAURANTS LISTED IN ADDITION, SITE VISITORS CAN SUBSCRIBE TO A WEEKLY E-N EWSLETTER (7,600 SUBSCRIBERS) THAT DELIVERS INFORMATION ON COMING EVENTS AND FREE AND DISC OUNTED EVENTS TO THEIR INBOX EACH WEEK IN FY18, THE SITE HAD 127,938 USERS WHO VISITED THE E SITE 156,631 TIMES AND VISITIONS AS CHORD AND ALADADA AND COURTED ARTSCARD - A DONOR PREMIUM FOR CONTRIBUTIONS OF 100 OR MORE, THE ARTSCARD PROVIDES DISCOUNTED ADMISSIONS AND CLASSES FOR 24+ PARTICIPATING AREA ART, SCIENCE, AND HISTORY ORGANIZATIONS OVE R 2.000 CARDS ARE DISTRIBUTED ANNUALLY GRANTS MANAGEMENT FOR OTHER ARTS CAPACITY BUILDING PROGRAMS - UNITED ARTS FACILIT ATES WORKSHOPS AND CAPACITY BUILDING OPPORTU

Return Explanation
Reference

FORM 990,	FORM 990 IS REVIEWED BY THE AUDIT AND FINANCE COMMITTEE AND THEN PRESENTED TO THE BOARD OF
PAGE 6,	DIRECTORS FOR APPROVAL BEFORE FILING
PART VI,	
LINE 11B	

Return Explanation
Reference

FORM 990, CONFLICT OF INTEREST FORMS ARE PROVIDED FOR VOTING MEMBERS TO COMPLETE AND VOTING MEMBERS PAGE 6, ABSTAIN ON VOTES IN WHICH THEY HAVE A CONFLICT OF INTEREST COMPLETED FORMS ARE KEPT ON FILE BY THE ORGANIZATION

LINE 12C

Return Explanation
Reference

FORM 990,	FOR THE ORGANIZATION'S PRESIDENT & CEO, A REVIEW COMMITTEE IS FORMED FROM MEMBERS OF THE E
PAGE 6,	XECUTIVE COMMITTEE THE COMMITTEE SOLICITS FEEDBACK ON THE PERFORMANCE OF THE PRESIDENT AN
PART VI,	D CEO FROM MEMBERS OF THE EXECUTIVE COMMITTEE THE REVIEW COMMITTEE REVIEWS THE FEEDBACK A
LINE 15A	ND MEETS IN EXECUTIVE SESSION WITH THE ORGANIZATION'S EXECUTIVE COMMITTEE A RECOMMENDATIO
	N ON A COMPENSATION PACKAGE FOR THE COMING YEAR IS PRESENTED TO THE EXECUTIVE COMMITTEE FO
	R DISCUSSION AND APPROVAL THE COMPENSATION PACKAGE RECOMMENDATION IS BASED ON COMPARABLE
	COMPENSATIONS FOR INDIVIDUALS IN LIKE POSITIONS NATIONALLY, COMPARABLE POSITIONS LOCALLY A
	ND PERFORMANCE

Return Explanation
Reference

FORM 990,	KEY EMPLOYEES ARE REVIEWED BY THE PRESIDENT & CEO SALARY RANGES ARE DEVELOPED USING COMPA
PAGE 6,	RABLE DATA FROM ROLLINS COLLEGES CENTRAL FLORIDA NONPROFIT COMPENSATION AND BENEFITS REPOR
PART VI,	T INCREASES ARE BASED ON MERIT
LINE 15B	

990 Schedule O, Supplemental Information Return Reference Explanation

FORM 990,
PAGE 6,
PART VI,
LINE 19

GOVERNING DOCUMENTS ARE AVAILABLE AT SUNBIZ ORG AND FROM UNITED ARTS OFFICES UPON REQUEST
THE FORM 990 AND AUDITED FINANCIAL STATEMENTS ARE POSTED TO THE ORGANIZATION'S WEBSITE AN
D GUIDESTAR ORG AND A COMPLETE PROFILE OF THE ORGANIZATION CAN BE FOUND AT CENTRAL FLORIDA
FOUNDATION'S NONPROFIT SEARCH AT CFFOUND GUIDESTAR ORG/FIND ASPX THE CONFLICT OF INTERES
T POLICY IS AVAILABLE UPON REQUEST

Return Explanation
Reference

FORM 990, PART XI, LINE 9