EXTENDED TO AUGUST 15, 2024 Form **990-T Exempt Organization Business Income Tax Return** OMB No. 1545-0047 (and proxy tax under section 6033(e)) For calendar year 2022 or other tax year beginning OCT 1, 2022 and ending SEP 30, 2023 Go to www.irs.gov/Form990T for instructions and the latest information. Department of the Treasury Open to Public Inspection for 501(c)(3) Organizations Only Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3). Internal Revenue Service Name of organization (Check box if name changed and see instructions.) Check hox if address changed. SARASOTA CONVENTION & VISITORS BUREAU, **B** Exempt under section Print INC 59-2189967 EGroup exemption number (see instructions) X 501(c)(6 or Number, street, and room or suite no. If a P.O. box, see instructions. Type 301 N CATTLEMEN ROAD, SUITE 203 220(e) 408(e) 408A]530(a) City or town, state or province, country, and ZIP or foreign postal code]529(a) [SARASOTA, FL 34232 529A Check box if 927,815. C Book value of all assets at end of year an amended return. X 501(c) corporation 501(c) trust 401(a) trust State college/university Other trust Check organization type Claim a refund shown on Form 2439 Check if filing only to Claim credit from Form 8941 Check if a 501(c)(3) organization filing a consolidated return with a 501(c)(2) titleholding corporation Enter the number of attached Schedules A (Form 990-T) X No During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? Yes If "Yes," enter the name and identifying number of the parent corporation. 941-955-0991 The books are in care of ANDREA HUNT Telephone number Total Unrelated Business Taxable Income Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions) 2 Reserved 2 3 3 Add lines 1 and 2 0. Charitable contributions (see instructions for limitation rules) 4 4 Total unrelated business taxable income before net operating losses. Subtract line 4 from line 3 5 5 0. Deduction for net operating loss. See instructions 6 6 Total of unrelated business taxable income before specific deduction and section 199A deduction. 7 7 Subtract line 6 from line 5 1,000. Specific deduction (generally \$1,000, but see instructions for exceptions) 8 8 9 **Trusts.** Section 199A deduction. See instructions 9 Total deductions. Add lines 8 and 9 1,000. 10 10

LHA For Paperwork Reduction Act Notice, see instructions.

Tax on noncompliant facility income. See instructions

Total. Add lines 3 through 6 to line 1 or 2, whichever applies

Tax Computation

Other tax amounts. See instructions

Proxy tax. See instructions

Unrelated business taxable income. Subtract line 10 from line 7. If line 10 is greater than line 7,

Trusts taxable at trust rates. See instructions for tax computation. Income tax on the amount on

Alternative minimum tax (trusts only)

Tax rate schedule or

Organizations taxable as corporations. Multiply Part I, line 11 by 21% (0.21)

Form 990-T (2022)

0.

11

<u>2</u> 3

4

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6

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3

4

5

6

Schedule D (Form 1041)

Part	III	Tax and Payments								<u> </u>
1a	Fore	ign tax credit (corporations attach Form 1	118; trusts attach For	m 1116)	1a					
b										
С	Gene	eral business credit. Attach Form 3800 (se	ee instructions)		1c					
d		it for prior year minimum tax (attach Form								
е							1e			
2	Subt						2			0.
3	Othe	r amounts due. Check if from: Form	4255 Form 8	611 Forn	m 8697 🔲 F	orm 8866				
		Other	r (attach statement)				3			
4	Tota	I tax. Add lines 2 and 3 (see instructions)								
	secti	on 1294. Enter tax amount here		•			4			0.
5	Curr	ent net 965 tax liability paid from Form 96					5			0.
6a	Payr	nents: A 2021 overpayment credited to 20	022		6a					
b	2022	estimated tax payments. Check if section	n 643(g) election appli	es	6b					
С	Tax	deposited with Form 8868			6c					
d	Fore	ign organizations: Tax paid or withheld at								
е	Back	cup withholding (see instructions)			6e					
f		it for small employer health insurance pre								
g	Othe	r credits, adjustments, and payments:			_ 46 /					
		Form 4136	Other	Tot	tal 6g					
7	Tota	I payments. Add lines 6a through 6g					7			
8	Estin	nated tax penalty (see instructions). Chec	k if Form 2220 is attac	hed		L	8			
9		due. If line 7 is smaller than the total of lir					9			
10		payment. If line 7 is larger than the total			rpaid		10			
11 Dort		r the amount of line 10 you want: Credite			****** / · · ·	Refunded	11			
Part		Statements Regarding Certain		_					$\overline{}$	
1		ny time during the 2022 calendar year, dic	· ·			•		Ye	es	<u>No</u>
		a financial account (bank, securities, or o			-	-				
		EN Form 114, Report of Foreign Bank and	d Financial Accounts.	ır "Yes," enter ti	ne name of the fo	reign country				v
•	here		and a street throat and the	- A W				— <u> </u>		<u>X</u>
2		ng the tax year, did the organization receives								X
		gn trust? es," see instructions for other forms the o								
3		r the amount of tax-exempt interest receiv				\$				
4		r available pre-2018 NOL carryovers here		323 - Do no	t include any post	Ψ <u></u>	rnyover			
7		vn on Schedule A (Form 990-T). Don't red								
5		-2017 NOL carryovers. Enter the Busines		•	•	-				
J		mounts shown below by any NOL claime		· ·	•					
	ti io c	Business Activ		r are ii, iii to 17 i		st-2017 NOL				
			.800		\$		131,1			
		<u> </u>			\$					
6a	Did t	he organization change its method of acc	ounting? (see instruct	ions)	, ·					Х
b		is "Yes," has the organization described	• (,)-PF, or Form 112	8? If "No,"				
		ain in Part V	_						Т	
Part	V	Supplemental Information								
Provide	e the e	explanation required by Part IV, line 6b. Al	so, provide any other	additional inforr	nation. See instru	ctions.				
			•							
0:		Under penalties of perjury, I declare that I have examined torrect, and complete. Declaration of preparer (other that					edge and bel	ef, it is true,		
Sign	[`	ones, and complete, because of property (care, and	I	·····anori or imiori proj	paro. Nao any mio moag	_	∕av the IRS o	discuss this retu	ırn wit	h
Here	١,			PRESI	DENT	t	he preparer s	shown below (se		
		Signature of officer	Date	Title		i		X Yes		No
		Print/Type preparer's name	Preparer's signature		Date	Check	if PTIN			
Paid				G14T		self- employed		10000	- 4	
Prepa	arer	CLINTON A. SMITH	CLINTON A.	SMITH	07/11/24	1		123626		
Use (Only		& KING LLC	ITI 201		Firm's EIN	34	-18972	425	
			STREET SUIT	E 301			/ O / 1 \	055 4		_
		Firm's address SARASOTA,	г⊔ 34⊿36			Phone no.	(ソ41)	ソ コ / -4	:∠4	4

223711 01-16-23

Form **990-T** (2022)

FORM 990-T	PRE-201	8 NET OPERATING	LOSS DEDUCTION	STATEMENT 1
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
09/30/15 09/30/16	116,198. 148,574.	116,198. 146,751.	1,823.	0. 1,823.
NOL CARRYOV	ER AVAILABLE THIS	YEAR	1,823.	1,823.



SCHEDULE A (Form 990-T)

Unrelated Business Taxable Income From an Unrelated Trade or Business

OMB No. 1545-0047

501(c)(3) Organizations Only

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form990T for instructions and the latest information. Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

SARASOTA CONVENTION & VISITORS BUREAU, B Employer identification number Name of the organization INC 59-2189967 541800 **D** Sequence: Unrelated business activity code (see instructions)

Describe the unrelated trade or business PROVIDE ADVERTISING OPPORTUNITIES TO MEMBERS Part I Unrelated Trade or Business Income (A) Income (B) Expenses (C) Net 1a Gross receipts or sales **b** Less returns and allowances 1c Cost of goods sold (Part III, line 8) 2 2 Gross profit. Subtract line 2 from line 1c 3 4a Capital gain net income (attach Schedule D (Form 1041 or Form 1120)). See instructions 4a Net gain (loss) (Form 4797) (attach Form 4797). See instructions) 4b Capital loss deduction for trusts 4c Income (loss) from a partnership or an S corporation (attach statement) 5 Rent income (Part IV) 6 Unrelated debt-financed income (Part V) 7 8 Interest, annuities, royalties, and rents from a controlled organization (Part VI) 8 Investment income of section 501(c)(7), (9), or (17) organizations (Part VII) Exploited exempt activity income (Part VIII) 10 184,879. 105,408. 79,471. 11 11 Advertising income (Part IX) Other income (see instructions; attach statement) 12 12 105,408. 13 184,879. 79,471. **Total.** Combine lines 3 through 12

Part II Deductions Not Taken Elsewhere See instructions for limitations on deductions. Deductions must be directly connected with the unrelated business income

1	Compensation of officers, directors, and trustees (Part X)			1	
2	Salaries and wages			2	116,096.
3	Repairs and maintenance			3	
4	Bad debts			4	
5	Interest (attach statement). See instructions			5	
6	Taxes and licenses			6	
7	Depreciation (attach Form 4562). See instructions				
8	Less depreciation claimed in Part III and elsewhere on return	8a		8b	
9	Depletion			9	
10	Contributions to deferred compensation plans			10	
11	Employee benefit programs			11	
12	Excess exempt expenses (Part VIII)			12	
13	Excess readership costs (Part IX)			13	79,471.
14	Other deductions (attach statement)			14	
15	Total deductions. Add lines 1 through 14			15	195,567.
16	Unrelated business income before net operating loss deduction. Subtract line 15 from	Part	I, line 13,		
	column (C)			16	-116,096.
17	Deduction for net operating loss. See instructions			17	0.
18	Unrelated business taxable income. Subtract line 17 from line 16			18	-116,096.
ιцΛ	For Department, Deduction Act Notice, and instructions			Schodul	A (Form 000-T) 2022

LHA For Paperwork Reduction Act Notice, see instructions.

Schedule A (Form 990-T) 2022

Part	III Cost of Goods Sold Enter meth	nod of inventory valuat	ion		r ago <u>=</u>
1	Inventory at beginning of year	•		1	
2	Purchases				
3	Cost of labor				
4	Additional section 263A costs (attach statement)			4	
5	Other costs (attach statement)				
6	Total. Add lines 1 through 5				
7	Inventory at end of year			_	
8	Cost of goods sold. Subtract line 7 from line 6. Enter h				
9	Do the rules of section 263A (with respect to property p	•			Yes No
Part					
1	Description of property (property street address, city, st	· · · · · · · · · · · · · · · · · · ·	-		
•	A	tate, Zii codej. Oricek	ii a duai usc. occ iiisti	actions.	
	В				
	c \square				
	D				
		Α	В	C	D
2	Rent received or accrued	A	В		
а	From personal property (if the percentage of				
	rent for personal property is more than 10%				
	but not more than 50%)				
b	From real and personal property (if the				
	percentage of rent for personal property exceeds				
	50% or if the rent is based on profit or income)				
С	Total rents received or accrued by property.				
	Add lines 2a and 2b, columns A through D				
•	T				0.
3	Total rents received or accrued. Add line 2c columns A	through D. Enter nere	and on Part I, line 6, c	olumn (A)	
	Deductions directly connected with the income				
4	in lines 2(a) and 2(b) (attach statement)				
_	-		l: 0 l (D)		0.
5 Part	Total deductions. Add line 4 columns A through D. En V Unrelated Debt-Financed Income (se	ter nere and on Part I,	line 6, column (B)		<u> </u>
	·		Nanali if a divalivas Car		
1	Description of debt-financed property (street address, o	city, state, ZIP code). C	neck if a dual-use. See	e instructions.	
	A				
	B				
	D				
•	Out of the same from an allowable to debt forward	A	В	С	D
2	Gross income from or allocable to debt-financed				
•	property				
3	Deductions directly connected with or allocable				
	to debt-financed property				
а	Straight line depreciation (attach statement)				
b	Other deductions (attach statement)				
С	Total deductions (add lines 3a and 3b,				
	columns A through D)				
4	Amount of average acquisition debt on or allocable				
	to debt-financed property (attach statement)				
5	Average adjusted basis of or allocable to debt-				
	financed property (attach statement)				
6	Divide line 4 by line 5	%	%		% %
7	Gross income reportable. Multiply line 2 by line 6				
8	Total gross income (add line 7, columns A through D).	. Enter here and on Par	rt I, line 7, column (A)	<u> </u>	0.
			,		
9	Allocable deductions. Multiply line 3c by line 6				
10	Total allocable deductions. Add line 9, columns A three				0.
11	Total dividends-received deductions included in line	10			0.

Part	VI Interest, Annu	uities, R	oyalties, and Re	ents fror	n Control	led Or	ganizations	s (se	e instructi	ions)	Page 3	
						E	Exempt Contro					
	 Name of controlled organization 		2. Employer identification number				al of specified nents made	5. Part of column 4 that is included in the controlling organiza- tion's gross income		n the niza-	connected with	
(1)												
(2)												
(3)												
(4)						<u> </u>						
					Controlled O	-					D 1 11 11 11	
,	. Taxable Income	ir	Net unrelated acome (loss) e instructions)		otal of specif yments mad		that is inc controlling gross	luded ir	n the ation's		Deductions directly connected with come in column 10	
(1)												
(2)												
(3)												
(4)							A					
							Add colum Enter here line 8, c	and on	Part I,	Ente	columns 6 and 11. r here and on Part I, ne 8, column (B)	
Totals Part	VII Investment	Income	of a Section 50	1(c)(7) (9) or (17)	Organ	nization (a	aa inatu	0.		0.	
		cription of		1(0)(1); (2. Amou		3. Deduction		uctions) 4. Set-a	acidac	5. Total deductions	
		onpulon or			incon		directly conne (attach state)	ected	(attach st			
(1)												
(2)												
(3)												
(4)					-							
Totals					Add amou column 2 here and o line 9, colu	Enter n Part I, ımn (A) 0 •					Add amounts in column 5. Enter here and on Part I, line 9, column (B)	
Part	VIII Exploited E	xempt A	Activity Income,	Other 1	Than Adve	ertising	g Income	see ins	tructions)			
1	Description of exploite	ed activity:										
2	Gross unrelated busin	ess incom	e from trade or busi	ness. Ente	here and o	n Part I,	line 10, colum	n (A) .		2		
3	Expenses directly con											
	line 10, column (B)									3		
4	Net income (loss) from lines 5 through 7	unrelated	trade or business.	Subtract lir	ne 3 from line	∋ 2. If a (gain, complete			4		
5	Gross income from ac									5		
6	Expenses attributable	to income	entered on line 5							6		
7	Excess exempt expen											
	4. Enter here and on F	Part II. line	12							7		

Schedule A (Form 990-T) 2022

1 Nam	Advertising Income					
	ne(s) of periodical(s). Check box if reporti	ing two or mo	re periodicals on a c	onsolidated basis	S.	
A [VISITORS GUIDE					
в						
c 🛚						
D L						
Enter amour	nts for each periodical listed above in the	e correspondi	ng column.			
			A 104 070	В	С	D
	ss advertising income		184,879.			104 070
	columns A through D. Enter here and or	n Part I, line 1	1, column (A)			184,879.
a Direc	at advertising easts by paviadical		105,408.			
	ct advertising costs by periodical columns A through D. Enter here and or					105,408.
a Auu	Columns A timough b. Enter here and or	ii Faiti, iiile i	1, Column (B)			103,400.
4 Adve	ertising gain (loss). Subtract line 3 from li	ine				
	or any column in line 4 showing a gain,					
	uplete lines 5 through 8. For any column	in			4	
	4 showing a loss or zero, do not complet	I				
lines	s 5 through 7, and enter zero on line 8		79,471. 128,454.			
5 Read	dership costs		128,454.			
6 Circ	ulation income					
	ess readership costs. If line 6 is less than	I				
	5, subtract line 6 from line 5. If line 5 is le	I .	100 454			
	ı line 6, enter zero		128,454.			
	ess readership costs allowed as a					
	uction. For each column showing a gain	I	79,471.			
	4, enter the lesser of line 4 or line 7 line 8, columns A through D. Enter the g			al or zoro boro an	d on	
	III, line 13	greater or the	ine oa, columns tota			79,471.
Part X	Compensation of Officers, Di	irectors, a	nd Trustees (se	e instructions)		,
					3. Percentage	4. Compensation
	d Name		2. Title		of time devoted	attributable to
	1. Name		2. Title			attributable to
	i. Name		Z. Title		to business	unrelated business
	і. Nате		2. 100		to business %	
(2)	i. Name		2. Title		to business %	
(2) (3)	i. Name		Z. Title		to business % %	
(2) (3)	i. Name		Z. Tille		to business %	
(2) (3) (4)			Z. Title		to business % %	unrelated business
(2) (3) (4) Total. Ente	r here and on Part II, line 1	see instruction			to business % %	
(1) (2) (3) (4) Total. Ente		see instruction			to business % %	unrelated business
(2) (3) (4) Total. Ente	r here and on Part II, line 1	see instruction			to business % %	unrelated business
2) 3) 4) Total. Ente	r here and on Part II, line 1	see instruction			to business % %	unrelated business
(2) (3) (4) Total. Ente	r here and on Part II, line 1	see instruction			to business % %	unrelated business
(2) (3) (4) Total. Ente	r here and on Part II, line 1	see instruction			to business % %	unrelated business
(2) (3) (4) Total. Ente	r here and on Part II, line 1	see instruction			to business % %	unrelated business
(2) (3) (4) Total. Ente	r here and on Part II, line 1	see instruction			to business % %	unrelated business
(2) (3) (4) Total. Ente	r here and on Part II, line 1	see instruction			to business % %	unrelated business
(2) (3) (4) Total. Ente	r here and on Part II, line 1	see instruction			to business % %	unrelated business
(2) (3) (4) Total. Ente	r here and on Part II, line 1	see instruction			to business % %	unrelated business
(2) (3) (4) Total. Ente	r here and on Part II, line 1	see instruction			to business % %	unrelated business
(2) (3) (4) Total. Ente	r here and on Part II, line 1	see instruction			to business % %	unrelated business
(2) (3) (4) Total. Ente	r here and on Part II, line 1	see instruction			to business % %	unrelated business
(2) (3) (4) Total. Ente	r here and on Part II, line 1	see instruction			to business % %	unrelated business
(2) (3) (4) Total. Ente	r here and on Part II, line 1	see instruction			to business % %	unrelated business

FORM 990-T	DESCRIPTION OF ORGANIZATION'S	UNRELATED	STATEMENT 2
SCHEDULE A	BUSINESS ACTIVIT	Y	

PROVIDE ADVERTISING OPPORTUNITIES TO MEMBERS VIA VARIOUS MEDIUMS

TO FORM 990-T, SCHEDULE A, LINE E

990-T SCH	A POST-20	17 NET OPERATING	LOSS DEDUCTION	STATEMENT 3
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
09/30/20 09/30/21 09/30/22	162,573. 91,705. 176,890.	0. 0. 0.	162,573. 91,705. 176,890.	162,573. 91,705. 176,890.
NOL CARRYO	VER AVAILABLE THIS	YEAR	431,168.	431,168.