



FLORIDA DEPARTMENT OF AGRICULTURE AND CONSUMER SERVICES
COMMISSIONER ADAM H. PUTNAM

July 31, 2015

The Honorable Rick Scott
Plaza Level 05, The Capitol
400 South Monroe Street
Tallahassee, Florida 32399

Dear Governor Scott:

To meet the requirements of Chapter 20.058, F.S., attached are reports detailing the mission, results, three-year outlook, and financial information of the six (6) Florida Department of Agriculture and Consumer Services' Direct Support Organizations (DSO). The six DSOs are:

- Friends of the Florida State Forests
- Forestry Arson Alert Association, Inc.
- Florida Agriculture Museum
- Florida Agriculture in the Classroom
- Florida Horse Park
- Living Healthy in Florida, Inc.

Given the contributions that these six DSO's provide to the Department of Agriculture and Consumer Services in fulfilling its mission and goals, the Department recommends that its association with the Friends of the Florida State Forests, Forestry Arson Alert Association, Inc., Florida Agriculture Museum, Florida Agriculture in the Classroom, Florida Horse Park and Living Healthy in Florida, Inc., be continued.

Should you have any questions regarding the information disclosed in these reports, please don't hesitate to contact my office at 850.617.7700 or Grace.Lovett@freshfromflorida.com.

Sincerely,

Grace P. Lovett
Director, Office of Legislative Affairs



OFFICE OF THE COMMISSIONER
(850) 617-7700



THE CAPITOL
400 SOUTH MONROE STREET
TALLAHASSEE, FLORIDA 32399-0800

FLORIDA DEPARTMENT OF AGRICULTURE AND CONSUMER SERVICES
COMMISSIONER ADAM H. PUTNAM

Friends of the Florida State Forests

**Florida Department of Agriculture and Consumer Services
DIRECT SUPPORT ORGANIZATION
2015 REPORT
IMPLEMENTATION OF COMMITTEE SUBSTITUTE SENATE BILL 1194**

Direct Support Organization (DSO) Name: **Friends of Florida State Forests**

Mailing address: **3125 Conner Boulevard, Room 253, Tallahassee, Florida, 32399-1650**

Telephone Number: **(850) 681-5875** Website Address: **www.floridastateforests.org**

Statute Authority:

Section 589.012, F.S., Friends of Florida State Forests Program (Friends). *In summary*, the statute establishes Friends as a program of the Department of Agriculture and Consumer Services (department) and establishes the purpose of the program is to provide support and assistance for existing and future programs of the Florida Forest Service.

Section 570.691, F.S., Direct support organizations. *In summary*, the statute states the department may establish direct support organizations to provide assistance, funding, and promotional support for the museums and other programs of the department and lists the provisions that govern the creation, use, powers, and duties of the direct support organizations.

Brief Description of the DSO's Mission:

Through community support, assist the Florida Forest Service to expand opportunities for recreation (hunting, horseback riding, hiking, Off Highway Vehicle, etc.), environmental education, and forest management within Florida's state forests.

Brief Description of the DSO's Results Obtained:

In fiscal year 2014-15, current and new partners contributed including Arbor Day Foundation, Daughters of the American Revolution, Mickman Brothers, Techno Brain, Inc., Gray Robinson Law Firm and the National Fish and Wildlife Foundation for supplementary reforestation on 6 state forests and scrub habitat restoration project at Seminole State Forest. Increased program awareness by participating in 18 outreach and fundraising events statewide, promoting the program and recruiting new members and partners through website enhancements, realigned billboard advertising for travelers on interstates entering Florida, and was included again in the Undiscovered Florida magazine distributed online and at the (5) Visit Florida Welcome Centers. In addition, received various donations statewide meeting many needs of various Florida state forests. Provided fiscal support for Operation Outdoor Freedom, Section 589.19(4), F.S.

Brief Description of the DSO's Plans for Next Three Fiscal Years:

Friends, through internal and external support, will assist the Florida Forest Service in expanding opportunities for recreation, environmental education, and forest management and improve the quality of the programs and activities offered on Florida state forests. Goals include increasing membership in the program, increasing annual day-use pass sales online, and increase contributions and donations that will benefit each and all of the state forests and also benefit statewide forest projects, needs and outreach. In addition, planning includes increased awareness of the program through various media and advertising options statewide and beyond. Friends may be the DSO for the Babcock Ranch Preserve which will come under department management in 2016, Section 259.10521, F.S. Friends will also continue to support Operation Outdoor Freedom.

* Copy of Friends of Florida State Forests Code of Ethics attached.

** Per our CPA firm, because Friends of Florida State Forests is a DSO of the State, there is not a 990 filing requirement. See documentation from the Internal Revenue Service. In lieu of the 990, attached are two financial reports provided to the department annually.

FRIENDS OF FLORIDA STATE FORESTS CODE OF ETHICS

PREAMBLE

- (1) It is essential to the proper conduct and operation of Friends of Florida State Forests (herein "DSO") that its board members, officers, and employees be independent and impartial and that their position not be used for private gain. Therefore, the Florida Legislature in Section 112.313, Florida Statute (Fla. Stat.), requires that the law protect against any conflict of interest and establish standards for the conduct of DSO board members, officers, and employees in situations where conflicts may exist.

- (2) It is hereby declared to be the policy of the State that no DSO board member, officer or employee shall have an interest, financial or otherwise, direct or indirect, or incur any obligation of any nature which is in substantial conflict with the proper discharge of his or her duties for the DSO. To implement this policy and strengthen the faith and confidence of the people in Direct Support Organizations, there is enacted a code of ethics setting forth standards of conduct required of Friends of Florida State Forests board members, officers, and employees in the performance of their official duties.

STANDARDS

The following standards of conduct are enumerated in Chapter 112, Fla. Stat., and are required by Section 112.313, Fla. Stat., to be observed by DSO board members, officers, and employees.

1. Prohibition of Solicitation or Acceptance of Gifts

No DSO board member, officer, or employee shall solicit or accept anything of value to the recipient, including a gift, loan, reward, promise of future employment, favor, or service, based upon any understanding that the vote, official action, or judgment of the DSO board member, officer, or employee would be influenced thereby.

2. Prohibition of Accepting Compensation Given to Influence a Vote

No DSO board member, officer, or employee shall accept any compensation, payment, or thing of value when the person knows, or, with reasonable care, should know that it was given to influence a vote of other action in which the DSO board member, officer, or employee was expected to participate in his or her official capacity.

3. Salary and Expenses

No DSO board member or officer shall be prohibited from voting on a matter affecting his or her salary, expenses, or other compensation as a DSO board member or officer, as provided by law.

4. Prohibition of Misuse of Position

A DSO board member, officer, or employee shall not corruptly use or attempt to use one's official position or any property or resource which may be within one's trust, or perform official duties, to secure a special privilege, benefit, or exemption.

5. Prohibition of Misuse of Privileged Information

No DSO board member, officer, or employee shall disclose or use information not available to members of the general public and gained by reason of one's official position of one's own personal gain or benefit or for the personal gain or benefit of any other person or business entity.

6. Post-Office/Employment Restrictions

A person who has been elected to any DSO board or office or who is employed by a DSO, may not personally represent another person or entity for compensation before the governing body of the DSO of which he or she was a board member, officer, or employee for a period of two years after he or she vacates that office or employment position.

7. Prohibition to Employees Holding Office

No person may be, at one time, both a DSO employee and a DSO board member at the same time.

8. Requirements to Abstain From Voting

A DSO board member or officer shall not vote in official capacity upon any measure which would affect his or her special private gain or loss, or which he or she knows would affect the special gain or any principal by whom the board member or officer is retained. When abstaining, the DSO board member or officer, prior to the vote being taken, shall make every reasonable effort to disclose the nature of his or her interest as a public record in a memorandum filed with the person responsible for recording the minutes of the meeting, who shall incorporate the memorandum in the minutes. If it is not possible for the DSO board member or officer to file a memorandum before the vote, the memorandum must be filed with the person responsible for recording the minutes of the meeting no later than 15 days after the vote.

9. Failure to Observe DSO Code of Ethics

Failure of a DSO board member, officer or employee to observe the Code of Ethics may result in the removal of that person from their position. Further, failure of the DSO to observe the Code of Ethics may result in the Florida Department of Agriculture and Consumer Services terminating its Agreement with the DSO.

(Chapter 2014-96, Laws of Florida SB No. 1194), FFSF Board Approved 8.4.14

Department of the Treasury Internal Revenue Service

Facsimile Cover Sheet



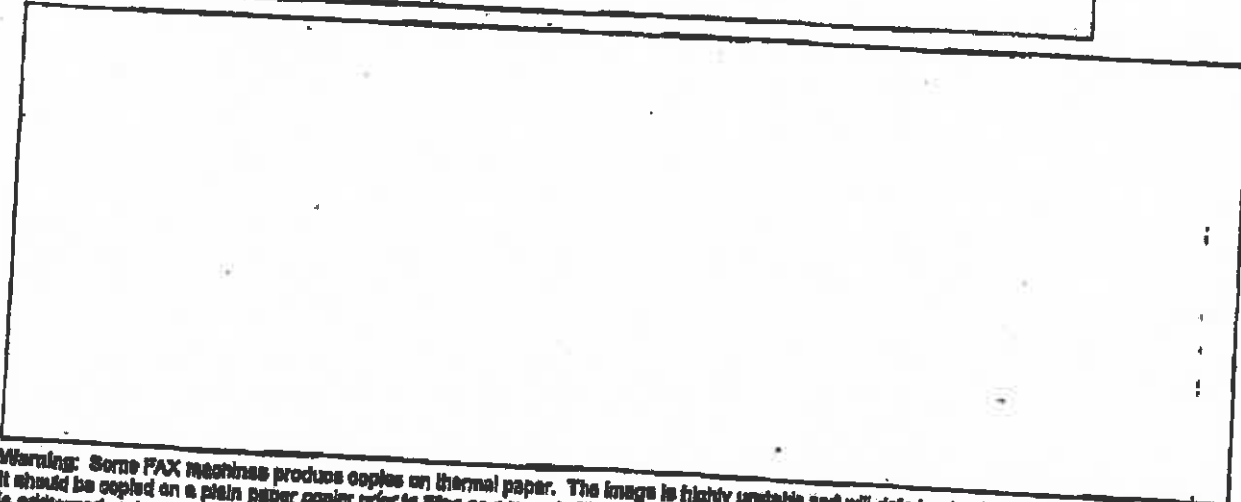
Tax Exempt and Government Entities Division
Customer Service
P. O. Box 2508
Cincinnati, Ohio 45201

Jeremy L. Vogelpohl
Customer Service Representative # 31-03888
Customer Service Group 3

www.irs.gov

Telephone: 877-829-5500
Fax: 513-263-3756

Date	April 27, 2004
Organization	
Attention	Harper
Fax Number	850-942-5645
Phone Number	850-878-2494
Total Pages Including Cover Sheet	3



Warning: Some FAX machines produce copies on thermal paper. The image is highly unstable and will deteriorate significantly in a few years. It should be copied on a plain paper copier prior to filing as a record. This communication is intended for the sole use of the individual to whom it is addressed and may contain information that is privileged, confidential, and exempt from disclosure under applicable law. If the reader of this communication is not the intended recipient or the employee or agent responsible for delivering the communication to the intended recipient, you are hereby notified that any dissemination, distribution, or copying of this communication may be strictly prohibited. If you receive this communication in error, please notify the sender immediately by phone call, and return the communication at the address above via fax or U.S. Postal Service.

INTERNAL REVENUE SERVICE
P. O. BOX 2508
CINCINNATI, OH 45201

DEPARTMENT OF THE TREASURY

Date: OCT 07 2003

Employer Identification Number:

59-2504595

DIN:

203216089

Contact Person:

MR CARL MEDLEY

ID# 52406

Contact Telephone Number:

(877) 829-5500

FRIENDS OF FLORIDA STATE FORESTS
INC

C/O THE DIRECTOR DIVISION OF FORESTRY
3125 CONNER BLVD C25
TALLAHASSEE, FL 32399-6578

Date of Exemption:

March 24, 1998

Internal Revenue Code

Section 501(c)(3)

Dear Applicant:

Thank you for submitting the information shown on the enclosure. We have made it a part of your file.

The changes indicated do not adversely affect your exempt status and the exemption letter issued to you continues in effect.

Please let us know about any future change in the character, purpose, method of operation, name or address of your organization. This is a requirement for retaining your exempt status.

Thank you for your cooperation.

Sincerely yours,



Lois G. Lerner
Director, Exempt Organizations
Rulings and Agreements

Letter 976 (DO/CG)

-2-

FRIENDS OF FLORIDA STATE FORESTS

Item Changed	From	To
990 Filing requirement	Required	Not Required

Letter 976 (DO/CG)

**Friends of Florida State Forests, Inc.
 Balance Sheet
 As of June 30, 2015**

	Jun 30, 15
ASSETS	
Current Assets	
Checking/Savings	
1080 - Merrill Lynch Portfolio	5.19
1080.04 - Friends	135,157.88
1080.03 - Point Washington	1,983,551.51
1080.02 - Peace River	363,600.46
1080.01 - Gopher Tortoise	
Total 1080 - Merrill Lynch Portfolio	2,482,315.04
1000 - Bank of America	
1000.01 - Checking - 6446	200,341.76
1000.02 - Savings - 7020	
D1 KRUL Recreation Area	325.86
D11 - Radar Hill	3,768.00
D17 - Jerjo Mitigation	7,500.00
D17 Fakahatchee Mitigation	42,988.79
Friends	2,466.87
Point Washington	23,600.00
Teachers Tour -Restricted	25,850.00
1000.02 - Savings - 7020 - Other	843,749.55
Total 1000.02 - Savings - 7020	950,449.07
Total 1000 - Bank of America	
	1,150,790.83
1010 - Flag Credit Union	
1010.02 - D10 - Tiger Bay Gopher Tortoise	
CD -1.6% - Matures 1/08/11	7,508.60
Money Market 12147	70.35
Total 1010.02 - D10 - Tiger Bay Gopher Tortoise	7,578.85
Total 1010 - Flag Credit Union	
	7,578.85
1040 - Florida Capital	
DOT Tortoise Mitigation	
Checking-45288-Untrd Int Income	1.74
Total DOT Tortoise Mitigation	1.74
Total 1040 - Florida Capital	
	1.74
Total Checking/Savings	
	3,640,886.46
Other Current Assets	
1300 - Prepaid Expenses	
1300.01 - Web Hosting	198.36
	198.36

Friends of Florida State Forests, Inc.
Balance Sheet
 As of June 30, 2016

	Jun 30, 16
1300.02 · Liability Insurance	1,048.50
Total 1300 · Prepaid Expenses	1,244.86
1301 · Inventory	1,319.89
Membership Pins	656.00
Withlacoochee T-Shirt	
Total 1301 · Inventory	1,975.89
Total Other Current Assets	3,220.75
Total Current Assets	3,643,907.21
TOTAL ASSETS	
LIABILITIES & EQUITY	
Liabilities	
Current Liabilities	
Credit Cards	12,774.28
BOA- Credit Card Payable	12,774.28
Total Credit Cards	12,774.28
Other Current Liabilities	1,016.68
2300 · Deferred Revenue	188.03
2300 · Deferred Revenue - Other	
Total 2300 · Deferred Revenue	1,202.91
28500 · Sales Tax Payable	1.52
Sales Tax - Hardee County	31.56
Sales Tax - Santa Rosa	16.70
Sales Tax - Hernando	
Total 28500 · Sales Tax Payable	49.78
Total Other Current Liabilities	1,252.69
Total Current Liabilities	14,026.97
Total Liabilities	14,026.97

Friends of Florida State Forests, Inc.
Balance Sheet
 As of June 30, 2015

	Jun 30, 15
Equity	
2500 - Restricted District Funds	
2501 - D1 Blackwater	
Blackwater-FL Gas Easement	41,875.38
BRSF-Tourism Development Grant	118.69
Coldwater Rec Area	-146.70
FFA Event	138.90
Foxhunters	350.00
General Fund	5,079.92
Map	6,971.03
Tall Timbers	361.00
Tee shirts	604.14
2501.01 - Blackwater Dist Reforestation	
Blackwater River State Forest	88,275.00
Arbor Day	85,726.00
NFWF	174,000.00
Total Blackwater River State Forest	174,000.00
Total 2501.01 - Blackwater Dist Reforestation	174,000.00
Woodyard Reforestation	2,630.00
Total 2501 - D1 Blackwater	231,972.36
2502 - D2 Chipola	
2502.01 - Pt. Washington	126.75
General Fund	154,689.11
Point Washington Mitigation	154,814.86
Total 2502.01 - Pt. Washington	154,814.86
Total 2502 - D2 Chipola	154,814.86
2504 - D4 Tallahassee	
General Fund	303.66
Visit Fla Grant-THSF Maps	19.00
2504.01 - Bear Creek	-119.00
2504.03 - Lake Talquin	9,284.23
Lake Talquin -FL Gas Easement	9,284.23
Total 2504.03 - Lake Talquin	9,284.23
2504.04 - Tates Hell	15.00
General Fund	15.00
Total 2504.04 - Tates Hell	15.00

**Friends of Florida State Forests, Inc.
 Balance Sheet
 As of June 30, 2015**

	<u>Jun 30, 15</u>	
2504.06 - Tallahassee Dist Reforestation Lake Talquin State Forest	1,439.00	
Total 2504.06 - Tallahassee Dist Reforestation	<u>1,439.00</u>	
Total 2504 - D4 Tallahassee		10,941.89
2505 - D5 Perry General Fund		10.00
Total 2505 - D5 Perry		<u>10.00</u>
2506 - D6 Suwannee General Fund		70.00
2506.02 - John Bethnea NWTF Grant	2,500.00	
Total 2506.02 - John Bethnea		<u>2,500.00</u>
2506.06 - Suwannee Dist Reforestation Bethnea Arbor Day - Reforestatio	30,159.00	
Total 2506.06 - Suwannee Dist Reforestation		<u>30,159.00</u>
Total 2506 - D6 Suwannee		32,729.00
2507 - D7 Jacksonville General Fund		78.74
2507.02 - Belmore		20.00
2507.03 - Cary Cary State Forest Reforestation	1,800.00	
Total Cary State Forest	<u>1,800.00</u>	
Campsite Development 2507.03 - Cary - Other	1,200.00	
Total 2507.03 - Cary	<u>271.94</u>	
2507.04 - Four Creeks Four Creeks State Reforestation NWTF Grant	3,037.50	
Total 2507.04 - Four Creeks	<u>1,394.76</u>	
2507.05 - Jennings General Fund		4,432.26
Total 2507.05 - Jennings	<u>215.30</u>	

**Friends of Florida State Forests, Inc.
 Balance Sheet
 As of June 30, 2015**

	Jun 30, 15
2507.08 - Jacksonville Dist Reforestation	
Belmore State Forest	3,820.74
Arbor Day	8,256.56
SatsumaTract	
Total Belmore State Forest	12,076.30
Jennings State Forest	
Arbor Day	3,984.50
Total Jennings State Forest	3,984.50
Total 2507.08 - Jacksonville Dist Reforestation	16,060.80
Total 2507 - D7 Jacksonville	24,079.04
2508 - D8 Waccassassa	
General Fund	385.00
Horse Barns - Waccassassa	300.00
2508.02 - Goethe State Forests	
Goethe-Arbor Day Fnd 2014	18,500.00
Goethe-FL Gas Easement Equity	2,595.96
Goethe State Forest	4,911.10
Goethe - Equestrian Use	16.70
Goethe Shared Trail System	560.00
Total 2508.02 - Goethe State Forests	26,583.76
2508.08 - Etoniah Creek	
Etoniah Creek Equestrian	370.00
General Fund	800.00
Total 2508.08 - Etoniah Creek	1,170.00
Total 2508 - D8 Waccassassa	28,438.76
2510 - D10 Bunnell	
General Fund	1,031.40
2510.02 - Tiger Bay	
Gopher Tortoise Mitigation	7,557.90
Total 2510.02 - Tiger Bay	7,557.90
2510.04 - Train Road Pavillion	
2510.06 - Lake George	1,510.00
2510.07 - Bunnell District Reforestation	125.00
Lake George State Forest	
Arbor Day	616.75
Total Lake George State Forest	616.75

Friends of Florida State Forests, Inc.
Balance Sheet
 As of June 30, 2015

		Jun 30, 15
Tiger Bay State Forest		
Tiger Bay - Arbor Day 2014	3,005.64	
Total Tiger Bay State Forest	3,005.64	
Total 2510.07 - Bunnell District Reforestation	3,622.39	
Total 2510 - D10 Bunnell		13,846.69
2511 - D11 Withlacoochee		
General Fund		917.43
2511.03 - Seminole		
General Fund	4,255.00	
Road Repairs	1,300.00	
Seminole Horse Trails	2,736.00	
TNC Scrub Restoration 2013	49,480.00	
Total 2511.03 - Seminole	57,771.00	
2511.04 - Withlacoochee		
Croon T-Shirt Sales	479.06	
Emergency Response	180.00	
Firewood Sales	2,951.14	
Florida Gas Mitigation	1,277.51	
Forestry Awareness Month	45.00	
Inmate Shop	15.92	
Pasco FAS Area	1,500.00	
Recreation (Hernando County)	500.00	
Silver Lake Rac Bat Boxes	199.79	
Two Mile Prairie	70.00	
Training Center	342.00	
Total 2511.04 - Withlacoochee	7,560.42	
2511.06 - Withlacoochee Reforestation		
Seminole State Forest	10,034.05	
Seminole - Arbor Day 2014	9,275.54	
Arbor Day 2011	3,000.00	
General Fund	22,309.59	
Total Seminole State Forest	22,309.59	
Total 2511.06 - Withlacoochee Reforestation	22,309.59	
Total 2511 - D11 Withlacoochee		88,558.44
2512 - D12 Orlando		
General Fund	250.00	
2512.03 - Little Big Econ SF	213.00	
Total 2512 - D12 Orlando	463.00	

**Friends of Florida State Forests, Inc.
 Balance Sheet
 As of June 30, 2015**

	Jun 30, 15
2514 · D14 Lakeland	
2514.02 · Lake Wales Ridge	17,584.00
Lake Wales Scrub Jay	3,231.23
General Fund	135.00
NWTTF Grant	20,950.23
Total 2514.02 · Lake Wales Ridge	20,950.23
Total 2514 · D14 Lakeland	20,950.23
2515 · D15 Myakka	
Myakka - Arbor Day 2014	3,920.40
General Fund	1,372.50
Map Sales	208.00
Total 2515 · D15 Myakka	5,500.90
2517 · D17 Caloosahatchee	
Envirothon-Caloosahatchee	650.00
General Fund	41.16
2517.02 · Pinyune Strand	
Cedar Hammock Mitigation	114,668.38
Fakahatchee Mitigation - 6/2011	42,989.01
Jerlo Mitigation PSSF	3,000.00
Noah's Landing Mitigation	14,257.75
Pinyune Strand - City Gate	100,333.00
2517.02 · Pinyune Strand - Other	458.00
Total 2517.02 · Pinyune Strand	275,706.14
2517.05 · Caloosahatchee Reforestation	
Ok Slough State Forest	1,570.00
General Fund	1,570.00
Total Ok Slough State Forest	1,570.00
Total 2517.05 · Caloosahatchee Reforestation	1,570.00
Total 2517 · D17 Caloosahatchee	277,967.30
2519 · Operation Outdoor Freedom (OOF)	
OOF - Indian River	817.91
OOF - Lake Wales UPS	225.49
OOF - FL Beef Council	2,868.08
OOF - Gator Egg	1,047.35
OOF - Statewide	2,500.00
Florida Firefighters OOF	547.26
OOF - Statewide - Other	2,000.00
Total OOF - Statewide	3,047.26

**Friends of Florida State Forests, Inc.
 Balance Sheet
 As of June 30, 2015**

		Jun 30, 15
2519.01 · OOF_Prairie Tract Pavilion		
OOF - Prairie Tract Well		860.61
OOF - Prairie Tract Bunkhouse #1		8,924.80
OOF - Prairie Tract Bunkhouse #2		25,000.00
OOF - Prairie Tract General Fund		186.64
OOF - Prairie Tract Trophy Fund		3,033.00
OOF - Prairie Restroom		12,000.00
2519.01 · OOF_Prairie Tract Pavilion - Other		1,762.20
Total 2519.01 · OOF_Prairie Tract Pavilion		51,767.25
2519.02 · OOF_Withlacoochee		20,979.65
2519.03 · OOF_Lines Tract		2,621.85
2519.04 · OOF_Welaka		2,773.48
2519.05 · OOF - Suwannee		
Twain Rivers		150.31
2519.05 · OOF - Suwannee - Other		1,754.44
Total 2519.05 · OOF - Suwannee		1,904.75
2519.07 · OOF - Blackwater		
OOF - Blackwater General		1,695.26
Total 2519.07 · OOF - Blackwater		1,695.26
2519.08 · OOF - Cary		
OOF - Cary General		791.86
Total 2519.08 · OOF - Cary		791.86
2519.11 · OOF_Orlando		
Little Big Econ		6,362.41
2519.11 · OOF_Orlando - Other		1,170.00
Total 2519.11 · OOF_Orlando		7,532.41
2519.12 · OOF_Jacksonville		
Satsuma		4,430.91
Total 2519.12 · OOF_Jacksonville		4,430.91
2519.13 · OOF_Tallahassee		950.85
2519.14 · OOF_Chipola		
Pine Log		5,219.16
PT. Washington		130.76
Total 2519.14 · OOF_Chipola		5,349.92
2519.15 · OOF - Myakka		149.96
2519.16 · OOF - NWFWMD		2,536.43
Total 2519 · Operation Outdoor Freedom (COF)		114,490.79
Total 2600 - Restricted District Funds		1,001,763.26

07/21/15
Accrual Basis

Friends of Florida State Forests, Inc.
Balance Sheet
As of June 30, 2015

	Jun 30, 15
2570 - Statewide Projects	
CarbonWise	1,100.10
DOT Gopher Tortoise Mitigation	800,000.00
Total 2570 - Statewide Projects	601,100.10
2650 - Teachers Tour	13,082.75
3000 - General Fund Balance	52,950.21
3200 - Retained Earnings	816.50
Net Income	1,960,167.42
Total Equity	3,629,880.24
TOTAL LIABILITIES & EQUITY	3,643,907.21

Friends of Florida State Forests, Inc.
Profit & Loss
 July 2014 through June 2015

		Jul '14 - Jun '15
Ordinary Income/Expense		
Income		
4100 - Operating Fund - Income		
General	931.67	
4104 - Bank fees	89.75	
4101 - Membership Dues	4,302.99	
4102 - Unrestricted Interest Income		
Merrill Lynch-Unrestricted Int	18.36	
Bank of America Savings	983.45	
Farmers Merchants Bank	562.19	
Florida Capital Ckg - DOT	824.14	
Floridian Bank MM - DOT	183.14	
Total 4102 - Unrestricted Interest Income		2,571.28
4115 - Contribution/Donation Income		
General	3,783.70	
Total 4115 - Contribution/Donation Income		3,783.70
4120 - Project/Grant Administration		
General	1,208.40	
Lake Wales Ridge Easement	5,355.00	
Arbor Day Foundation	2,356.43	
Total 4120 - Project/Grant Administration		8,919.83
Total 4100 - Operating Fund - Income		20,599.22
4200 - Annual Day Entrance Pass		
4500 - Districts Income - Restricted		
4561 - Statewide Forest Designation		
4501 - Blackwater		
Clear Creek OHV Riding Area	7,832.64	
General Fund	1,023.32	
Heritage Festival	516.85	
NFWF Reforestation	150,163.89	
Map	2,598.14	
Coldwater Rec Area	1,560.00	
Total 4501 - Blackwater		163,694.84
4502 - Chipola		
General Fund	259.19	
4502.02 - Point Washington		
Point Washington Mitigation	43,040.41	
Total 4502.02 - Point Washington		43,040.41

**Friends of Florida State Forests, Inc.
 Profit & Loss
 July 2014 through June 2015**

	Jul '14 - Jun '15
4602.03 - Pine Log General	10.00
Pine Log NPWF	67,468.60
Total 4602.03 - Pine Log	67,478.60
Total 4602 - Chipola	110,776.20
4504 - Tallahassee	
4504.02 - Bear Creek D4 Bear Creek Ed Materials	280.00
Total 4504.02 - Bear Creek	280.00
4504.03 - Lake Talquin Lines Tract	1,000.00
Total 4504.03 - Lake Talquin	1,000.00
4504.04 - Tate's Hell General	2,003.00
Total 4504.04 - Tate's Hell	2,003.00
4504.05 - Wakulla General	9.71
Total 4504.05 - Wakulla	9.71
Total 4504 - Tallahassee	3,292.71
4507 - Jacksonville General Fund	
4507.02 - Baltimore Arbor Day Reforestation Satsuma Track Reforestation	4,258.07
Total 4507.02 - Baltimore	29,036.00
4507.03 - Cary General Fund	432.75
Total 4507.03 - Cary	432.75
4507.06 - Jennings General	125.00
Total 4507.06 - Jennings	125.00
Total 4507 - Jacksonville	33,963.53

**Friends of Florida State Forests, Inc.
 Profit & Loss
 July 2014 through June 2015**

	Jul '14 - Jun '15
4508 - Waccasassa	
4508.02 - Goethe	
General	4,042.71
Total 4508.02 - Goethe	4,042.71
4508.04 - Ekorlah Creek	
General Fund	310.00
Total 4508.04 - Ekorlah Creek	310.00
4508.07 - Welaka State Forest	
General	300.00
4508.07 - Welaka State Forest - Other	1,473.00
Total 4508.07 - Welaka State Forest	1,773.00
4508.08 - Indian Lakes	
General	64,470.00
Total 4508.08 - Indian Lakes	64,470.00
4508.09 - Newmans Lake	
General	3,546.93
Total 4508.09 - Newmans Lake	3,546.93
Total 4508 - Waccasassa	74,142.64
4510 - Bunnell	
4510.02 - Tiger Bay	
Tram Road Pavilion	1,421.50
Total 4510.02 - Tiger Bay	1,421.50
4510.05 - Lake George	
General	4,378.00
Total 4510.05 - Lake George	4,378.00
4510.06 - Matanza	
General	159.76
Total 4510.06 - Matanza	159.76
Total 4510 - Bunnell	5,959.26
4511 - Withlacoochee	
General Fund	296.62
Croon T-Shirts	972.52
Firewood Sales	1,702.52
Recreation (Sumter County)	1,300.00
Recreation (Hernando County)	900.00
Training Center	32.00

**Friends of Florida State Forests, Inc.
 Profit & Loss
 July 2014 through June 2015**

	Jul '14 - Jun '15
4511.03 · Seminole General Fund	54.68
Arbor Day Foundation 2014	20,358.49
Seminole Horse Trails	250.00
Total 4511.03 · Seminole	20,663.17
Total 4511 · Withlacoochee	25,866.83
4512 · Orlando General Fund	4.74
4512.03 · Little Big Econ General	625.25
Total 4512.03 · Little Big Econ	625.25
Total 4512 · Orlando	629.99
4514 · Lakeland 4514.02 · Lake Wales Ridge General Fund	329.50
Lake Wales Ridge Easement	48,195.00
Total 4514.02 · Lake Wales Ridge	48,524.50
Total 4514 · Lakeland	48,524.50
4515 · Myakka River General	36.00
4515.01 · Peace River State Forest 4515.02 · Myakka General Fund	1,983,510.00
Map Sales	2,417.24
	35.14
Total 4515.02 · Myakka	2,452.38
Total 4515 · Myakka River	1,985,998.38
4517 · Caloosahatchee 4517.02 · Picayune Strand General Fund	219,399.07
PSSF Forest Day	1,423.50
Total 4517.02 · Picayune Strand	220,822.57
Total 4517 · Caloosahatchee	220,822.57
4519 · Operation Outdoor Freedom (OOF) OOF Beef Council	5,000.00
OOF Florida Firefighters	1,500.00
OOF Gator Egg Revenue	58,993.10
4519.00 · OOF_Statewide	260.00

**Friends of Florida State Forests, Inc.
 Profit & Loss
 July 2014 through June 2015**

	Jul '14 - Jun '15
4519.01 · OOF_Lakeland/Prairie Tract	
Prairie Tract	
General Fund	1,405.16
FL Natural Growers Foundation	6,105.23
Bunkhouse #2	1,000.00
Restroom	89.61
Total Prairie Tract	<u>8,600.00</u>
Total 4519.01 · OOF_Lakeland/Prairie Tract	8,600.00
4519.02 · OOF_Withlacoochee	
General	10,569.00
Total 4519.02 · OOF_Withlacoochee	<u>10,569.00</u>
4519.04 · OOF_Welaka	
General	1,941.95
Terry Dalley Memorial	50.00
Total 4519.04 · OOF_Welaka	<u>1,991.95</u>
4519.05 · OOF_Suwannee	
General	300.00
Twin Rivers	850.00
Total 4519.05 · OOF_Suwannee	<u>1,150.00</u>
4519.07 · OOF_Blackwater	
General	3,410.00
Total 4519.07 · OOF_Blackwater	<u>3,410.00</u>
4519.09 · OOF_Myakka	
General	10,423.01
Total 4519.09 · OOF_Myakka	<u>10,423.01</u>
4519.11 · OOF - Orlando	
General	10,226.48
Little Big Econ	700.00
Total 4519.11 · OOF - Orlando	<u>10,926.48</u>
4519.12 · OOF_Jacksonville	
General	49.68
Satsuma	5,084.00
Total 4519.12 · OOF_Jacksonville	<u>5,133.68</u>

**Friends of Florida State Forests, Inc.
 Profit & Loss
 July 2014 through June 2015**

	Jul '14 - Jun '15
4519.14 - OOF_Chipola	
General	6,343.00
Pine Log	225.00
Pt. Washington	625.00
Total 4519.14 - OOF_Chipola	7,193.00
4519.15 - Waccasassa	
General	4,949.00
Total 4519.15 - Waccasassa	4,949.00
4519.16 - Newmans Lake	
General	1,617.00
Total 4519.16 - Newmans Lake	1,617.00
4519.17 - Caloosahatchee	
General	179.00
Total 4519.17 - Caloosahatchee	179.00
Total 4519 - Operation Outdoor Freedom (OOF)	131,395.22
Total 4500 - Districts Income - Restricted	2,805,555.87
4600 - Teachers Tour Income - Restricted	27,394.96
Total Income	2,862,850.10
Gross Profit	2,862,850.10
Expense	
5100 - Operating Fund - Expense	2,598.75
5101 - Professional Fees	5,650.00
5103 - Advertisement & Promotions	262.50
Billboards	395.00
General	262.50
Visit Florida	3,200.00
5103 - Advertisement & Promotions - Other	9,507.50
5104 - Bank & Credit Card Charges	958.82
Bank Service Charges	958.82

**Friends of Florida State Forests, Inc.
 Profit & Loss
 July 2014 through June 2015**

	Jul '14 - Jun '15	
Internet Merchant Fees	153.84	
Authorize.net	360.00	
Pay Pal	513.84	
Total Internet Merchant Fees	513.84	
Total 5104 - Bank & Credit Card Charges		1,470.66
6110 - Printing and Reproduction		956.13
5117 - Insurance		1,814.83
6121 - Dues and Subscriptions		70.00
5122 - Office Supplies		30.30
General		30.30
Total 5122 - Office Supplies		30.30
5125 - Website Expense		690.37
Three Sages		1,516.78
5125 - Website Expense - Other		2,206.15
Total 5125 - Website Expense		500.00
5130 - Sponsorship		1,000.00
General		1,500.00
Teachers' Tour Sponsor		1,500.00
Total 5130 - Sponsorship		10,435.58
5100 - Operating Fund - Expense - Other		30,589.90
Total 5100 - Operating Fund - Expense		9,654.19
5200 - Annual Day Entrance Pass Exp		1,565.86
5500 - District Expenses - Restricted		88,275.00
5501 - Blackwater		1,413.30
General Fund		134.95
Arbor Day Reforestation		350.00
Coldwater Rec Area		8,715.09
FFA Event		167,567.80
Fox Hunters		330.73
Map		220.14
NFWF Reforestation		266,572.87
Tall Timbers Rx Burn		
T-Shirts		
Total 5501 - Blackwater		330.32
5502 - Chipola		43,020.70
General Fund		43,020.70
5502.02 - Point Washington		43,020.70
Point Washington Mitigation		43,020.70
Total 5502.02 - Point Washington		43,020.70

Friends of Florida State Forests, Inc.
Profit & Loss
 July 2014 through June 2015

	Jul '14 - Jun '15
5502.03 - Pine Log	67,468.60
Pine Log NFWF	67,468.60
Total 5502.03 - Pine Log	110,819.62
Total 5502 - Chippola	110,819.62
5504 - Tallahassee	
General Fund	196.99
5504.03 - Lake Talquin	
Lines Tract	318.06
Lake Talquin-FL Gas Easement	9,283.00
Total 5504.03 - Lake Talquin	9,601.06
5504.04 - Tate's Hall	
General	2,002.91
Visit Florida Grant-THSF Maps	19.00
Total 5504.04 - Tate's Hall	2,021.91
Total 5504 - Tallahassee	11,819.98
5506 - Suwannee	
5506.04 - John M. Bethea	1,505.00
John M. Bethea Reforestation	2,425.85
NWTf	3,930.85
Total 5506.04 - John M. Bethea	3,930.85
Total 5506 - Suwannee	3,930.85
5507 - Jacksonville	
5507.02 - Belmore	
General	4,258.07
Arbor Day Foundation 2011	3,820.74
Belmore Reforestation	18,274.12
Satsuma Track	18,274.12
Total Belmore Reforestation	18,274.12
Total 5507.02 - Belmore	26,352.93
5507.04 - Four Creeks	
NWTf Grant	1,116.92
Total 5507.04 - Four Creeks	1,116.92

**Friends of Florida State Forests, Inc.
 Profit & Loss
 July 2014 through June 2015**

	Jul '14 - Jun '15
5507.05 - Jennings Arbor Day Foundation 2011	3,984.50
Total 5507.05 - Jennings	3,984.50
Total 5507 - Jacksonville	31,454.35
5508 - Waccasassa	
5508.02 - Goethe	580.00
Goethe Shared Trail System	2,375.55
General	18,500.00
Goethe Arbor Day 2014	-379.54
Goethe Equestrian Use	183.93
Goethe State Forest	
Total 5508.02 - Goethe	21,239.94
5508.04 - Etoniah	
General	834.90
Etoniah Creek Equestrian	370.00
Total 5508.04 - Etoniah	1,204.90
5508.08 - Indian Lakes	
General	64,470.00
Total 5508.08 - Indian Lakes	64,470.00
5508.09 - Newmans Lake	
General	3,530.70
Total 5508.09 - Newmans Lake	3,530.70
Total 5508 - Waccasassa	90,445.54
5510 - Bunnell	
5510.02 - Tiger Bay	
Tiger Bay - Arbor Day 2014	3,005.64
Gopher Tortoise Mitigation	519.94
Train Road Pavillion	2,780.00
Total 5510.02 - Tiger Bay	6,305.58
Total 5510 - Bunnell	6,305.58

**Friends of Florida State Forests, Inc.
 Profit & Loss
 July 2014 through June 2015**

	Jul '14 - Jun '15
5511 - Withlacoochee	
General Fund	809.35
Croom T-Shirts	1,107.35
Emergency Response	180.00
Firewood Sales	2,581.13
Forestry Awareness Month	42.50
Innate Shop	15.92
Pasco FAS Area	800.00
Recreation (Sumter County)	800.00
5511.03 - Seminole	
General Fund	352.03
Seminole Arbor Day 2014	30,392.54
Arbor Day Foundation 2011	9,275.54
Atlas Paper Mills	3,000.00
Total 5511.03 - Seminole	<u>43,020.11</u>
Total 5511 - Withlacoochee	49,336.36
5514 - Lakeland	
5514.02 - Lake Wales Ridge	16,365.49
Lake Wales Ridge Essement	135.00
NWTFF Grant	
Total 5514.02 - Lake Wales Ridge	<u>16,520.49</u>
Total 5514 - Lakeland	16,520.49
5515 - Myakka River	
5515.01 - Peace River SF	74,616.58
Myakka Arbor Day 2014	3,920.40
Total 5515 - Myakka River	<u>78,536.98</u>
5517 - Caloosahatchee	
General Funds	35.00
5517.01 - Picayune Strand	
City Gate	44,814.00
Cedar Hammock Mitigation	15,960.00
Jerjo Mitigation PSSF	3,000.00
Noah's Landing Mitigation	13,900.00
PSSF Forest Day	785.37
Total 5517.01 - Picayune Strand	<u>78,459.37</u>
5517.06 - Okaloocoochee Slough	
OK Slough Reforestation	1,570.00
Total 5517.06 - Okaloocoochee Slough	<u>1,570.00</u>
Total 5517 - Caloosahatchee	80,064.37

Friends of Florida State Forests, Inc.
Profit & Loss
 July 2014 through June 2015

Jul '14 - Jun '15

5519 - Operation Outdoor Freedom (OOF)	
OOF Florida Firefighters	1,239.00
OOF Gator Egg Expense	2,784.01
OOF Indian River	231.76
5519.00 - OOF_Statewide	437.16
5519.01 - OOF_Lakeland/Prairie Tract	
Prairie Tract	
General Fund	7.50
FL Natural Growers Fund	6,105.23
Bunkhouse #1	8,924.80
Bunkhouse #2	26,000.00
Restroom	12,089.61
Pavilion	1,782.20
Well	860.61
Trophy Fund	600.00
Total Prairie Tract	56,249.95
Total 5519.01 - OOF_Lakeland/Prairie Tract	56,249.95
5519.02 - OOF_Withlacoochee	
General	6,436.65
Total 5519.02 - OOF_Withlacoochee	6,436.65
5519.04 - OOF_Welaka	
General	1,764.10
Total 5519.04 - OOF_Welaka	1,764.10
5519.05 - OOF_Suwannee	
General	1,259.24
Twin Rivers	1,000.31
Total 5519.05 - OOF_Suwannee	2,259.55
5519.07 - OOF_Blackwater	
General	3,894.07
Total 5519.07 - OOF_Blackwater	3,894.07
5519.09 - OOF_Myakka	
General	6,152.63
Total 5519.09 - OOF_Myakka	6,152.63
5519.10 - OOF_NWFWMD	
General	684.51
Total 5519.10 - OOF_NWFWMD	684.51

Friends of Florida State Forests, Inc.
Profit & Loss
 July 2014 through June 2015

	Jul '14	Jun '15
5519.11 - OOF_Orlando		
General	1,584.98	
Little Big Econ	842.90	
Total 5519.11 - OOF_Orlando	2,427.88	
5519.12 - OOF_Jacksonville		
Satsuma	4,391.02	
Total 5519.12 - OOF_Jacksonville	4,391.02	
5519.13 - OOF_Tallahassee		
General	256.50	
Lake Talquin	312.84	
OOF_Line Tract	2,187.23	
Total 5519.13 - OOF_Tallahassee	2,756.57	
5519.14 - OOF_Chipola		
General	3,371.97	
Pine Log	2,318.55	
Pt. Washington	755.78	
Total 5519.14 - OOF_Chipola	6,446.28	
5519.15 - Waccasassa		
General	1,768.18	
Total 5519.15 - Waccasassa	1,768.18	
5519.16 - Newmans Lake		
General	264.00	
Total 5519.16 - Newmans Lake	264.00	
5519.17 - Caloosahatchee		
General	179.00	
Total 5519.17 - Caloosahatchee	179.00	
Total 5519 - Operation Outdoor Freedom (OOF)	100,316.32	
Total 5800 - District Expenses - Restricted		846,123.29
5800 - Teachers Tour Exp - Restricted		16,787.95
9000 - Void Checks		0.00
Total Expense		903,155.33
Net Ordinary Income		1,959,694.77

07/21/15
Accrual Basis

Friends of Florida State Forests, Inc.
Profit & Loss
July 2014 through June 2015

	Jul '14 - Jun 15
Other Income/Expense	
Other Income	
4013 - Restricted Interest Income	
4013.01 - ML - Tiger Bay Gopher	45.87
4013.02 - ML - Cedar Hammock	274.63
4013.03 - ML - Noahs Landing	21.16
4013.04 - ML - Peace River	101.51
4013.05 - ML - Pt Washington	29.48
Total 4013 - Restricted Interest Income	472.65
Total Other Income	472.65
Net Other Income	472.65
Net Income	1,960,167.42

OFFICE OF THE COMMISSIONER
(850) 617-7700



THE CAPITOL
400 SOUTH MONROE STREET
TALLAHASSEE, FLORIDA 32399-0800

FLORIDA DEPARTMENT OF AGRICULTURE AND CONSUMER SERVICES
COMMISSIONER ADAM H. PUTNAM

Forestry Arson Alert

Association, Inc.

Florida Department of Agriculture and Consumer Services

DIRECT SUPPORT ORGANIZATION
2015 REPORT

IMPLEMENTATION OF COMMITTEE SUBSTITUTE SENATE BILL 1194

Direct Support Organization (DSO) Name: Forestry Arson Alert Association Inc.

Mailing address: 3125 Conner Boulevard, Room 163, Tallahassee, Florida, 32399-1650

Telephone Number: (850) 681-5929 Website Address: NA

Statute Authority: Section 590.61, F.S., Forestry Arson Alert Association. The purpose of this program is to:

- (1) Engage in any lawful activity to enhance public awareness of the economic costs, environmental damage, and cultural deprivations which accompany forest fires.
- (2) Engage in any lawful activity to enhance public awareness of the importance of quick reports of forest arson and of accurate reporting of information to law enforcement officials to the apprehension of persons engaged in forest arson.
- (3) Reward public-spirited citizens who cooperate with law enforcement officials in the apprehension and conviction of persons engaged in forest arson.
- (4) Provide public recognition to public-spirited citizens who contribute to the prevention of forest arson through education programs and assistance to law enforcement officials.

Section 570.691, F.S., Direct support organization. In summary, the statute states the Department of Agriculture and Consumer Services (department) may establish direct support organizations to provide assistance, funding, and promotional support for the museums and other programs of the department and lists the provisions that govern the creation, use, powers, and duties of the direct support organizations.

Brief Description of the DSO's Mission: Arson is the number one cause of wildfires in Florida, accounting for more than 25 percent of the total number of wildfires. The damage and cost to natural resources, property, and homes have been devastating. The cost to suppress arson is a significant burden on the Florida Forest Service's budget.

The Forestry Arson Alert Association was created to help reduce the incidence of wildland arson by making it possible to offer rewards for information leading to an arrest of arsonists and increase public awareness about wildland arson and the destruction it can cause.

Brief Description of the DSO's Results Obtained:

In fiscal year 2014-15, the Forestry Arson Alert Association promoted arson awareness through public education on the dangers of wildland arson by the use of brochures and radio PSAs. Arson Alert displays were used at cooperator meetings and wildland arson was a topic of discussion at these meetings. Cooperators are our partners in fighting fire: local fire departments; other land managing agencies; the U.S. Forest Service and other federal agencies; large land owners, etc.

Brief Description of the DSO's Plans for Next Three Fiscal Years:

The Forestry Arson Alert Association, through internal and external support, will assist the Florida Forest Service in expanding opportunities to increase awareness of the destruction of wildland arson, promote reward incentives for people who cooperate with law enforcement to convict persons engaged in wildland arson and work with partnering agencies to educate the public on prevention and mitigation measures that will help to reduce the damaged caused by wildland arson.

* Copy of Forestry Arson Alert Association Code of Ethics attached.

** Per our CPA firm, because Forestry Arson Alert Association is a DSO of the State, there is not a 990 filing requirement. See documentation from the Internal Revenue Service. In lieu of the 990, attached are two financial reports provided to the department annually.

FORESTRY ARSON ALERT ASSOCIATION CODE OF ETHICS

PREAMBLE

- (1) It is essential to the proper conduct and operation of the Forestry Arson Alert Association (herein "DSO") that its board members, officers, and employees be independent and impartial and that their position not be used for private gain. Therefore, the Florida Legislature in Section 112.313, Florida Statute (Fla. Stat.), requires that the law protect against any conflict of interest and establish standards for the conduct of DSO board members, officers, and employees in situations where conflicts may exist.

- (2) It is hereby declared to be the policy of the state that no DSO board member, officer, or employee shall have any interest, financial or otherwise, direct or indirect, or incur any obligation of any nature which is in substantial conflict with the proper discharge of his or her duties for the DSO. To implement this policy and strengthen the faith and confidence of the people in Direct Support Organizations, there is enacted a code of ethics setting forth standards of conduct required of Forestry Arson Alert Association board members, officers, and employees in the performance of their official duties.

STANDARDS

The following standards of conduct are enumerated in Chapter 112, Fla. Stat., and are required by Section 112.313, Fla. Stat., to be observed by DSO board members, officers, and employees.

1. Prohibition of Solicitation or Acceptance of Gifts

No DSO board member, officer, or employee shall solicit or accept anything of value to the recipient, including a gift, loan, reward, promise of future employment, favor, or service, based upon any understanding that the vote, official action, or judgment of the DSO board member, officer, or employee would be influenced thereby.

2. Prohibition of Accepting Compensation Given to Influence a Vote

No DSO board member, officer, or employee shall accept any compensation, payment, or thing of value when the person knows, or, with reasonable care, should know that it was given to influence a vote or other action in which the DSO board member, officer, or employee was expected to participate in his or her official capacity.

3. Salary and Expenses

No DSO board member or officer shall be prohibited from voting on a matter affecting his or her salary, expenses, or other compensation as a DSO board member or officer, as provided by law.

4. Prohibition of Misuse of Position

A DSO board member, officer, or employee shall not corruptly use or attempt to use one's official position or any property or resource which may be within one's trust, or perform official duties, to secure a special privilege, benefit, or exemption.

5. Prohibition of Misuse of Privileged Information

No DSO board member, officer, or employee shall disclose or use information not available to members of the general public and gained by reason of one's official position for one's own personal gain or benefit or for the personal gain or benefit of any other person or business entity.

6. Post-Office/Employment Restrictions

A person who has been elected to any DSO board or office or who is employed by a DSO may not personally represent another person or entity for compensation before the governing body of the DSO of which he or she was a board member, officer, or employee for a period of two years after he or she vacates that office or employment position.

7. Prohibition to Employees Holding Office

No person may be, at one time, both a DSO employee and a DSO board member at the same time.

8. Requirements to Abstain From Voting

A DSO board member or officer shall not vote in official capacity upon any measure which would affect his or her special private gain or loss, or which he or she knows would affect the special gain or any principal by whom the board member or officer is retained. When abstaining, the DSO board member or officer, prior to the vote being taken, shall make every reasonable effort to disclose the nature of his or her interest as a public record in a memorandum filed with the person responsible for recording the minutes of the meeting, who shall incorporate the memorandum in the minutes. If it is not possible for the DSO board member or officer to file a memorandum before the vote, the memorandum must be filed with the person responsible for recording the minutes of the meeting no later than 15 days after the vote.

9. Failure to Observe DSO Code of Ethics

Failure of a DSO board member, officer, or employee to observe the Code of Ethics may result in the removal of that person from their position. Further, failure of the DSO to observe the Code of Ethics may result in the Florida Department of Agriculture and Consumer Services terminating its Agreement with the DSO.

Internal Revenue Service
Director, Exempt Organizations
Rulings and Agreements

Department of the Treasury
P.O. Box 2508
Cincinnati, Ohio 45201

Date: JUN 27 2003

Forestry Arson Alert Association, Inc
3125 Conner Boulevard
Tallahassee, FL 32399

Person to Contact:
Shawntel McGuire, ID# 31-07947
Contact Telephone Numbers:
877-829-5500 Phone Toll-Free
513-263-3756 FAX
Federal Identification Number:
59-2654090

Dear Sir or Madam:

This modifies our letter dated August 1986. In that letter we determined that your organization is exempt under section 501(a) of the Internal Revenue Code, as an organization described in section 501(c)(3). We determined that you were not a private foundation within the meaning of section 509(a) of the Code because you were an organization described in section 509(a)(1) of the Code.

In your letter dated April 16, 2003, you requested that the organization be exempt from filing Form 990. Based on the information you provided, we have determined that you meet the conditions specified in Revenue Procedure 94-48 as being exempt from filing Form 990. Accordingly, we have granted your request and modified our records to reflect this request.

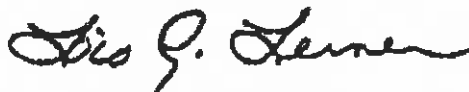
Your exempt status under section 501(a) of the Internal Revenue Code, as an organization described in section 501(c)(3) remains in effect.

Grantors and contributors may rely on this determination until the Internal Revenue Service publishes notice to the contrary. However, if you lose your section 509(a)(1) status, a grantor or contributor may not rely on this determination if he or she was in part responsible for, or was aware of, the act or failure to act that resulted in your loss of such status, or acquired knowledge that the Internal Revenue Service had given notice that you would be removed from classification as a section 509(a)(1) organization.

Because this letter could help resolve any questions about your exempt status and/or foundation status, you should keep it with your permanent records.

If you have any questions, please contact the person whose name and telephone number are shown in the heading of this letter.

Sincerely,



Lois G. Lerner
Director, Exempt Organizations
Rulings and Agreements

Florida Forestry Arson Alert Association, Inc.
Balance Sheet-General Fund/Statement of Net Assets
December 31, 2014

	<u>2014</u>
ASSETS	
Cash	\$33,207.94
Certificate of Deposits	<u>\$100,720.01</u>
Total assets	\$133,927.95
LIABILITIES	
Unearned revenue	<u>\$0.00</u>
Total liabilities	<u>0.00</u>
FUND BALANCE/NET ASSETS	
Unreserved fund balance/net assets	<u>\$133,927.95</u>
Total fund balance/net assets	<u>\$133,927.95</u>
Total liabilities and fund balance/net assets	<u>\$133,927.95</u>

Florida Forestry Arson Alert Association, Inc.
Profit and Loss
January through December 2014

	<u>2014</u>
ORDINARY INCOME/EXPENSE	
Income	
Donation Income	\$1,820.00
Certificate of Deposit, Int. Div.	<u>\$444.28</u>
Total Income	\$2,264.28
Operating Expenses	
Administrative	\$-61.25
Honor Guard	\$-1,722.14
Prevention Materials	\$0.00
Meetings and Conferences	\$-1,533.90
Arson Rewards	\$0.00
Firewise	<u>\$0.00</u>
Total Expenses	\$ -3,317.29
NET ORDINARY LOSS	<u>-\$1,053.01</u>
NET LOSS	<u>-\$1,053.01</u>

OFFICE OF THE COMMISSIONER
(850) 617-7700



THE CAPITOL
400 SOUTH MONROE STREET
TALLAHASSEE, FLORIDA 32399-0800

FLORIDA DEPARTMENT OF AGRICULTURE AND CONSUMER SERVICES
COMMISSIONER ADAM H. PUTNAM

Florida Agriculture Museum

Florida Department of Agriculture and Consumer Services

**DIRECT SUPPORT ORGANIZATION
2015 REPORT
IMPLEMENTATION OF COMMITTEE SUBSTITUTE SENATE BILL 1194**

Direct Support Organization (DSO) Name: Florida Agricultural Museum

Mailing address: 7900 Old Kings Road North, Palm Coast, FL 32137

Telephone Number: (386) 446-7630

Website Address: www.floridaagmuseum.org

Statute Authority:

Section 570.692, F.S., Florida Agricultural Museum.—*In summary*, the Florida Agricultural Museum is designated as the museum of agriculture and rural history of the State of Florida and established within the Florida Department of Agriculture and Consumer Services (department).

Section 570.691, F.S., Direct support organizations. *In summary*, the statute states the department may establish direct support organizations to provide assistance, funding, and promotional support for the museums and other programs of the department and lists the provisions that govern the creation, use, powers, and duties of the direct support organizations.

Brief Description of the DSO's Mission:

Florida Agricultural Museum's mission is to preserve Florida's agricultural past, interpret agricultural issues of yesterday, today, and tomorrow, and educate the public about these issues through enjoyable experiences.

Brief Description of the DSO's Results Obtained:

In fiscal year 2014-15, the Florida Agricultural Museum hosted 11,488 visitors from the general public and 1,502 students and teachers from 34 schools. Guided tours of our 460 acre facility introduce our visitors to various historical aspects of Florida agriculture. The museum also maintains heritage livestock including Florida Cracker cattle and horses, as well as heirloom gardens and row crops.

Brief Description of the DSO's Plans for Next Three Fiscal Years:

For FY 2014-15, the Florida Agricultural Museum received appropriations from the State to undertake several capital projects that will enhance the visitor experience at the museum and expand its capabilities. The museum plans to expand its educational programs to include the present and future of agriculture, align exhibit content with the new educational standards, incorporate STEM information in exhibits and educational material, and promote Florida agricultural products in an immersive experience. The museum has begun to seek agricultural partners to help support and interpret the different industries that are a part of Florida agriculture. The museum has been working closely with personnel from the Fresh From Florida program to more effectively market the museum and its programs. The museum will also work on programs that provide mission-driven educational and entertainment experience for the local community and the visitors to the area.

* Most recent IRS 990 filing attached.

Prepared By Morrow & Committee	First Approved Date Pending, Presented for Consideration
Last Revised Date 9/16/2014	Revision Approved Date N/A
References <ul style="list-style-type: none"> • §112.311 – 112.326 Florida Statutes 	

Code of Ethics Philosophy and Policy

It is essential to the proper conduct and operation of Florida Agricultural Museum, Inc. ("FAM") that its trustees, officers and employees (each a "FAM Public Officer" and collectively "FAM's Public Officers") be independent and impartial and that their position not to be used for private gain. To that end, all applicable provisions of Part III of Chapter 112 (Sections 112.311 - 112.326) Florida Statutes, titled Code of Ethics For Public Officers And Employees, are incorporated into and constitute the basis of FAM's Code of Ethics.

Without limiting the generality of the foregoing, FAM's Public Officers are obligated to abide by the following standards of conduct during the time they remain in office, and in the case of item 5 below, for a period of two years thereafter:

1. Prohibition of Solicitation or Acceptance of Gifts

No FAM Public Officer shall solicit or accept anything of value, including a gift, loan, reward, promise of future employment, favor, or service, based upon any understanding that the vote, official action, or judgment of the FAM Public Officer would be influenced thereby.

2. Prohibition of Accepting Compensation Given to Influence a Vote

No FAM Public Officer shall accept any compensation, payment, or thing of value when the person knows, or, with reasonable care, should know that it was given to influence a vote or other action in which the FAM Public Officer was expected to participate in his or her official capacity.

3. Prohibition of Misuse of Position

No FAM Public Officer shall use or attempt to use his or her official position or any property or resource which may be within his or her trust, or perform official duties, to secure a special privilege, benefit, or exemption.

4. Prohibition of Misuse of Privileged Information

No FAM Public Officer shall disclose or use information not available to members of the general public that was obtained by reason of his or her official position for his or her personal gain or benefit or for the personal gain or benefit of any other person or business entity.

5. Post-Office/Employment Restrictions

No FAM Public Officer shall personally represent another person or entity for compensation before the Board of Trustees of FAM for a period of two years after he or she ceases to be a FAM Public Officer.

6. Prohibition to Employees Holding Office

No person may be both a member of FAM's Board of Trustees and an employee of FAM at the same time.

7. Requirements to Abstain From Voting

No FAM Public Officer shall vote or otherwise take action in his or her official capacity on any measure which would affect his or her private gain or loss, or which he or she knows would affect the gain or loss of a third party by whom the FAM Public Officer is retained. When abstaining, prior to the vote being taken, the FAM Public Officer shall make every reasonable effort to disclose the nature of his or her interest as a public record in a memorandum filed with FAM's Secretary, who shall incorporate the memorandum in the minutes. If it is not possible for the FAM Public Officer to file a memorandum before the vote, the memorandum shall be filed with FAM's Secretary no later than fifteen days after the vote.

8. Failure to Observe FAM's Code of Ethics

Failure of a FAM Public Officer to observe this Code of Ethics may result in the removal of that person from his or her position. FAM acknowledges that the failure of FAM or a FAM Public Officer to observe this Code of Ethics may result in the Florida Department of Agriculture and Consumer Services terminating its agreement with FAM.

Form **990**

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

2013
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Do not enter Social Security numbers on this form as it may be made public.
▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

A For the 2013 calendar year, or tax year beginning **07/01/13**, and ending **06/30/14**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization FLORIDA AGRICULTURAL MUSEUM, INC.		D Employer identification number 59-2659573
	Doing Business As		E Telephone number 386-446-7630
	Number and street (or P O box if mail is not delivered to street address) 7900 OLD KINGS ROAD		Room/suite
	City or town, state or province, county, and ZIP or foreign postal code PALM COAST FL 32137		G Gross receipts \$ 280,360
F Name and address of principal officer MICHAEL C. KENNEY, CHAIRMAN 7900 OLD KINGS ROAD PALM COAST FL 32137			H(e) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions)
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no) <input type="checkbox"/> 4947(e)(1) or <input type="checkbox"/> 527			
J Website: WWW.MYAGMUSEUM.COM			
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other			L Year of formation
			M State of legal domicile: FL

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: DISPLAY HISTORY OF FLORIDA AGRICULTURE		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	14
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	13
	5 Total number of individuals employed in calendar year 2013 (Part V, line 2a)	5	9
	6 Total number of volunteers (estimate if necessary)	6	125
7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	20,716	
b Net unrelated business taxable income from Form 990-T, line 34	7b	18,338	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	56,471	30,363
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	160,192	165,116
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	2	-1,783
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	285,758	247,089
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0
	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)	137,267	164,904
	15a Professional fundraising fees (Part IX, column (A), line 11a)		0
	b Total fundraising expenses (Part IX, column (D), line 25) ▶	0	
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	145,716	126,430
	18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	282,983	291,334
19 Revenue less expenses Subtract line 18 from line 12	2,775	-44,245	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	1,791,796	1,761,800
	22 Net assets or fund balances Subtract line 21 from line 20	258,651	272,900
		1,533,145	1,488,900

Part II Signature Block

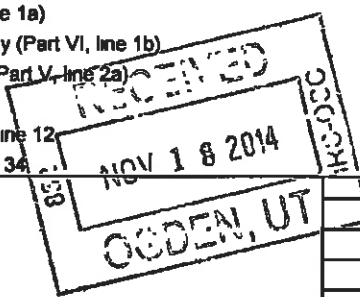
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer <i>Ronald A. Brame, Jr.</i>	Date 11/14/14
	RONALD A. BRAME, JR. Type or print name and title	TREASURER

Paid Preparer Use Only	Print/Type preparer's name STEPHEN BARNIER, CPA	Preparer's signature <i>Stephen Barnier</i>	Date 11/13/14	Check <input type="checkbox"/> if self-employed	PTIN P00646386
	Firm's name BARNIER & WEBBER, LLC	Firm's EIN 45-3815140			
	Firm's address 17 OLD KINGS RD N STE E PALM COAST, FL 32137-8283	Phone no 386-445-4997			

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

For Paperwork Reduction Act Notice, see the separate instructions. Form **990** (2013)



SCANNED DEC 1 1 2014

917
16

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission

DISPLAY HISTORY OF FLORIDA AGRICULTURE

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ **236,767** including grants of \$) (Revenue \$)
THE ORGANIZATION RAISES FUNDS AND ACQUIRES COLLECTIONS FOR USE IN A MUSEUM DISPLAYING HISTORIC FLORIDA AGRICULTURE ITEMS

4b (Code:) (Expenses \$ **35,829** including grants of \$) (Revenue \$)
THE FLORIDA AGRICULTURAL MUSEUM CONSERVATION OF HERITAGE LIVESTOCK INCLUDING RARE FLORIDA CRACKER CATTLE AND HORSES

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services. (Describe in Schedule O)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses **272,596**

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?		X
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		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I		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		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	X	
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? If "Yes," complete Schedule D, Part IV		X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V		X
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	X	
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII		X
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII		X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX		X
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	X	
f 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		X
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII		X
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		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV		X
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		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)		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	X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		X
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		

Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II		X
22 Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		X
23 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," complete Schedule J		X
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 complete Schedule K. If "No," go to line 25a		X
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 to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		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 Schedule L, Part I		X
26 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? If so, complete Schedule L, Part II		X
27 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 of any of these persons? If "Yes," complete Schedule L, Part III		X
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 A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV		X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		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		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		X
34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, or IV, and Part V, line 1		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		X
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	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.		
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.		
2a	9		
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <i>Note.</i> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	X	
3b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O.	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
4b	If "Yes," enter the name of the foreign country. ▶ See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
5c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
7a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		
7d	If "Yes," indicate the number of Forms 8282 filed during the year.		
7e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		
7g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
7h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
9a	Did the organization make any taxable distributions under section 4966?		
9b	Did the organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter		
10a	Initiation fees and capital contributions included on Part VIII, line 12.		
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.		
11	Section 501(c)(12) organizations. Enter		
11a	Gross income from members or shareholders.		
11b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
12b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
13a	Is the organization licensed to issue qualified health plans in more than one state? <i>Note.</i> See the instructions for additional information the organization must report on Schedule O.		
13b	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.		
13c	Enter the amount of reserves on hand.		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
14b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.		

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year. If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O		
	14		
b	Enter the number of voting members included in line 1a, above, who are independent		
	13		
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?		X
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?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
7b			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
8b			
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		X
9			

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
10b			
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990		
11a			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		X
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		
12b			
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done		
12c			
13	Did the organization have a written whistleblower policy?		X
14	Did the organization have a written document retention and destruction policy?		X
14			
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official	X	
15a			
b	Other officers or key employees of the organization		X
15b			
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
16a			
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		
16b			

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed **FL**
- 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain in Schedule O)
- 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization **RONALD A. BRAME, JR.** **7900 OLD KINGS ROAD**

PALM COAST **FL 32137** **386-446-7630**

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

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee "
 - List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
 - List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
 - List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations
- List persons in the following order individual trustees or directors, institutional trustees; officers, key employees, highest compensated employees, and former such persons.

Check this box if neither the organization nor any related organizations compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) 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 related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) CLARK BAILEY TRUSTEE	1.50 0.00	X						0	0	0
(2) MICHAEL C KENNEY CHAIRMAN	3.00 0.00	X		X				0	0	0
(3) BRENDA TUCKER BOYD TRUSTEE	1.50 0.00	X						0	0	0
(4) WILLIAM LIVINGSTON SECRETARY	2.00 0.00	X		X				0	0	0
(5) RONALD A BRAME JR TREASURER	5.00 0.00	X		X				0	0	0
(6) NATHAN MCLAUGHLIN ASST. TREASURER	2.00 0.00	X						0	0	0
(7) DOYLE CONNER JR TRUSTEE	1.00 0.00	X						0	0	0
(8) RICK PIAGNO TRUSTEE	1.50 0.00	X						0	0	0
(9) CHERYL F FLOOD TRUSTEE	1.50 0.00	X						0	0	0
(10) JOE SIEGMEISTER VICE CHAIRMAN	2.00 0.00	X		X				0	0	0
(11) HOWARD GRIFFIN TRUSTEE	1.50 0.00	X						0	0	0

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 organizations below dotted line)	(C) 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 related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(12) WENDY SMITH	1.50									
TRUSTEE	0.00	X					0	0	0	
(13) TOM TORRENCE	1.00									
TRUSTEE	0.00	X					0	0	0	
(14) CATHLEEN VOGEL	1.00									
TRUSTEE	0.00	X					0	0	0	
(15) BRUCE PIATEK	40.00									
PAST EXEC. DIRECTOR	0.00			X			60,490	0	0	
(16) ANDREW MORROW	40.00									
EXECUTIVE DIRECTOR	0.00			X			8,380	0	0	
(17)										
(18)										
(19)										
1b Sub-total							68,870			
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)							68,870			

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **0**

- 3** Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual
- 4** For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual
- 5** Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

	Yes	No
3		X
4		X
5		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) 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 **0**

Part VIII

Statement of Revenue

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a				
	b Membership dues	1b	2,485			
	c Fundraising events	1c	2,804			
	d Related organizations	1d				
	e Government grants (contributions)	1e	11,078			
	f All other contributions, gifts, grants, and similar amounts not included above	1f	13,996			
	g Noncash contributions included in lines 1a-1f \$					
	h Total. Add lines 1a-1f		30,363			
Program Service Revenue	2a USE OF FACILITIES	Bun. Code	70,806	70,806		
	b LIVESTOCK RELATED ACTIVITIES		58,800	58,800		
	c ENTRANCE FEES		25,960	25,960		
	d AGRICULTURAL CAMPS		9,550	9,550		
	e					
	f All other program service revenue					
	g Total. Add lines 2a-2f		165,116			
	3 Investment income (including dividends, interest, and other similar amounts)					
4 Income from investment of tax-exempt bond proceeds						
5 Royalties						
Other Revenue	6a Gross rents	(i) Real	34,500			
	b Less rental exps	(n) Personal	13,784			
	c Rental inc or (loss)		20,716			
	d Net rental income or (loss)		20,716		20,716	
	7a Gross amount from sales of assets other than inventory	(i) Securities				
	b Less cost or other basis & sales exps	(ii) Other		1,783		
	c Gain or (loss)			-1,783		
	d Net gain or (loss)		-1,783	-1,783		
	8a Gross income from fundraising events (not including \$ 2,804 of contributions reported on line 1c). See Part IV, line 18	a	40,392			
	b Less direct expenses	b	15,754			
c Net income or (loss) from fundraising events		24,638				
9a Gross income from gaming activities. See Part IV, line 19	a					
b Less direct expenses	b					
c Net income or (loss) from gaming activities						
10a Gross sales of inventory, less returns and allowances	a	3,505				
b Less cost of goods sold	b	1,950				
c Net income or (loss) from sales of inventory		1,555			1,555	
Miscellaneous Revenue		Bun. Code				
11a EXCAVATION INCOME		6,111	6,111			
b OTHER INCOME		373	373			
c						
d All other revenue						
e Total. Add lines 11a-11d		6,484				
12 Total revenue. See instructions		247,089	169,817	20,716	1,555	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

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) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U S See Part IV, line 21				
2 Grants and other assistance to individuals in the U S See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	68,870	65,426	3,444	
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	84,565	84,565		
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes	11,469	10,896	573	
11 Fees for services (non-employees)				
a Management				
b Legal				
c Accounting	6,165		6,165	
d Lobbying				
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)				
12 Advertising and promotion	4,689	4,689		
13 Office expenses				
14 Information technology	475	475		
15 Royalties				
16 Occupancy	19,422	19,422		
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	872		872	
20 Interest	14,428	14,428		
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	30,163	30,163		
23 Insurance	9,357	9,357		
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a LIVESTOCK EXPENSES	26,544	26,544		
b FEDERAL INCOME TAX	3,964		3,964	
c BANK & MERCHANT FEES	3,068	3,068		
d OFFICE EXPENSE	1,872		1,872	
e All other expenses	5,411	3,563	1,848	
25 Total functional expenses. Add lines 1 through 24e	291,334	272,596	18,738	0
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year	
Assets	1	Cash—non-interest bearing	33,803	1	27,106
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	4,730	4	1,810
	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	
	7	Notes and loans receivable, net	182	7	
	8	Inventories for sale or use		8	2,750
	9	Prepaid expenses and deferred charges		9	5,116
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	1,983,551		
	10b	Less accumulated depreciation	258,533		
			1,753,081	10c	1,725,018
	11	Investments—publicly traded securities		11	
	12	Investments—other securities See Part IV, line 11		12	
	13	Investments—program-related See Part IV, line 11		13	
	14	Intangible assets		14	
15	Other assets See Part IV, line 11		15		
16	Total assets. Add lines 1 through 15 (must equal line 34)	1,791,796	16	1,761,800	
Liabilities	17	Accounts payable and accrued expenses	3,927	17	2,371
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties	244,524	23	228,400
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D	10,200	25	42,129
	26	Total liabilities. Add lines 17 through 25	258,651	26	272,900
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27	Unrestricted net assets	1,103,046	27	1,058,801
	28	Temporarily restricted net assets		28	
	29	Permanently restricted net assets	430,099	29	430,099
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
33	Total net assets or fund balances	1,533,145	33	1,488,900	
34	Total liabilities and net assets/fund balances	1,791,796	34	1,761,800	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	247,089
2	Total expenses (must equal Part IX, column (A), line 25)	2	291,334
3	Revenue less expenses Subtract line 2 from line 1	3	-44,245
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,533,145
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	1,488,900

Part XII Financial Statements and Reporting

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

1 Accounting method used to prepare the Form 990 Cash Accrual Other _____
 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.

2a Were the organization's financial statements compiled or reviewed by an independent accountant?
 If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both
 Separate basis Consolidated basis Both consolidated and separate basis

b Were the organization's financial statements audited by an independent accountant?
 If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both
 Separate basis Consolidated basis Both consolidated and separate basis

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?
 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 Audit Act and OMB Circular A-133?
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

	Yes	No
2a		X
2b		X
2c		
3a		
3b		

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

FLORIDA AGRICULTURAL MUSEUM, INC.

Employer identification number

59-2659573

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
- 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)
- 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
- 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state.
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 9 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)
- 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11a through 11h.
 - a Type I b Type II c Type III—Functionally integrated d Type III—Non-functionally integrated
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 - (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
 - (ii) A family member of a person described in (i) above?
 - (iii) A 35% controlled entity of a person described in (i) or (ii) above?
- h Provide the following information about the supported organization(s)

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–8 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U.S.?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
Total									

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

Schedule A (Form 990 or 990-EZ) 2013

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
 (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	104,487	74,505	75,209	56,471	30,363	341,035
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	104,487	74,505	75,209	56,471	30,363	341,035
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 from line 4.						341,035

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7 Amounts from line 4	104,487	74,505	75,209	56,471	30,363	341,035
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	-258	-80	2	2		-334
9 Net income from unrelated business activities, whether or not the business is regularly carried on	29,299	32,731	34,142	31,554	19,716	147,442
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)	6,671	9,916	5,247	3,553	3,505	28,892
11 Total support. Add lines 7 through 10						517,035
12 Gross receipts from related activities, etc (see instructions)					12	211,992
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ► <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f))	14	65.96%
15 Public support percentage from 2012 Schedule A, Part II, line 14	15	70.94%
16a 33 1/3% support test—2013. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ► <input checked="" type="checkbox"/>		
b 33 1/3% support test—2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
17a 10%-facts-and-circumstances test—2013. 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 IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
b 10%-facts-and-circumstances test—2012. 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 IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ► <input type="checkbox"/>		

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
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 under section 513						
4 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						
7a 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						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b 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 regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 Total support. (Add lines 9, 10c, 11, and 12)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2012 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2012 Schedule A, Part III, line 17	18	%

- 19a 33 1/3% support tests—2013. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶
- b 33 1/3% support tests—2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶
- 20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶

Part IV **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

PART II, LINE 10 - OTHER INCOME DETAIL

\$ 25,387

**SCHEDULE D
(Form 990)**

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.

OMB No 1545-0047

2013

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

Name of the organization

Employer identification number

FLORIDA AGRICULTURAL MUSEUM, INC.

59-2659573

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.
Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part II Conservation Easements.
Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶

4 Number of states where property subject to conservation easement is located ▶

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items.

(i) Revenues included in Form 990, Part VIII, line 1	▶ \$
(ii) Assets included in Form 990, Part X	▶ \$

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenues included in Form 990, Part VIII, line 1	▶ \$
b Assets included in Form 990, Part X	▶ \$

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

- a Public exhibition
- b Scholarly research
- c Preservation for future generations
- d Loan or exchange programs
- e Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If "Yes," explain the arrangement in Part XIII and complete the following table

- c Beginning balance
- d Additions during the year
- e Distributions during the year
- f Ending balance

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21? Yes No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

Part V Endowment Funds.

Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment ▶ %
- b Permanent endowment ▶ %
- c Temporarily restricted endowment ▶ %

The percentages in lines 2a, 2b, and 2c should equal 100%

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) unrelated organizations
- (ii) related organizations

	Yes	No
3a(i)		
3a(ii)		
3b		

b If "Yes" to 3a(i), are the related organizations listed as required on Schedule R?

4 Describe in Part XIII the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		954,112		954,112
b Buildings		929,414	180,698	748,716
c Leasehold improvements		14,814		14,814
d Equipment		77,840		77,840
e Other		7,371		7,371
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c))				1,802,853

Part VII Investments—Other Securities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12) ▶		

Part VIII Investments—Program Related.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13) ▶		

Part IX Other Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15) ▶	

Part X Other Liabilities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) DEFERRED REVENUE	20,385
(3) SALES TAX PAYABLE	15,341
(4) OTHER ACCRUED EXPENSES	4,283
(5) PAYROLL LIABILITIES	2,120
(6) STATE INCOME TAX PAYABLE	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ▶	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b		4c
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5

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

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b		4c
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5

Part XIII Supplemental Information

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

Part XIII Supplemental Information (continued)

**SCHEDULE G
(Form 990 or 990-EZ)**

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No 1545-0047

2013

Department of the Treasury
Internal Revenue Service

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 8a.

▶ Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization

FLORIDA AGRICULTURAL MUSEUM, INC.

Employer identification number

59-2659573

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a Mail solicitations
- b Internet and email solicitations
- c Phone solicitations
- d In-person solicitations
- e Solicitation of non-government grants
- f Solicitation of government grants
- g Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

Yes No

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total						

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		HALLOWEEN HAUNT (event type)	HOT & SPICY EVE (event type)	NONE (total number)	(add col (a) through col (c))
Revenue	1 Gross receipts	31,534	7,993		39,527
	2 Less Contributions	250	2,500		2,750
	3 Gross income (line 1 minus line 2)	31,284	5,493		36,777
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	10,588	3,351		13,939
	10 Direct expense summary. Add lines 4 through 9 in column (d)				13,939
11 Net income summary. Subtract line 10 from line 3, column (d)				22,838	

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
		1 Gross revenue			
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes % <input type="checkbox"/> No	<input type="checkbox"/> Yes % <input type="checkbox"/> No	<input type="checkbox"/> Yes % <input type="checkbox"/> No	
7 Direct expense summary. Add lines 2 through 5 in column (d)					
8 Net gaming income summary. Subtract line 7 from line 1, column (d)					

9 Enter the state(s) in which the organization operates gaming activities

a Is the organization licensed to operate gaming activities in each of these states? Yes No

b If "No," explain

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No

b If "Yes," explain:

- 11 Does the organization operate gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13 Indicate the percentage of gaming activity operated in

a	The organization's facility		%
b	An outside facility		
13a			%
13b			%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶

Address ▶

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____
- c If "Yes," enter name and address of the third party

Name ▶

Address ▶

16 Gaming manager information

Name ▶

Gaming manager compensation ▶ \$ _____

Description of services provided ▶

- Director/officer Employee Independent contractor

17 Mandatory distributions

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

OMB No 1545-0047

2013

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization

FLORIDA AGRICULTURAL MUSEUM, INC.

Employer identification number

59-2659573

**FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990
FORM 990 WAS REVIEWED BY TREASURER AND PRESENTED TO THE BOARD OF DIRECTORS
FOR REVIEW AND APPROVAL PRIOR TO FILING**

**FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL
COMPENSATION REVIEWED FOR REASONABLENESS BY BOARD OF DIRECTORS**

**FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION
GOVERNING DOCUMENTS ARE AVAILABLE TO THE GENERAL PUBLIC UPON REQUEST**

OFFICE OF THE COMMISSIONER
(850) 617-7700



THE CAPITOL
400 SOUTH MONROE STREET
TALLAHASSEE, FLORIDA 32399-0800

FLORIDA DEPARTMENT OF AGRICULTURE AND CONSUMER SERVICES
COMMISSIONER ADAM H. PUTNAM

Florida Agriculture in the Classroom

Florida Department of Agriculture and Consumer Services

DIRECT SUPPORT ORGANIZATION
2015 REPORT

IMPLEMENTATION OF COMMITTEE SUBSTITUTE SENATE BILL 1194

Direct Support Organization (DSO) Name: **Florida Agriculture in the Classroom, Inc.**

Mailing address: 1352 Sabal Palm Drive, Building 941, Gainesville, FL 32611

Telephone Number: (352) 846-1391 Website Address: www.faitc.org

Statute Authority:

Section 570.693, F.S., Florida Agriculture in the Classroom program. *In summary*, the statute establishes Florida Agriculture in the Classroom (FAITC) as a program of the Florida Department of Agriculture and Consumer Services (department) and establishes the purpose of the program is to provide support and assistance for existing and future programs of the FAITC.

Section 570.691, F.S., Direct support organizations. *In summary*, the statute states the department may establish direct support organizations to provide assistance, funding, and promotional support for the museums and other programs of the department and lists the provisions that govern the creation, use, powers, and duties of the direct support organizations.

Brief Description of the DSO's Mission:

Expand youth awareness and understanding of Florida agriculture and natural resources by integrating agricultural concepts into core educational disciplines and FAITC supporting programs.

Brief Description of the DSO's Results Obtained:

In fiscal year 2014, FAITC reached more than 5,400 teachers and 160,000 students in kindergarten through 12th grade in Florida with: a website of more than 100 agriculture-related lessons and activities searchable by grade level, subject area and commodity; teacher school garden workshops and related farm tours on how to use agriculture lessons to teach core subjects of language arts, math, nutrition, science and social studies; school garden curricula and grants programs called *Gardening for Grades* and *Gardening for Nutrition*; and the elementary school reading program Florida Agriculture Literacy Day. For more detail, please review the organization's 2014 Annual Report at <http://faitc.org/about/>

Brief Description of the DSO's Plans for Next Three Fiscal Years:

FAITC will promote its second in a series of school garden curriculum called *Gardening for Nutrition*. The new curriculum includes 17, K-12 lesson plans that use school gardens to teach language arts, math, nutrition, science, social studies, fine art, music and physical education, and offers teacher workshops and school garden mini grant money to help teachers use the curriculum in their classrooms and fund school garden efforts. In 2015, FAITC launched a new series of non-fiction children's books for its spring elementary reading program, Florida Agriculture Literacy. The 2015 book will highlight the Florida livestock industry and will meet a key core requirement of asking students to read "informational text." Each year after that, the Ag Literacy Day book, which is written and illustrated with the help of the Department's Division of Marketing, features a different aspect of the industry such as Florida fruits, vegetables, field crops, horticulture, seafood and aquaculture and natural resources. It will use an animated red truck character to "drive" students across the state and educate them about the featured commodities. FAITC will continue to market to the Florida agriculture industry the agriculture specialty license plate called the 'Ag Tag,' which is the primary source of the organization's funding.

* Copy of Florida Agriculture in the Classroom's Conflict of Interest Policy and IRS Form 990 is attached.

**FLORIDA AGRICULTURE IN THE CLASSROOM, INC.
CODE OF BUSINESS CONDUCT AND POLICY ON CONFLICTS OF INTEREST**

PURPOSE

It is the policy of Florida Agriculture in the Classroom, Inc. (FAITC) to conduct all of its business affairs and relationships with customers and others with honesty, integrity and high ethical standards. FAITC's ability to function as a respected member of the education and agriculture/business community rests solely on the trust and confidence that our customers and peers have in us. That confidence is earned, on a daily basis, when we conduct our business with integrity and the highest ethical director, employee standards. In order to provide standards of appropriate conduct for directors, employees and associates of FAITC the Board of Directors has adopted this Code of Business Conduct and Conflict of Interest Policy.

PERSONAL FINANCIAL INTEREST

Purchase or lease of property, products or services

No director, employee or members of his or her household, may have directly or indirectly, a financial interest in any business enterprise with which FAITC engages in the purchase, sale or lease of property, or to which it renders or from which it secures products or services without excusing himself or herself from the committee and board votes involving the decision and without the approval of the board chairman. Initials _____

Grants

No director, employee, or members of his or her household, may have directly or indirectly, a financial interest in a FAITC teacher or volunteer grant allocation without excusing himself or herself from the committee and board votes involving the grant decision and without the approval of the board chairman. Initials _____

GRATUITIES

Monetary Gifts and Loans

No director, employee or members of his or her household should EVER accept the receipt of any monetary gift or loan (other than customary loans from financial institutions which are arms length transactions and the terms of which provide for the debtor to pay interest at a rate at least equal to the institution's prime rate) whether by cash or by check, from any customer, supplier, business associate or any third party dealing or desiring to deal with FAITC. Initials _____

Benefits, Gifts, Entertainment & Other Favors:

No director employee or members of his or her household should accept any benefits, gifts, entertainment or other favors which go beyond common courtesies usually associated with business practices (e.g. Christmas gifts, an occasional lunch, etc.) which thereby might be regarded as placing him or her under some obligation to a third party dealing or desiring to deal with FAITC or might give the appearance or perception to a reasonable person that his or her independent professional judgment and loyalty to FAITC might be jeopardized or impaired.

Any director, employee or members of his or her household who receives a benefit, gift offer of entertainment or favor which is either unusual and/or the value of which exceeds \$75 including but not limited to trips, the "gift" shall before the receipt of, use of, or participation in, such gift, as may be applicable, obtain approval of such gift in writing from the board chairman. Initials _____

BUSINESS CONFIDENTIALITY

No director or employee shall disclose or use customer information, mailing lists, trade secrets, work product, confidential information, privileged or inside information obtained through their relationship with FAITC for personal, financial or other business advantage or for the benefit of others or in any other manner outside of the scope of FAITC business. Initials _____

OUTSIDE ACTIVITIES

No employee shall act as a director, partner, officer, consultant or advisor of any business or professional firm or corporation which is competitive to or has business dealings with FAITC nor accept any outside responsibility which is likely to involve the use of the employee's time during normal business hours, or which involved the receipt of fees or other compensation without approval of the Chairman of FAITC. Initials _____

ANNUAL DECLARATIONS

Each director and employee of FAITC shall execute annually the following conflict interest of interest certificate disclosing any possible areas of conflict of interest:

DIRECTOR'S AND EMPLOYEE'S CONFLICT OF INTEREST CERTIFICATE

This will certify that I have read the "CODE OF BUSINESS CONDUCT AND POLICY ON CONFLICTS OF INTEREST" of FAITC and have received a copy for my guidance.

This will further certify that I have examined my personal situation, and find (check one):

- No area of possible conflicts of interests.**
- No area of possible conflict of interests except the following which might be considered to be questionable:**

Signed at _____, this the _____ day of _____, 20__.

Signature

Title

EXTENDED TO AUGUST 17, 2015

Form **990**

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

2014

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Do not enter social security numbers on this form as it may be made public.
Information about Form 990 and its instructions is at www.irs.gov/form990.

A For the 2014 calendar year, or tax year beginning and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization FLORIDA AGRICULTURE IN THE CLASSROOM, INC		D Employer identification number 59-2878381
	Doing business as		E Telephone number 352-846-1391
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	G Gross receipts \$ 513,732.
	PO BOX 110015		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	City or town, state or province, country, and ZIP or foreign postal code GAINESVILLE, FL 32611		H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)
F Name and address of principal officer: KEN BARTON SAME AS C ABOVE		H(c) Group exemption number ▶	
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
J Website: ▶ WWW.AGTAG.ORG			
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: 1986 M State of legal domicile: FL	

Part I Summary		Prior Year	Current Year
Activities & Governance	1 Briefly describe the organization's mission or most significant activities: TO ESTABLISH PUBLIC AND PRIVATE PARTNERSHIPS TO IMPLEMENT AN EDUCATIONAL PROGRAM PROMOTING AN		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	18
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	18
	5 Total number of individuals employed in calendar year 2014 (Part V, line 2a)	5	2
	6 Total number of volunteers (estimate if necessary)	6	2000
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b Net unrelated business taxable income from Form 990-T, line 34	7b	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	127,913.	204,837.
	9 Program service revenue (Part VIII, line 2g)	308,248.	307,253.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,089.	1,642.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0.	0.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	437,250.	513,732.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	114,475.	49,158.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	100,841.	124,417.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 0.		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	184,046.	227,377.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	399,362.	400,952.
19 Revenue less expenses. Subtract line 18 from line 12	37,888.	112,780.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 490,071.	End of Year 603,642.
	21 Total liabilities (Part X, line 26)	13,053.	18,091.
	22 Net assets or fund balances. Subtract line 21 from line 20	477,018.	585,551.

Part II 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.

Sign Here	Signature of officer	Date			
	KEN BARTON, CHAIRMAN Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name LORIE KEEGAN CPA	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN P01287643
	Firm's name ▶ CARR RIGGS & INGRAM, LLC	Firm's address ▶ 4010 NW 25TH PLACE GAINESVILLE, FL 32606		Firm's EIN ▶ 72-1396621	Phone no. 352-372-6300

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission: TO ESTABLISH PUBLIC AND PRIVATE PARTNERSHIPS TO IMPLEMENT AN EDUCATIONAL PROGRAM PROMOTING AN UNDERSTANDING OF FOOD AND FIBER SYSTEMS.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 336,418. including grants of \$ 49,158.) (Revenue \$ 307,253.) PROVIDES AGRICULTURAL TRAINING WORKSHOPS FOR TEACHERS IN FLORIDA AND VARIOUS OTHER ACTIVITIES REGARDING FLORIDA AGRICULTURE

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 336,418.

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		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? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
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? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	X	
c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	X	
f 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)? <i>If "Yes," complete Schedule D, Part X</i>	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
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? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
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? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>		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? <i>If "Yes," complete Schedule G, Part II</i>		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		

Part IV Checklist of Required Schedules (continued)

		Yes	No
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		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		X
23	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," complete Schedule J		X
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 complete Schedule K. If "No," go to line 25a		X
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 to defease any tax-exempt bonds?		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		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 Schedule L, Part I		X
26	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? If "Yes," complete Schedule L, Part II		X
27	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 of any of these persons? If "Yes," complete Schedule L, Part III		X
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	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		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		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	X	

Note. All Form 990 filers are required to complete Schedule O

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
3b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
4b	If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
5c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
7a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		X
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
7d	If "Yes," indicate the number of Forms 8282 filed during the year		0
7e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
7g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		X
7h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		X
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		X
9	Sponsoring organizations maintaining donor advised funds.		
9a	Did the sponsoring organization make any taxable distributions under section 4966?		X
9b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		X
10	Section 501(c)(7) organizations. Enter:		
10a	Initiation fees and capital contributions included on Part VIII, line 12		
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11	Section 501(c)(12) organizations. Enter:		
11a	Gross income from members or shareholders		
11b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
12b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
13a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.		
13b	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		
13c	Enter the amount of reserves on hand		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
14b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

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

Section A. Governing Body and Management

		1a	1b	Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	18			
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		18		
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?				X
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?				X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?				X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?				X
6	Did the organization have members or stockholders?				X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?				X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?				X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a	The governing body?			X	
b	Each committee with authority to act on behalf of the governing body?			X	
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				X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No		
10a	Did the organization have local chapters, branches, or affiliates?		X		
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?				
10b					
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X			
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.				
11a					
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	X			
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X			
12b					
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	X			
12c					
13	Did the organization have a written whistleblower policy?	X			
14	Did the organization have a written document retention and destruction policy?	X			
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?				
a	The organization's CEO, Executive Director, or top management official	X			
15a					
b	Other officers or key employees of the organization	X			
15b					
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X		
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?				
16b					

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed **NONE**
- 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain in Schedule O)
- 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20 State the name, address, and telephone number of the person who possesses the organization's books and records: **LISA GASKALLA - 352-846-1391**
PO BOX 110015, GAINESVILLE, FL 32611

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's **five current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former** directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) 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 related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) VINA JEAN BANKS IMMEDIATE PAST CHAIRMAN	1.00	X		X				0.	0.	0.
(2) JOAN B KYLE TREASURER	1.00	X		X				0.	0.	0.
(3) DEBBIE BERGSTROM DIRECTOR	1.00	X						0.	0.	0.
(4) GARY ALBARELLI DIRECTOR	1.00	X						0.	0.	0.
(5) KEN BARTON CHAIRMAN	1.00	X		X				0.	0.	0.
(6) DAVID BOOZER DIRECTOR	1.00	X						0.	0.	0.
(7) LEE ANN FISCH DIRECTOR	1.00	X						0.	0.	0.
(8) REBA HICKS DIRECTOR	1.00	X						0.	0.	0.
(9) HILARY HOLLEY DIRECTOR	1.00	X						0.	0.	0.
(10) AVERY LEFILS DIRECTOR	1.00	X						0.	0.	0.
(11) JENNIFER NELIS DIRECTOR	1.00	X						0.	0.	0.
(12) DR BRIAN MYERS DIRECTOR	1.00	X						0.	0.	0.
(13) TAMARA WOOD VICE CHAIRMAN	1.00	X		X				0.	0.	0.
(14) MICHAEL ROGALSKY DIRECTOR	1.00	X						0.	0.	0.
(15) CAROL R. ROE SECRETARY	1.00	X		X				0.	0.	0.
(16) DR. ED OSBORNE DIRECTOR	1.00	X						0.	0.	0.
(17) DR. ROBERT T MCMILLAN JR DIRECTOR	1.00	X						0.	0.	0.

Part VIII Statement of Revenue

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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a						
	b Membership dues	1b						
	c Fundraising events	1c						
	d Related organizations	1d						
	e Government grants (contributions)	1e	204,553.					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	284.					
	g Noncash contributions included in lines 1a-1f: \$							
	h Total. Add lines 1a-1f			204,837.				
Program Service Revenue	2 a SPECIALTY TAGS	Business Code	611710	307,253.	307,253.			
	b							
	c							
	d							
	e							
	f All other program service revenue							
	g Total. Add lines 2a-2f			307,253.				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			1,642.			1,642.	
	4 Income from investment of tax-exempt bond proceeds							
	5 Royalties							
	6 a Gross rents	(i) Real	(ii) Personal					
		b Less: rental expenses						
		c Rental income or (loss)						
		d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other					
		b Less: cost or other basis and sales expenses						
		c Gain or (loss)						
		d Net gain or (loss)						
	8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a						
		b Less: direct expenses	b					
		c Net income or (loss) from fundraising events						
	9 a Gross income from gaming activities. See Part IV, line 19	a						
		b Less: direct expenses	b					
		c Net income or (loss) from gaming activities						
10 a Gross sales of inventory, less returns and allowances	a							
	b Less: cost of goods sold	b						
	c Net income or (loss) from sales of inventory							
Miscellaneous Revenue			Business Code					
11 a								
b								
c								
d All other revenue								
e Total. Add lines 11a-11d								
12 Total revenue. See instructions.				513,732.	307,253.	0.	1,642.	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

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) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	49,158.	49,158.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	68,071.	58,105.	9,966.	
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	45,035.	45,035.		
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes	11,311.	10,556.	755.	
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	9,600.		9,600.	
d Lobbying				
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 Sch O.)				
12 Advertising and promotion	33,145.		33,145.	
13 Office expenses	13,729.	5,733.	7,996.	
14 Information technology				
15 Royalties				
16 Occupancy	2,800.	2,520.	280.	
17 Travel	9,099.	9,099.		
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	658.	592.	66.	
23 Insurance	6,865.	4,139.	2,726.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a CURRICULUM DEVELOPMENT	126,214.	126,214.		
b TRAINING WORKSHOP	13,668.	13,668.		
c TEACHER AWARDS/ADVISORY	11,599.	11,599.		
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	400,952.	336,418.	64,534.	0.
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)

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	32,813.	1	22,039.
	2 Savings and temporary cash investments	121,543.	2	244,615.
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	94,112.	4	108,004.
	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 instr). Complete Part II of Sch L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	37,838.	9	28,175.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 44,029.		
	b Less: accumulated depreciation	10b 43,808.	879.	10c 221.
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11	202,886.	12	200,588.
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	
16 Total assets. Add lines 1 through 15 (must equal line 34)	490,071.	16	603,642.	
Liabilities	17 Accounts payable and accrued expenses	324.	17	0.
	18 Grants payable	10,160.	18	15,451.
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	2,569.	25	2,640.
	26 Total liabilities. Add lines 17 through 25	13,053.	26	18,091.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	417,837.	27	457,306.
	28 Temporarily restricted net assets	59,181.	28	128,245.
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	477,018.	33	585,551.	
34 Total liabilities and net assets/fund balances	490,071.	34	603,642.	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	513,732.
2	Total expenses (must equal Part IX, column (A), line 25)	2	400,952.
3	Revenue less expenses. Subtract line 2 from line 1	3	112,780.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	477,018.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-4,246.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	585,552.

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
2c	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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	X	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
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 from line 4.						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f))	14		%
15 Public support percentage from 2013 Schedule A, Part II, line 14	15		%
16a 33 1/3% support test - 2014. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
b 33 1/3% support test - 2013. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2014. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2013. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions			<input type="checkbox"/>

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	348,845.	577,370.	370,771.	436,161.	512,090.	2245237.
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	24,462.					24,462.
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 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	373,307.	577,370.	370,771.	436,161.	512,090.	2269699.
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						0.
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						0.
c Add lines 7a and 7b						0.
8 Public support. (Subtract line 7c from line 6.)						2269699.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9 Amounts from line 6	373,307.	577,370.	370,771.	436,161.	512,090.	2269699.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	4,206.	2,203.	9,481.	1,089.	1,642.	18,621.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	4,206.	2,203.	9,481.	1,089.	1,642.	18,621.
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)	377,513.	579,573.	380,252.	437,250.	513,732.	2288320.

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

Section C. Computation of Public Support Percentage

15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f))	15	99.19 %
16 Public support percentage from 2013 Schedule A, Part III, line 15	16	98.55 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f))	17	.81 %
18 Investment income percentage from 2013 Schedule A, Part III, line 17	18	1.45 %

19a 33 1/3% support tests - 2014. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2013. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No" describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.		
4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).		
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).		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .		
b Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .		
c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .		
10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below.		
b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b A family member of a person described in (a) above?		
c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI .		

Section 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.		
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.		

Section C. Type II 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).		

Section D. Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2 Activities Test. Answer (a) and (b) below.		
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.		
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.		
3 Parent of Supported Organizations. Answer (a) and (b) below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI .		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970. See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	

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

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations *(continued)*

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2014 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-2014	(iii) Distributable Amount for 2014
1 Distributable amount for 2014 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2014 (reasonable cause required-see instructions)			
3 Excess distributions carryover, if any, to 2014:			
a			
b			
c			
d			
e From 2013			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2014 distributable amount			
i Carryover from 2009 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2014 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2014 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2014, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions).			
6 Remaining underdistributions for 2014. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions).			
7 Excess distributions carryover to 2015. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a			
b			
c			
d Excess from 2013			
e Excess from 2014			

Name of the organization FLORIDA AGRICULTURE IN THE CLASSROOM, INC	Employer identification number 59-2878381
--	---

Organization type (check one):

Filers of:

Section:

- Form 990 or 990-EZ 501(c)(3) (enter number) organization
- 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
- 527 political organization
- Form 990-PF 501(c)(3) exempt private foundation
- 4947(a)(1) nonexempt charitable trust treated as a private foundation
- 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

- For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

Name of organization FLORIDA AGRICULTURE IN THE CLASSROOM, INC	Employer identification number 59-2878381
--	---

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	FLORIDA DEPARTMENT OF AG 407 SOUTH CALHOUN STREET TALLAHASSEE, FL 32399-0800	\$ 204,553.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization FLORIDA AGRICULTURE IN THE CLASSROOM, INC	Employer identification number 59-2878381
--	---

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	

Name of organization FLORIDA AGRICULTURE IN THE CLASSROOM, INC	Employer identification number 59-2878381
--	---

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.

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

OMB No. 1545-0047

2014

Open to Public Inspection

Name of the organization **FLORIDA AGRICULTURE IN THE CLASSROOM, INC** Employer identification number **59-2878381**

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).
 Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area
 Protection of natural habitat Preservation of a certified historic structure
 Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

- 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.
- b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:
- (i) Revenue included in Form 990, Part VIII, line 1
- (ii) Assets included in Form 990, Part X
- 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:
- a Revenue included in Form 990, Part VIII, line 1
- b Assets included in Form 990, Part X

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange programs
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment _____ %
 - b Permanent endowment _____ %
 - c Temporarily restricted endowment _____ %
- The percentages in lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|-----------------------------|--------|----|
| (i) unrelated organizations | 3a(i) | |
| (ii) related organizations | 3a(ii) | |
- b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other		44,029.	43,808.	221.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				221.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) CAMPUS USA	100,513.	COST
(B) COMPASS CD	100,075.	COST
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶	200,588.	

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

Part IX Other Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	

Part X Other Liabilities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) PAYROLL LIABILITIES	2,640.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	2,640.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	513,732.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
	a Net unrealized gains (losses) on investments	2a		
	b Donated services and use of facilities	2b		
	c Recoveries of prior year grants	2c		
	d Other (Describe in Part XIII.)	2d		
	e Add lines 2a through 2d		2e	0.
3	Subtract line 2e from line 1		3	513,732.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
	a Investment expenses not included on Form 990, Part VIII, line 7b	4a		
	b Other (Describe in Part XIII.)	4b		
	c Add lines 4a and 4b		4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	513,732.

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

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	400,952.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
	a Donated services and use of facilities	2a		
	b Prior year adjustments	2b		
	c Other losses	2c		
	d Other (Describe in Part XIII.)	2d		
	e Add lines 2a through 2d		2e	0.
3	Subtract line 2e from line 1		3	400,952.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
	a Investment expenses not included on Form 990, Part VIII, line 7b	4a		
	b Other (Describe in Part XIII.)	4b		
	c Add lines 4a and 4b		4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	400,952.

Part XIII Supplemental Information.

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

PART X, LINE 2:

THE ORGANIZATION IS A NONPROFIT ORGANIZATION THAT IS EXEMPT FROM INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE. ACCORDINGLY, NO PROVISION FOR INCOME TAXES HAS BEEN MADE IN THE FINANCIAL STATEMENTS. THE ORGANIZATION HAS NO UNCERTAIN TAX POSITIONS THAT REQUIRE RECOGNITION OR DISCLOSURE IN THE ACCOMPANYING FINANCIAL STATEMENTS.

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990

OMB No. 1545-0047

2014

Open to Public
Inspection

Name of the organization

FLORIDA AGRICULTURE IN THE CLASSROOM, INC

Employer identification number
59-2878381

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

UNDERSTANDING OF FOOD AND FIBER SYSTEMS.

FORM 990, PART VI, SECTION B, LINE 11:

COPIES OF FORM 990 ARE E-MAILED TO ALL BOARD OF DIRECTORS AND REVIEWED
BEFORE THE RETURN IS FILED.

FORM 990, PART VI, SECTION B, LINE 12C:

BOARD MEMBERS ARE REQUIRED TO TURN IN A SIGNED CONFLICT OF INTEREST POLICY
EACH YEAR IN WHICH THEY DISCLOSE ANY RELATIONSHIP WITH THE ORGANIZATION
THAT MAY INDICATE A CONFLICT. IN ADDITION, BOARD MEMBERS AND STAFF MAKE
SURE BOARD MEMBERS DON'T SERVE ON COMMITTEES THAT WOULD RESULT IN THEY OR
THEIR ORGANIZATIONS RECEIVING ANY FINANCIAL GAINS.

FORM 990, PART VI, SECTION B, LINE 15:

FLORIDA AGRICULTURE IN THE CLASSROOM UTILIZES COMPARABILITY DATA AS WELL AS
GOALS ESTABLISHED IN THE ORGANIZATIONS STRATEGIC PLAN IN ORDER TO DETERMINE
COMPENSATION. FURTHERMORE, THE CHAIRMAN WRITES A LETTER FOR THE EXECUTIVE
DIRECTORS FILE DETAILING THE EXECUTIVE COMMITTEE'S RECOMMENDATION.

FORM 990, PART VI, SECTION C, LINE 19:

FLORIDA AGRICULTURE IN THE CLASSROOM MAKES THE GOVERNING DOCUMENTS,
CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO PUBLIC
UPON REQUEST.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

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

Schedule O (Form 990 or 990-EZ) (2014)

432211
08-27-14

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

Department of the Treasury
Internal Revenue Service

▶ **File a separate application for each return.**
▶ **Information about Form 8868 and its instructions is at www.irs.gov/form8868.**

- If you are filing for an **Automatic 3-Month Extension**, complete only Part I and check this box
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only Part II (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.
Electronic filing (e-file) - You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

	Enter filer's identifying number	
Type or print	Name of exempt organization or other filer, see instructions. FLORIDA AGRICULTURE IN THE CLASSROOM, INC	Employer identification number (EIN) or 59-2878381
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. PO BOX 110015	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. GAINESVILLE, FL 32611	

Enter the Return code for the return that this application is for (file a separate application for each return) 01

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

LISA GASKALLA

• The books are in the care of ▶ **PO BOX 110015 - GAINESVILLE, FL 32611**
 Telephone No. ▶ **352-846-1391** Fax No. ▶ **352-846-1390**

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ . If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for.

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until **AUGUST 15, 2015**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
 ▶ calendar year **2014** or
 ▶ tax year beginning _____, and ending _____

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return
 Change in accounting period

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

OFFICE OF THE COMMISSIONER
(850) 617-7700



THE CAPITOL
400 SOUTH MONROE STREET
TALLAHASSEE, FLORIDA 32399-0800

FLORIDA DEPARTMENT OF AGRICULTURE AND CONSUMER SERVICES
COMMISSIONER ADAM H. PUTNAM

Florida Horse Park

Florida Department of Agriculture and Consumer Services

**DIRECT SUPPORT ORGANIZATION
2015 REPORT**

IMPLEMENTATION OF COMMITTEE SUBSTITUTE SENATE BILL 1194

Direct Support Organization (DSO) Name: Florida Agriculture Center & Horse Park Authority

Mailing address: 11008 S Highway 475, Ocala, Florida 34480

Telephone Number: (352)307-6699 Website Address: www.flhorsepark.com

Statute Authority:

Section 570.685, F.S., Florida Agriculture Center and Horse Park Authority (FACHPA). In summary, the statute establishes FACHPA as a support organization of the Department of Agriculture and Consumer Services (Department) and establishes the purpose of the organization is to develop, document, and implement strategies for the planning, construction and operation of the Florida Agriculture Center and Horse Park (The Park).

Section 570.691, F.S., Direct support organizations. In summary, the statute states the Department may establish direct support organizations to provide assistance, funding, and promotional support for the museums and other programs of the Department and lists the provisions that govern the creation, use, powers, and duties of the direct support organizations.

Brief Description of the DSO's Mission:

Provide an exceptional experience and destination for equine competitors, agricultural and livestock exhibitors, educators and nature enthusiasts in the sunshine of the great State of Florida.

Brief Description of the DSO's Results Obtained:

In fiscal year 2014-15, 130 events were held at The Park including 3-day eventing, dressage, driving, canine events, corporate picnics, Civil War reenactment, roping, barrel races, and trail rides. Events continue to increase. We have supported the operation of The Park through individual and corporate donations and sponsorships as well as rental of the facilities. We completed the construction of a 79,500 sq-ft covered arena and began construction on 5 new barns and 30 new campsites.

Brief Description of the DSO's Plans for Next Three Fiscal Years:

The Florida Agriculture Center and Horse Park Authority, through internal and external support, will continue to develop The Park and create opportunities for equine, agriculture, livestock, recreation, and educational events. This year, plans include the completion of the barns to house our equine visitors and the campsites. The Park expansion plans are moving ahead in the planning of turning lanes and needed infrastructure, but the implementation is on hold until additional funding is secured. Each consecutive year we plan for increased events scheduled at The Park. We are also planning programs to increase awareness of The Park through various educational programs, media and advertising options statewide and beyond.

* Copy of Florida Agriculture Center and Horse Park Authority's Code of Ethics attached.

** Per our CPA firm, because Florida Agriculture Center and Horse Park Authority is a DSO of the State, there is not a 990 filing requirement.

EQUAL OPPORTUNITY EMPLOYMENT

We are committed to providing equal opportunity in all our employment practices including selection, hiring, promotion, transfer, and compensation to all qualified applicants and employees without regard to race, color, religion, sex/gender, national origin, citizenship status, age, disability or any other status protected by law.

If you are an individual with a disability and you desire an accommodation of any kind, please let your manager know. We will be happy to assist you.

RULES AND POLICIES

NO HARRASSMENT POLICY

We do not tolerate harassment of any of our employees, applicants or customers. Any form of harassment related to an individual's race, color, sex/gender, religion, national origin, marital status, citizenship status, age or disability is a violation of this policy and will be treated as a disciplinary matter. For these purposes the term harassment includes:

- Unwelcome sexual advances and requests for sexual favors.
- Threatening reprisals for an employee's refusal to respond to requests for sexual favors.
- Offensive physical conduct including touching.
- Display of offensive pictures, drawings or photographs.
- Offensive remarks, comments, jokes or slurs pertaining to an individual's race, sex/gender, religion, age disability, etc.

If you have any questions about what constitutes harassing behavior or what conduct is prohibited by this policy, ask your manager.

VIOLATION OF THIS POLICY WILL SUBJECT AN EMPLOYEE TO DISCIPLINARY ACTION, UP TO AND INCLUDING IMMEDIATE DISCHARGE.

You should also be aware that our supervisors and managers are also covered by this policy and are prohibited from engaging in any form of harassing conduct. Further, no supervisor or other member of management has the authority to suggest to any employee or applicant that that individual's employment, continued employment or future advancement will be affected in any way by the individual's entering into (or refusing to enter into) any form of personal relationship with the manager or member of management.

Harassment of our employees in connection with their work by non-employees is also a violation of this policy. Any employee who experiences or observes any harassment of any employee by a non-employee should report such harassment to his or her manager. Appropriate action will be taken.

If you feel that you are being harassed by another employee or by anyone else, you should notify your manager immediately. If the problem involves your manager or if you do not feel that the matter can be discussed with your manager, you should contact another superior and arrange for a meeting to discuss your complaint. You may be assured that your complaint will be kept as confidential as possible and you will not be penalized in any way for reporting a harassment problem.

We can not help resolve a harassment problem unless we know about it. Therefore, it is your responsibility to bring any such problems to our attention so that we can take whatever steps are necessary to correct the problem.

STANDARDS OF PROFESIONAL CONDUCT

Florida Horse Park requires that all of its business be conducted with the highest legal and ethical standards. The purpose of this policy is to set forth basic principles and guidelines to direct employees in the proper conduct of the business and personal affairs as representatives of Florida Horse Park. The following standards are expected to be maintained by all employees, regardless of their position:

1. Assure that all actions and behaviors promote the favorable image of the company, its management and its members.
2. Avoid potential conflict of interest and personal gain or any appearance of a conflict or impropriety.
3. Promote the integrity, reputation, administration and operations of all the affairs of the company and avoid any conduct, whether on or off duty, that could cause embarrassment or disrepute to the company.

Like all other organizations, Florida Horse Park has established certain minimum standards of conduct that promote efficiency, productivity and cooperation among employees. For this reason, it may be helpful to identify some examples of conduct that are impermissible and that may lead to disciplinary action up to and including immediate termination. Although it is not possible to provide an exhaustive list of all types of impermissible conduct or performance, the following are some examples:

- Committing acts of dishonesty including falsification of, or making a material omission of forms, records, or reports.
- Disclosure of trade secrets or confidential information about Florida Horse Park, its employees, or its customers and/or donors.
- Engaging in altercations or any type of harassment, whether verbal, non-verbal or physical.
- Actual or threatened violence against co-workers, visitors, or any other persons who are on our premises or have contact with employees in the course of their duties.
- Insubordination, including improper conduct toward a manager, or refusal to perform assigned tasks.
- Theft, abuse, destruction, waste, or unauthorized use/possession of Florida Horse Park property, facilities, equipment or materials.
- Possessing or bringing firearms or other dangerous weapons on Florida Horse Park property.
- Unauthorized possession, use or sale of illegal substances on Florida Horse Park property, or reporting for work under the influence of alcohol or illegal drugs.
- Violating safety or health regulations or engaging in conduct that creates a safety or health hazard.
- Excessive absenteeism or tardiness.
- Misconduct.
- Unsatisfactory performance.

It should be remembered that employment is at the mutual consent of the employee and the company. Accordingly, either the employee or the company can terminate the employment relationship at will, at any time, either with or without cause or advance notice.

FLORIDA AGRICULTURE CENTER AND HORSE PARK AUTHORITY, INC.

CONFLICT OF INTEREST POLICY

Article I Definitions

1. Interested Person

Any member of the Board of Directors (hereinafter the "Board") or member of a committee with governing board delegated powers, who has a direct or indirect financial interest, as defined below, is an interested person.

2. Financial Interest

A person has a financial interest if the person has, directly or indirectly, through business, investment, or family:

- a. An ownership or investment interest in any entity with which the Florida Agriculture and Horse Park Authority, Inc., a Florida not-for-profit corporation (hereinafter the "Horse Park") has a transaction or arrangement,
- b. A compensation arrangement with the Horse Park or with any entity or individual with which the Horse Park has a transaction or arrangement, or
- c. A potential ownership or investment interest in, or compensation arrangement with, any entity or individual with which the Horse Park is negotiating a transaction or arrangement.

Compensation includes direct and indirect remuneration as well as gifts or favors that are not insubstantial.

A financial interest is not necessarily a conflict of interest. Under Article II, Section 2, a person who has a financial interest may have a conflict of interest only if the appropriate governing board or committee decides that a conflict of interest exists.

Article II Procedures

1. Duty to Disclose

In connection with any actual or possible conflict of interest (including any connection which could reasonably be construed to create the appearance of a conflict of interest), an interested person must disclose the existence of the financial or other interest and be given the opportunity to disclose all material facts to the Board and members of committees with governing board delegated powers considering the proposed transaction or arrangement.

2. Determining Whether a Conflict of Interest Exists

After disclosure of the financial or other interest and all material facts, and after any discussion with the interested person, he/she shall leave the Board meeting while the determination of a conflict of interest is discussed and voted upon. The remaining Board members shall decide if a conflict of interest exists.

3. Procedures for Addressing the Conflict of Interest

- a. An interested person may make a presentation at the Board meeting, but after the presentation, he/she shall leave the meeting during the discussion of, and the vote on, the transaction or arrangement involving the possible conflict of interest.
- b. The chairperson of the Board shall, if appropriate in the chairperson's sole discretion, appoint a disinterested person or committee to investigate alternatives to the proposed transaction or arrangement.
- c. After exercising due diligence, the Board shall determine whether the Horse Park can obtain with reasonable efforts a more advantageous transaction or arrangement from a person or entity that would not give rise to a conflict of interest.
- d. If a more advantageous transaction or arrangement is not reasonably possible under circumstances not producing a conflict of interest, the Board shall determine by a majority vote of the disinterested directors,

whether the transaction or arrangement is in the Horse Park's best interest, for its own benefit, and whether it is fair and reasonable. In conformity with the above determination, it shall make its decision as to whether to enter into the transaction or arrangement.

4. Violations of the Conflicts of Interest Policy

a. If the Board has reasonable cause to believe a member has failed to disclose actual or possible conflicts of interest, it shall inform the member of the basis for such belief and afford the member an opportunity to explain the alleged failure to disclose to the Board.

b. If, after hearing the member's response and after making further investigation as warranted by the circumstances, the Board determines the member has failed to disclose an actual or possible conflict of interest, it shall take appropriate disciplinary and/or corrective action.

**Article III
Records of Proceedings**

The minutes of the Board shall contain:

a. The names of the persons who disclosed or otherwise were found to have a financial interest in connection with an actual or possible conflict of interest, the nature of the financial or other interest, any action taken to determine whether a conflict of interest was present, and the Board's decision as to whether a conflict of interest in fact existed.

b. The names of the persons who were present for discussions and votes relating to the transaction or arrangement, the content of the discussion, including any alternatives to the proposed transaction or arrangement, and a record of any votes taken in connection with the proceedings.

**Article IV
Compensation**

a. A voting member of the governing board who receives compensation, directly or indirectly, from the Horse Park for services is precluded from voting on matters pertaining to that member's compensation.

b. A voting member of any committee whose jurisdiction includes compensation matters and who receives compensation, directly or indirectly, from the Horse Park for services is precluded from voting on matters pertaining to that member's compensation.

c. No voting member of the Board or any committee whose jurisdiction includes compensation matters, directly or indirectly, from the Horse Park, either individually or collectively, is prohibited from providing information to any committee regarding compensation.

**Article V
Annual Statements**

Each Board member, principal officer and member of a committee with governing board delegated powers shall annually sign a statement which affirms such person:

- a. Has received a copy of the conflicts of interest policy,
- b. Has read and understands the policy,
- c. Has agreed to comply with the policy, and
- d. Has completed and returned a copy of the Conflict of Interest Disclosure Statement.

Signature: _____
Print Name: _____
Date: _____

Internal Revenue Service
P.O. Box 2508
Cincinnati, OH 45201

Department of the Treasury

Date: March 29, 2012

Person to Contact:

Dee Anna Jarmon

ID# 0196118

Toll Free Telephone Number:

877-829-5500

Employer Identification Number:

59-3371901

FLORIDA AGRICULTURE CENTER
& HORSE PARK AUTHORITY INC
11008 S HIGHWAY 475
OCALA FL 34480-6505

Dear Sir or Madam:

This is in response to your March 16, 2012 request for information regarding your tax-exempt status.

Our records indicate that you were recognized as exempt under section 501(c)(3) of the Internal Revenue Code in a determination letter issued in October 1996.

Our records indicate that you are affiliate of a governmental unit in accordance with Revenue Procedure 95-48. Therefore, you are not required to file Form 990.

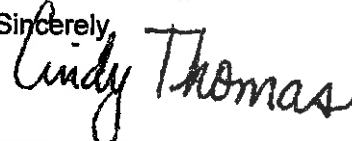
Our records also indicate you are not a private foundation within the meaning of section 509(a) of the Code because you are described in section 509(a)(1) and 170(b)(1)(A)(vi)

Donors may deduct contributions to you as provided in section 170 of the Code. Bequests, legacies, devises, transfers, or gifts to you or for your use are deductible for Federal estate and gift tax purposes if they meet the applicable provisions of sections 2055, 2106, and 2522 of the Code.

Please refer to our website www.irs.gov/eo for information regarding filing requirements. Specifically, section 6033(j) of the Code provides that failure to file an annual information return for three consecutive years results in revocation of tax-exempt status as of the filing due date of the third return for organizations required to file. The IRS maintains a list on our website of organizations whose tax-exempt status was automatically revoked under section 6033 (j) of the Code.

If you have any questions, please call us at the telephone number shown in the heading of this letter.

Sincerely,



Cindy Thomas
Manager, Exempt Organizations
Determinations

Florida Agriculture Center and Horse Park Authority

April 2015 Financial

Year-to-Date

July 2014 – June 2015

10:57 AM
06/06/16
Accrual Basis

Florida Agriculture Center and Horse Park Authority, Inc.
Statement of Financial Position
As of April 30, 2015

	<u>Apr 30, 16</u>	<u>Apr 30, 14</u>	<u>\$ Change</u>
ASSETS			
Current Assets			
Checking/Savings	71,811.83	8,958.32	62,853.51
Accounts Receivable	24,423.30	51,483.41	-27,060.11
Other Current Assets	48.17	13,122.00	-13,073.83
Total Current Assets	<u>96,283.30</u>	<u>73,663.73</u>	<u>22,719.57</u>
Fixed Assets	<u>4,550,630.95</u>	<u>3,022,081.79</u>	<u>1,528,549.16</u>
TOTAL ASSETS	<u>4,646,914.25</u>	<u>3,095,745.52</u>	<u>1,551,268.73</u>
LIABILITIES & EQUITY			
Liabilities			
Current Liabilities			
Accounts Payable	41,190.07	49,232.11	-8,042.04
Other Current Liabilities			
2400 - Payroll Liabilities	4,372.80	1,133.22	3,239.58
2420 - Accrued Payroll	1,153.85	1,153.85	0.00
2480 - Martin Collins	71,758.90	71,758.60	0.00
Total Other Current Liabilities	<u>77,285.25</u>	<u>74,045.67</u>	<u>3,239.58</u>
Total Current Liabilities	<u>118,475.32</u>	<u>123,277.78</u>	<u>-4,802.46</u>
Long Term Liabilities			
2710 - N/P - Tom Warriner	61,398.27	61,398.27	0.00
2720 - N/P - Anonymous	70,941.80	70,941.80	0.00
Total Long Term Liabilities	<u>132,340.07</u>	<u>132,340.07</u>	<u>0.00</u>
Total Liabilities	<u>250,815.39</u>	<u>255,617.85</u>	<u>-4,802.46</u>
Equity			
Temp Restricted Net Assets	-283,191.00	-283,191.00	0.00
Inv in Property, Net of Related Debt	4,543,951.86	2,981,920.67	1,562,031.19
Temporarily Restricted	135,338.00	141,298.00	-5,960.00
Total Equity	<u>4,396,098.86</u>	<u>2,840,027.67</u>	<u>1,556,071.19</u>
TOTAL LIABILITIES & EQUITY	<u>4,646,914.25</u>	<u>3,095,745.52</u>	<u>1,551,268.73</u>

Florida Agriculture Center and Horse Park Authority, Inc.
Statement of Activities
July 2014 through April 2015

	<u>Current</u> <u>Jul '14 - Apr 15</u>	<u>Prior Year</u> <u>Jul '13 - Apr 14</u>
Ordinary income/Expense		
Income		
4000 · EVENT INCOME	86,006.00	84,598.02
4100 · FUNDRAISING INCOME		
4105 · Donations	10,265.00	16,220.00
4150 · Sponsorships	20,000.00	8,737.38
4160 · License Plate	80,987.13	68,559.59
Total 4100 · FUNDRAISING INCOME	<u>111,252.13</u>	<u>93,516.97</u>
4300 · MANAGEMENT & GENERAL		
4310 · Facility Rental	160,800.94	142,736.74
4320 · Shavings	1,363.00	0.00
4331 · Florida Grant Money	1,364,057.27	1,263,023.22
4335 · Interest Income	1.13	9.98
Total 4300 · MANAGEMENT & GENERAL	<u>1,526,222.34</u>	<u>1,405,769.94</u>
Total income	1,723,480.47	1,583,884.93
Expense		
5500 · EVENT EXPENSE	60,061.08	58,007.99
5700 · FUNDRAISING	1,263.22	706.41
6000 · MANAGEMENT & GENERAL EXPENSES		
7000 · Facility Rental	18,714.38	14,652.12
6010 · Advertising	1,980.00	1,480.00
6150 · Bank Fees	426.50	287.26
6190 · Board Members	99.68	141.88
6250 · Charitable Contributions	700.00	150.00
6300 · Contract Labor	7,614.59	4,411.04
6400 · Dues and Memberships	821.50	406.25
6420 · Equipment Rental	3,740.71	996.60
6450 · Fuel and Oil	7,792.53	9,800.91
6700 · Insurance, Liability	17,830.00	17,173.00
6800 · Internet	1,620.00	327.17
6900 · Licenses and Permits	615.00	365.00
6990 · Merchant Fees	165.19	725.52
7020 · Marketing	1,343.60	850.00
7050 · Meals and Entertainment	3,264.89	2,050.35
7100 · Office Expense	4,282.95	1,041.30
7150 · Payroll Expenses	156,798.48	88,874.40
7200 · Payroll Taxes	11,685.35	6,441.28
7350 · Postage and Delivery	126.22	46.00
7360 · Printing and Reproduction	579.04	389.06
7370 · Professional Fees	35,598.27	30,233.72

Florida Agriculture Center and Horse Park Authority, Inc.
Statement of Activities
July 2014 through April 2015

	Current	Prior Year
	Jul '14 - Apr 15	Jul '13 - Apr 14
7385 · Reimbursable Expenses	-212.24	0.00
7430 · Repairs & Maintenance	17,670.20	7,143.55
7540 · Grounds Supplies	14,555.36	10,958.16
7550 · Office Supplies	1,032.69	198.15
7600 · Telephone	6,491.41	7,136.13
7650 · Travel	1,277.84	1,967.95
7800 · Utilities	9,320.90	12,785.55
Total 6000 · MANAGEMENT & GENERAL EXPENSES	<u>325,935.04</u>	<u>218,832.34</u>
 Total Expense	 <u>387,259.34</u>	 <u>277,546.74</u>
 Net Ordinary Income	 <u>1,336,221.13</u>	 <u>1,306,338.19</u>
 Net Income	 <u>1,336,221.13</u>	 <u>1,306,338.19</u>

11:06 AM
06/06/15

Florida Agriculture Center and Horse Park Authority, Inc.
Statement of Cash Flows
July 2014 through April 2015

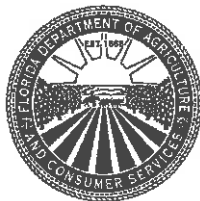
	<u>Jul '14 - Apr 15</u>
OPERATING ACTIVITIES	
Net Income	1,336,221.13
Adjustments to reconcile Net Income to net cash provided by operations:	
11000 - Accounts Receivable	-8,775.89
13000 - Prepaid Expenses	351.83
2000 - Accounts Payable	-1,804.98
24000 - Payroll Liabilities	<u>23,948.98</u>
Net cash provided by Operating Activities	1,349,941.07
INVESTING ACTIVITIES	
1667 - Covered Arena	-623,062.13
1690 - Barns	<u>-881,803.82</u>
Net cash provided by Investing Activities	<u>-1,304,865.75</u>
 Net cash increase for period	 45,075.32
 Cash at beginning of period	 <u>26,736.51</u>
Cash at end of period	<u><u>71,811.83</u></u>

11:10 AM
05/05/15

Florida Agriculture Center and Horse Park Authority, Inc.
A/P Aging Summary
As of April 30, 2015

	<u>1 - 30</u>	<u>31 - 60</u>	<u>61 - 90</u>	<u>> 90</u>	<u>TOTAL</u>
Farmer Berley and Associates Inc.	134.18	0.00	0.00	0.00	134.18
Florida Express Environmental	0.00	0.00	0.00	17,580.43	17,580.43
Gray, Ackerman & Haines, P.A.	0.00	0.00	0.00	18,578.48	18,578.48
Klein & Klein, P.A.	0.00	0.00	0.00	4,898.98	4,898.98
TOTAL	<u>134.18</u>	<u>0.00</u>	<u>0.00</u>	<u>41,058.89</u>	<u>41,190.97</u>

OFFICE OF THE COMMISSIONER
(850) 617-7700



THE CAPITOL
400 SOUTH MONROE STREET
TALLAHASSEE, FLORIDA 32399-0800

FLORIDA DEPARTMENT OF AGRICULTURE AND CONSUMER SERVICES
COMMISSIONER ADAM H. PUTNAM

Healthy Living in Florida, Inc.

Florida Department of Agriculture and Consumer Services

**DIRECT SUPPORT ORGANIZATION
2015 REPORT
IMPLEMENTATION OF COMMITTEE SUBSTITUTE SENATE BILL 1194**

Direct Support Organization (DSO) Name: Living Healthy in Florida, Inc.

Mailing address: 600 South Calhoun Street, Tallahassee, FL 32301

Telephone Number: 850-617-7400 Website Address: www.freshfromflorida.com

Statute Authority:

Section 570.64, Florida Statutes, provides for the establishment of the Division of Food, Nutrition, and Wellness at the Department of Agriculture and Consumer Services for the purposes expressed in Chapter 595, Florida Statutes, the “Florida School Food and Nutrition Act.”

Section 570.691, Florida Statutes, authorizes the Department to establish direct-support organizations to provide assistance, funding, and promotional support for the museums and other programs of the department and lists the provisions that govern the creation, use, powers, and duties of the direct support organizations.

Brief Description of the DSO’s Mission:

The mission of Living Healthy in Florida is to empower Floridians to make healthy choices for an improved quality of life.

The vision is to ensure all people in Florida have access to healthy, nutritious food, opportunities for physical activity and leading information on healthy choices.

Brief Description of the DSO’s Results Obtained:

Living Healthy in Florida, Inc. established and organized:

- January 24, 2014 – Living Healthy in Florida, Inc. incorporated
- October 1, 2014 – Living Healthy in Florida, Inc. Board of Directors appointed
- February 5, 2015 – Living Healthy in Florida, Inc. Board of Directors inaugural meeting
- May 26, 2015 – Living Healthy in Florida, Inc. Board of Directors conference call
- September 16, 2015 – Living Healthy in Florida, Inc. Board of Directors meeting to:
 - adopt Code of Ethics
 - adopt Strategic Plan

Brief Description of the DSO’s Plans for Next Three Fiscal Years:

The Board is in the process of creating a three year strategy for implementation and fundraising efforts. The areas of focus will be on food access, school gardens, physical activity interventions for schools and enhancements of the lunchroom experience to increase participation and consumption.

Electronic Notice (e-Postcard) for Tax-Exempt Organization Not Required to File Form 990 or 990-EZ

For Electronic Filing Only DO NOT MAIL - e-POSTCARD WILL BE SENT FOR YOU

Small tax-exempt organization with gross receipts of \$50,000 or less is required to use this form per enactment of the Pension Protection Act of 2006 (PPA)

For calendar year 2014, or tax year beginning , 2014, ending

Part I - Identifying information

Name of Organization LIVING HEALTHY IN FLORIDA INC
Address 600 SOUTH CALHOUN ST
Room/Suite
City TALLAHASSEE
State FL
ZIP Code 32399

Employer Identification Number . . 46-5074284

Part II - Required Information

A [X] Check this box to verify that organization's annual receipts are normally \$50,000 or less
Note: Not eligible to file Form 990-N if gross receipts are more than \$50,000

B Other Names Organization is Doing Business As

C Website: . . .

D Principal Officer of the Organization ROBIN C SAFLEY
Person [X] Business
Address 600 SOUTH CALHOUN ST
City TALLAHASSEE State FL ZIP Code 32399
Foreign Country

E [] Check this box if organization is going out of business

Form 990-N, also known as the e-Postcard, must be filed electronically with the Internal Revenue Service. There will be no paper form accepted by the Internal Revenue Service.

Do Not mail this form to the Internal Revenue Service.

IRS e-file Authentication Statement

2014

Keep for your records

Name(s) Shown on Return LIVING HEALTHY IN FLORIDA INC	Employer ID Number 46-5074284
--	----------------------------------

A - Practitioner PIN Authorization

Please indicate how the taxpayer(s) PIN(s) are entered into the program.

Officer(s) entered PIN(s)

ERO entered Officer's PIN

B - Signature of Electronic Return Originator

ERO Declaration:

I declare that the information contained in this electronic tax return is the information furnished to me by the Corporation. If the Exempt Organization furnished me a completed tax return, I declare that the information contained in this electronic tax return is identical to that contained in the return provided by the Exempt Organization. If the furnished return was signed by a paid preparer, I declare I have entered the paid preparer's identifying information in the appropriate portion of this electronic return. If I am the paid preparer, under the penalties of perjury, I declare that I have examined this electronic return, and to the best of my knowledge and belief, it is true, correct, and complete. This declaration is based on all information of which I have any knowledge.

I am signing this Tax Return by entering my PIN below.

ERO's PIN (EFIN followed by any 5 numbers) EFIN 596479 Self-Select PIN 13898

C - Signature of Officer

Perjury Statement:

Under penalties of perjury, I declare that I am an officer of the above Exempt Organization and that I have examined a copy of the Exempt Organization's 2014 electronic income tax return and accompanying schedules and statements and to the best of my knowledge and belief, it is true, correct, and complete.

Consent to Disclosure:

I consent to allow my electronic return originator (ERO), transmitter, or intermediate service provider to send the Exempt Organization's return to the IRS and to receive from the IRS (a) and acknowledgement of receipt or reason for rejection of the transmission, (b) an indication of any refund offset, (c) the reason for any delay in processing the return or refund, and (d) the date of any refund.

Electronic Funds Withdrawal Consent (if applicable):

I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the Exempt Organization's Federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institution involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment.

I am signing this Tax Return and Electronic Funds Withdrawal Consent, if applicable, by entering my self-selected PIN below.

Officer's PIN 13898

Date 05/06/2015

**990-EZ, 990, 990-T and 990-PF
Information Worksheet**

2014

Part I – Identifying Information

Employer Identification Number . . . 46-5074284

Name LIVING HEALTHY IN FLORIDA INC

Doing Business As _____

Address 600 SOUTH CALHOUN ST Room/Suite . . _____

City TALLAHASSEE State . FL ZIP Code 32399

Province/State _____ Foreign Postal Code . . _____

Foreign Code _____ Foreign Country _____

Telephone Number (850) 617-7442 Extension _____

Fax (850) 617-7402 E-Mail Address _____

Eligible for hurricane tax relief legislation benefits, check here

Part II – Type of Return

- | | |
|---|---|
| <input type="checkbox"/> Form 990-EZ only | <input type="checkbox"/> Form 990-EZ with Form 990-T |
| <input type="checkbox"/> Form 990 only | <input type="checkbox"/> Form 990 with Form 990-T |
| <input type="checkbox"/> Form 990-PF only | <input type="checkbox"/> Form 990-PF with Form 990-T |
| <input type="checkbox"/> Form 990-T only | <input checked="" type="checkbox"/> Form 990-N (gross receipts \$50,000 or less) for Electronic Filing only |

QuickBooks Import Users & 990 to 990-EZ Data Transfer Option: Check if you're filing the EZ & want 990 imported data copied to the EZ OR for those not importing from QuickBooks who transferred from prior year 990 and now qualify to file the EZ this year, check this box to transfer 990 data to the EZ.

IMPORTANT

Before transferring data from Form 990 to Form 990-EZ , refer to "How to transfer data from filing Form 990 to 990-EZ" listed above in the Most Common Support Questions or Tax Help for this line.

Part III – Type of Organization

- | | |
|---|---|
| <input checked="" type="checkbox"/> 501(c) Corporation/Association <u>3</u> (subsection number) | <input type="checkbox"/> 220(e) Trust |
| <input type="checkbox"/> 501(c) Trust _____ (subsection number) | <input type="checkbox"/> 408A Trust |
| <input type="checkbox"/> 4947(a)(1) Trust | <input type="checkbox"/> 529(a) Corporation |
| <input type="checkbox"/> 408(e) Trust | <input type="checkbox"/> 529(a) Trust |
| <input type="checkbox"/> 401(a) Trust | <input type="checkbox"/> 530(a) Trust |
| <input type="checkbox"/> Other _____ (describe) | <input type="checkbox"/> 527 Organization |
| | <input type="checkbox"/> 501(c) Association |

Part IV – Tax Year and Filing Information

- Calendar year
- Fiscal year — Ending month . . . _____
- Short year — Beginning date . . . _____ Ending date . . . _____

Check this box if the organization is enrolled in the Electronic Federal Tax Payment System (EFTPS)

Part V – 2014 Estimated Taxes Paid

Check this box if the organization is a private foundation

Form 990-T Form 990-PF

Amount of 2013 overpayment credited to 2014 estimated tax

Payment Quarters	Due Date	Form 990-T		Form 990-PF	
		Date Paid	Amount Paid	Date Paid	Amount Paid
1st Quarter Payment	04/15/14				
2nd Quarter Payment	06/16/14				
3rd Quarter Payment	09/15/14				
4th Quarter Payment	12/15/14				
Additional Payment 1					
Additional Payment 2					
Additional Payment 3					
Additional Payment 4					

Part VI – Electronic Filing Information

IMPORTANT: Do not use the Miscellaneous Statement or Additional Information if filing Form 990 or Form 990-EZ. These statements will not be transmitted with the return. Use Schedule O or the applicable Supplemental Information for the appropriate Schedule.

Electronic Filing:

- File the federal return electronically
- File Form 114 Report of Foreign Bank and Financial Accounts (FBAR) electronically

Practitioner PIN program:

- Sign this return electronically using the Practitioner PIN
- ERO entered PIN

Officer's PIN (enter any 5 numbers) . . . 13898
 Date PIN entered 05/06/2015

Electronic Filing of Extensions:

Check this box to file Form 8868 (application for extension of time to file return) electronically

Electronic Filing of Amended Return:

File Amended Form 114 Report of Foreign Bank and Financial Accounts (FBAR) electronically

Information required for Electronic Filing:

Officer's Name . ROBIN C SAFLEY

Electronic Filing of Amended Return:

Check this box to file amended return electronically

Part VII – Electronic Funds Withdrawal Information (Form 990PF filers only)

- | | | |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | Use electronic funds withdrawal of federal balance due (EF only)? |
| <input type="checkbox"/> | <input type="checkbox"/> | Use electronic funds withdrawal of Form 8868 balance due (EF only)? |
| <input type="checkbox"/> | <input type="checkbox"/> | Use electronic funds withdrawal of amended return balance due (EF only)? |

If any options selected above, enter information below, (Review transferred information for accuracy)

Bank Information

Name of Financial Institution (optional)

Check the appropriate box Checking Savings
 Routing number _____
 Account number _____

Payment Information

Enter the payment date to withdraw tax payment _____
 Balance due amount from this return _____
 Enter an amount to withdraw tax payment _____
 If partial payment is made, the remaining balance due _____
 Payment date for amended returns _____
 Balance due amount for amended returns _____

Part VIII – Information for Client Letter

	Form 990-EZ or Form 990	Form 990-PF	Form 990-T
Extended Due Date	_____	_____	_____

Letter Salutation . . _____

Part IX – Return Preparer

Enter preparer code from Firm/Preparer Info (See Help) . . . 1
 QuickZoom to Firm/Preparer Info ▶ _____
 QuickZoom to Form 990-EZ, Pages 1 through 4 ▶ _____
 QuickZoom to Form 990, Page 1 ▶ _____
 QuickZoom to Form 990-PF, Page 1 ▶ _____
 QuickZoom to Form 990-T, Page 1 ▶ _____
 QuickZoom to Form 990-N, e-PostCard ▶ _____
 QuickZoom to Client Status ▶ _____

Electronic Filing Information Worksheet

Keep for your records

2014

Name(s) shown on return

LIVING HEALTHY IN FLORIDA INC

Identifying number

46-5074284

The ERO Information below will automatically calculate based on the preparer code entered on the return.

For returns that are prepared as a "Non-Paid Preparer" (XNP) or "Self-Prepared" (XSP)

enter the EFIN for the ERO that is responsible for this return. ▶ 596479

For returns that are marked as a "Non-Paid Preparer" (XNP) or "Self-Prepared" (XSP)

enter a PIN for the ERO that is responsible for filing return ▶

ERO Name				ERO Electronic Filers Identification Number (EFIN)
<u>BARBARA SHEEHAN WITHERS</u>				<u>596479</u>
ERO Address				ERO Employer Identification Number
<u>3837-A KILLEARN CENTER CT</u>				<u>45-4138976</u>
City	State	ZIP Code	ERO Social Security Number or PTIN	
<u>TALLAHASSEE</u>	<u>FL</u>	<u>32309-3486</u>	<u>P00138982</u>	
Country				

Firm Name				Preparer Social Security Number or PTIN	
<u>LEONARD & WITHERS CPAs PL</u>				<u>P00138982</u>	
Preparer Name				Employer Identification Number	
<u>BARBARA SHEEHAN WITHERS CPA</u>				<u>45-4138976</u>	
Address				Phone Number	Fax Number
<u>3837 KILLEARN CENTER CT, STE A</u>				<u>(850) 893-4080</u>	<u>(850) 893-6375</u>
City	State	ZIP Code			
<u>TALLAHASSEE</u>	<u>FL</u>	<u>32309-3486</u>			
Country				Preparer E-mail Address	
				<u>WITHERSCPA@AOL.COM</u>	

Part IV -- Amended Returns

Enter the payment date to withdraw tax payment ▶

Amount you are paying with the amended return ▶

- Check this box to file another federal amended return electronically
- File another Amended Form 114 Report of Foreign Bank and Financial Accounts (FBAR) electronically

* Select the state and/or city amended return(s) to file electronically.

Part V -- Name Control

Name Control, enter here to override default LIVI