MCKEE BOTANICAL GARDEN, INC.

FORM 990

TAX YEAR ENDED JUNE 30, 2021

PUBLIC INSPECTION COPY

Form **990**

Return of Organization Exempt From Income Tax

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

Department of the Treasury Internal Revenue Service

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

OMB NO, 13	10-0047
202	20
Open to F Inspect	ublic ion

A For the 2020 calendar year, or tax year beginning JUL 1, 2020 and ending JUN 30, 2021							
B Check II		C Name of organization		D Employer identification number			
epplicable:		le:	, Employe				
Г	Addre	MCKEE BOTANICAL GARDEN, INC.	ĺ				
change change		Doing business as	—— ₆₅₋ -	11898	95		
누	Initial						
늗	returr Final	250 rg may 1		E Telephone number (772) 794-0601			
<u> </u>	Ireturn termin			2 225 242			
Г	aled Amen	City or town, state or province, country, and ZIP or foreign postal code VERO BEACH, FL 32962	h	G Gross receipts 3,306,919. H(a) Is this a group return			
H	lreturn Applic ltion			for subordinates? Yes X No			
L_	llion pendi			H(b) Are all subordinates Included? Yes No			
_	~		 ` '				
		empt status: X 501(c)(3) 501(c) ()		H(c) Group exemption number			
					M State of legal domicile; FL		
	art I	Summary	Year of formation, 2	1003[Al State of legal domiche, T. T.		
			ACHED STAT	EMENI	T)		
ģ	1	Briefly describe the organization's mission or most significant activities: $\underline{ ext{SEE}}$ $\underline{ ext{ATT}}$	ACUED STAT	EMPH.	<u>r </u>		
Governance			. 11 . 0507 . (1)				
Ē	2	Check this box if the organization discontinued its operations or disposed of		1	23		
õ	3	, ,	.,		23		
ಇರ		Number of independent voting members of the governing body (Part VI, line 1b)			32		
jes	5	Total number of individuals employed in calendar year 2020 (Part V, line 2a)			89		
Activities	6	Total number of volunteers (estimate if necessary)			54,756.		
Act	7 a	Total unrelated business revenue from Part VIII, column (C), line 12			0.		
	b	Net unrelated business taxable income from Form 990-T, Part I, line 11	1				
			Prior Yea		Current Year		
학	8	Contributions and grants (Part VIII, line 1h)	1,002,		1,411,787.		
Ве чепие	9	Program service revenue (Part VIII, line 2g)		847.	875,488.		
ě	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)			653,908.		
-	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		795.	103,744.		
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,656,		3,044,927.		
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.		
		Benefits paid to or for members (Part IX, column (A), line 4)	753,		827,844.		
9	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	/53,	<u> </u>			
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	ariginal relias, and a		• 0 • (A.C.) (A.		
χ̈	_b	Total fundraising expenses (Part IX, column (D), line 25) 207,628.	1,018,		1,069,341.		
ш	'''	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,771,				
	l .	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)			1,897,185.		
		Revenue less expenses. Subtract line 18 from line 12	-114,		1,147,742.		
S OF	١.		Beginning of Curre		End of Year		
t Assets of Balanci	20	Total assets (Part X, line 16)	14,777,		15,989,636. 171,470.		
Net A	21	Total liabilities (Part X, line 26)	14,670,		15,818,166.		
칊	22	Net assets or fund balances. Subtract line 21 from line 20	14,670,	4441	13,010,100.		
					Impulled a and ballof it is		
		lies of perjury, I declare that I have examined this return, including accompanying schedules and sta			knowledge and deller, it is		
true,	correct	, and complete. Declaration of preparer (other than officer) is based on all information of which prep	parer has any knowled	ige.			
		Signature of officer	I Date	-			
Sign		· ·	21.0				
Here		J. EARL MORGAN III, PRESIDENT Type or print name and title	···-				
			Date	Check	PTIN		
Dald		Print/Type preparer's name VILLIAM F. SCHLITT	40,00,00	it '-			
Paid Preparer				self-employed EIN ▶ 4	16-1585527		
_			FIIII S	CHA 💽 🥫	10 1303341		
				72) 231-2100			
	Aha ID	S discuss this return with the preparer shown above? See instructions	Frione	110. \ / /	X Yes No		
way	uie IH	o discuss this return with the proparer shown above? See instructions	.,,	<u></u>			

For		BOTANICAL GARDEN, INC.	65-11	.8 <u>9</u> 895 Page 2
Р	art III Statement of Program S	-		
_		response or note to any line in this Part III		
1	Briefly describe the organization's mis SEE ATTACHED STATEM		· · · · · · · · · · · · · · · · · · ·	
2	Did the organization undertake any sig	nificant program services during the year whi	ich were not listed on the	
	prior Form 990 or 990-EZ? If "Yes," describe these new services of	on Schedule O.		Yes X No
3	Did the organization cease conducting	, or make significant changes in how it condu	ucts, any program services?	Yes X No
4		ervice accomplishments for each of its three I		
	Section 501(c)(3) and 501(c)(4) organize revenue, if any, for each program service.	ations are required to report the amount of gr ce reported.	rants and allocations to others, the total	expenses, and
4a	(Code:) (Expenses \$1 SEE ATTACHED STATEME	, 459, 937. Including grants of \$) (Revenue \$	924,476.)
				
4b	(Code:) (Expenses \$	including grants of \$) (Revenue \$,
				
		· · ·		
		_		
4c	(Code:) (Expenses \$	including grants of \$) (Revenue \$	}
			<u> </u>	
4.4	Other program services (Describe on Sc	hadula ())		
	(Expenses \$	including grants of \$) (Revenue \$	1
le	Total program service expenses	1,459,937.		Form 990 (2020)
				()

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Part IV | Checklist of Required Schedules

			Yes	No
1	3			
	If "Yes," complete Schedule A	1	Х	<u> </u>
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	<u> </u>
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect		1	
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	ł	ļ	İ
	similar amounts as defined in Revenue Procedure 98-197 If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	1]
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	_6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?		ļ	ľ
	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X	1 7		. 1.7
••	as applicable.			A 1:
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	2.5	in a r	
a	, , , , , , , , , , , , , , , , , , ,	11a	х	
L	Part VI Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	110		
Ų		11b		х
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	110		<u></u>
C	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	44.		х
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		
a	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in	المدا		v
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		$\frac{\mathbf{x}}{\mathbf{x}}$
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	-	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	ا ا	v	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? # "Yes," complete		37	
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		$\frac{x}{x}$
	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u>X</u>
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			77
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u>X</u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		<u>X</u> _
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	ŀ		
	or for foreign individuals? // "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,		- 1	
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	_18		<u>X</u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? # "Yes,"	- 1		
	complete Schedule G, Part III	19		<u>X</u>
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		<u>x</u> _
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		<u>X</u> _
	40.00.00	Form 9	ነባበ /ኅ	กวกเ

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		1	
	Part IX, column (A), line 27 If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current	ł		i
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete	١,,		X
04.	Schedule J	23	1	<u>^</u>
248	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	1		İ
	Schedule K. If "No," go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	<u> </u>		i
	any tax-exempt bonds?	24c		ļ
c	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	_24d	ĺ	
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	1		
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	-		
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			x
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27	11.	<u>. A.</u>
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):			
_	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? #		7 - 5	,÷
а	"Yes," complete Schedule L, Part IV	28a		Х
h	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? //			
_	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		_X_
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32	1	<u> </u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			7.7
	sections 301.7701-2 and 301.7701-37 If "Yes," complete Schedule R, Part I	33	\vdash	X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and		Ì	v
	Part V, line 1	34		<u> </u>
	Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	35a		
В	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	1000		
JU	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
- .	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V	······	 ,	Ш
	1 1	F 15 55	Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	101		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		x	.: . '
-	(gambling) winnings to prize winners?	1c Form	990 (2	2020
J2UU4	12-23-20	, 5,111	(2	0)