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Form 990

## Return of Organization Exempt From Income Tax

2009

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

► The organization may have to use a copy of this return to satisfy state reporting requirements

## A For the 2009 calendar year, or tax year beginning 07-01-2009 and ending 06-30-2010

B Check if applicable	C Name of organization WORKFORCE FLORIDA INC		D Employer identification number 59-3659026
<input type="checkbox"/> Address change	Doing Business As		E Telephone number (850) 921-1119
<input type="checkbox"/> Name change	Number and street (or P O box if mail is not delivered to street address) 1580 WALDO PALMER LANE No 1		G Gross receipts \$ 10,481,480
<input type="checkbox"/> Initial return	Room/suite		
<input type="checkbox"/> Terminated	City or town, state or country, and ZIP + 4 TALLAHASSEE, FL 32308		
<input type="checkbox"/> Amended return	F Name and address of principal officer LARRY T CHAMPION 1580 WALDO PALMER LANE SUITE 1 TALLAHASSEE, FL 32308		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> Application pending			H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions)

I Tax-exempt status  501(c) ( 3 )  (insert no)  4947(a)(1) or  527

J Website: ► WWW WORKFORCEFLORIDA COM

K Form of organization  Corporation  Trust  Association  Other ► L Year of formation 2000 M State of legal domicile FL

## Part I Summary

1 Briefly describe the organization's mission or most significant activities TO ASSIST IN DEVELOPING FLORIDA'S BUSINESS EMPLOYMENT CLIMATE		
2 Check this box ► 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	47
4 Number of independent voting members of the governing body (Part VI, line 1b)	4	47
5 Total number of employees (Part V, line 2a)	5	21
6 Total number of volunteers (estimate if necessary)	6	0
7a Total gross 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

8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
9 Program service revenue (Part VIII, line 2g)	10,416,851	10,481,370
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		0
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	121	110
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	10,416,972	10,481,480

13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	6,513,070	6,276,231
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)	2,257,838	2,283,726
16a Professional fundraising fees (Part IX, column (A), line 11e)		0
b Total fundraising expenses (Part IX, column (D), line 25) ►0		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	1,555,082	1,928,791
18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	10,325,990	10,488,748
19 Revenue less expenses Subtract line 18 from line 12	90,982	-7,268

20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
21 Total liabilities (Part X, line 26)	14,154,977	13,701,995
22 Net assets or fund balances Subtract line 21 from line 20	13,444,973	12,999,259
	710,004	702,736

## 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		
***** Signature of officer LARRY T CHAMPION EXECUTIVE VP OF OPERATIONS Type or print name and title	2011-03-21 Date	

Preparer's signature Bob Powell	Date 2011-03-09	Check if self-employed <input type="checkbox"/>	Preparer's identifying number (see instructions)
Firm's name (or yours if self-employed), address, and ZIP + 4 James Moore & Co PL 2477 Tim Gamble Place Suite 200 Tallahassee, FL 323084386	EIN ►		Phone no ► (850) 386-6184

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

**Part III Statement of Program Service Accomplishments**

**1** Briefly describe the organization's mission

TO ASSIST IN DEVELOPING FLORIDA'S BUSINESS EMPLOYMENT CLIMATE

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**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 exempt purpose achievements for each of the organization's three largest program services by expenses  
Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

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**4a** (Code ) (Expenses \$ 3,865,617 including grants of \$ 3,865,617 ) (Revenue \$ )  
THE QUICK RESPONSE TRAINING PROGRAM PROVIDES CUSTOMIZED TRAINING TO NEW VALUE ADDED BUSINESSES LOCATING IN FLORIDA AND TO EXISTING OR EXPANDING BUSINESSES THAT MEET THE STATE'S ECONOMICS GOALS

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**4b** (Code ) (Expenses \$ 2,297,066 including grants of \$ 2,297,066 ) (Revenue \$ )  
THE INCUMBENT WORKER TRAINING PROGRAM PROVIDES GRANT FUNDS TO FLORIDA COMPANIES FOR SKILLS UPGRADE TRAINING OF CURRENTLY EMPLOYED WORKERS IN AN EFFORT TO KEEP THE COMPANY AND WORKERS COMPETITIVE THE PROGRAM IS FUNDED WITH FEDERAL WIA DOLLARS

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**4c** (Code ) (Expenses \$ 1,361,884 including grants of \$ 113,548 ) (Revenue \$ )  
SPECIAL PROJECTS IS A DISCRETIONARY PROGRAM WITH FUNDING PROVIDED BY THE BOARD OF DIRECTORS FOR PILOT AND DEMONSTRATION PROJECTS

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

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**4e** **Total program service expenses** \$ 7,524,567

**Part IV Checklist of Required Schedules**

1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A

2 Is the organization required to complete Schedule B, Schedule of Contributors?

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

4 **Section 501(c)(3) organizations.** Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II

5 **Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations.** Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III

6 Did the organization maintain any donor advised funds or any similar funds or accounts where 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

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

8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III

9 Did the organization report an amount in Part X, line 21, 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

10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V

11 Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.

- Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.
- Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.
- 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.
- 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.
- Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.
- Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.

12 Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII

12A Was the organization included in consolidated, independent audited financial statements for the tax year?  Yes  No

If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional  12A  No

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

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

b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I

15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U.S.? If "Yes," complete Schedule F, Part II

16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U.S.? If "Yes," complete Schedule F, Part III

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

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

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

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

	Yes	No
1	Yes	
2	Yes	
3		No
4		No
5		
6		No
7		No
8		No
9		No
10		No
11	Yes	
12	Yes	
13		No
14a		No
14b		No
15		No
16		No
17		No
18		No
19		No
20		No

**Part IV Checklist of Required Schedules (continued)**

<b>21</b> Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	<b>21</b>	Yes	
<b>22</b> Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	<b>22</b>		No
<b>23</b> Did the organization answer "Yes" to Part VII, Section A, questions 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	<b>23</b>	Yes	
<b>24a</b> 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 questions 24b-24d and complete Schedule K. If "No," go to line 25	<b>24a</b>		No
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	<b>24b</b>		
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	<b>24c</b>		
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	<b>24d</b>		
<b>25a</b> <b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	<b>25a</b>		No
<b>b</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	<b>25b</b>		No
<b>26</b> Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	<b>26</b>		No
<b>27</b> Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	<b>27</b>		No
<b>28</b> 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)	<b>28a</b>		No
<b>a</b> A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	<b>28b</b>		No
<b>b</b> A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	<b>28c</b>		No
<b>c</b> An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV	<b>29</b>		No
<b>30</b> Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	<b>30</b>		No
<b>31</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	<b>31</b>		No
<b>32</b> Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	<b>32</b>		No
<b>33</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	<b>33</b>		No
<b>34</b> 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	<b>34</b>		No
<b>35</b> Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	<b>35</b>		No
<b>36</b> <b>Section 501(c)(3) organizations.</b> Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	<b>36</b>		No
<b>37</b> 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	<b>37</b>		No
<b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	<b>38</b>	Yes	

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

		Yes	No
<b>1a</b>	Enter the number reported in Box 3 of Form 1096, <i>Annual Summary and Transmittal of U.S. Information Returns</i> . Enter -0- if not applicable	<b>1a</b>	3
<b>1b</b>	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	<b>1b</b>	0
<b>1c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	<b>1c</b>	
<b>2a</b>	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return	<b>2a</b>	21
<b>2b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note:</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	<b>2b</b>	Yes
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	<b>3a</b>	No
<b>3b</b>	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	<b>3b</b>	
<b>4a</b>	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)?	<b>4a</b>	No
<b>4b</b>	If "Yes," enter the name of the foreign country. See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts	<b>4b</b>	
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<b>5a</b>	No
<b>5b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	<b>5b</b>	No
<b>5c</b>	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	<b>5c</b>	
<b>6a</b>	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?	<b>6a</b>	No
<b>6b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	<b>6b</b>	
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>	<b>7a</b>	No
<b>7b</b>		<b>7b</b>	
<b>7c</b>		<b>7c</b>	No
<b>7d</b>	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?	<b>7d</b>	
<b>7e</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided?	<b>7e</b>	
<b>7f</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	<b>7f</b>	
<b>7g</b>	If "Yes," indicate the number of Forms 8282 filed during the year	<b>7g</b>	
<b>7h</b>	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<b>7h</b>	
<b>7i</b>	If "Yes," did the organization pay premiums, directly or indirectly, on a personal benefit contract?	<b>7i</b>	
<b>7j</b>	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	<b>7j</b>	
<b>7k</b>	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	<b>7k</b>	
<b>8</b>	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	<b>8</b>	
<b>9</b>	<b>Sponsoring organizations maintaining donor advised funds.</b>	<b>9a</b>	
<b>9b</b>	Did the organization make any taxable distributions under section 4966?	<b>9b</b>	
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter	<b>10a</b>	
<b>10b</b>	Initiation fees and capital contributions included on Part VIII, line 12	<b>10b</b>	
<b>10c</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	<b>10c</b>	
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter	<b>11a</b>	
<b>11b</b>	Gross income from members or shareholders	<b>11b</b>	
<b>11c</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	<b>11c</b>	
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?	<b>12a</b>	
<b>12b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	<b>12b</b>	

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

### Section A. Governing Body and Management

		Yes	No
<b>1a</b> Enter the number of voting members of the governing body . . .	<b>1a</b>	47	
<b>b</b> Enter the number of voting members that are independent . . .	<b>1b</b>	47	
<b>2</b> 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? . . . . .	<b>2</b>		No
<b>3</b> 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? . . . . .	<b>3</b>		No
<b>4</b> Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? . . . . .	<b>4</b>		No
<b>5</b> Did the organization become aware during the year of a material diversion of the organization's assets? . . . . .	<b>5</b>		No
<b>6</b> Does the organization have members or stockholders? . . . . .	<b>6</b>		No
<b>7a</b> Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? . . . . .	<b>7a</b>		No
<b>b</b> Are any decisions of the governing body subject to approval by members, stockholders, or other persons? . . . . .	<b>7b</b>		No
<b>8</b> Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
<b>a</b> The governing body? . . . . .	<b>8a</b>	Yes	
<b>b</b> Each committee with authority to act on behalf of the governing body? . . . . .	<b>8b</b>	Yes	
<b>9</b> 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 . . . . .	<b>9</b>		No

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

		Yes	No
<b>10a</b> Does the organization have local chapters, branches, or affiliates? . . . . .	<b>10a</b>		No
<b>b</b> If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? . . . . .	<b>10b</b>		
<b>11</b> Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? . . . . .	<b>11</b>		No
<b>11A</b> Describe in Schedule O the process, if any, used by the organization to review the Form 990 . . . . .			
<b>12a</b> Does the organization have a written conflict of interest policy? If "No," go to line 13 . . . . .	<b>12a</b>	Yes	
<b>b</b> Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? . . . . .	<b>12b</b>	Yes	
<b>c</b> Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done . . . . .	<b>12c</b>	Yes	
<b>13</b> Does the organization have a written whistleblower policy? . . . . .	<b>13</b>	Yes	
<b>14</b> Does the organization have a written document retention and destruction policy? . . . . .	<b>14</b>	Yes	
<b>15</b> 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?			
<b>a</b> The organization's CEO, Executive Director, or top management official . . . . .	<b>15a</b>	Yes	
<b>b</b> Other officers or key employees of the organization . . . . .	<b>15b</b>	Yes	
If "Yes" to line a or b, describe the process in Schedule O (See instructions )			
<b>16a</b> Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? . . . . .	<b>16a</b>		No
<b>b</b> If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? . . . . .	<b>16b</b>		

### Section C. Disclosure

**17** List the States with which a copy of this Form 990 is required to be filed ►

**18** Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply  
 Own website  Another's website  Upon request

**19** Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table

**20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►  
 LARRY CHAMPION  
 1580 WALDO PALMER LANE SUITE 1  
 TALLAHASSEE, FL 323085430  
 (850) 921-1119

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

**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. Use Schedule J-2 if additional space is needed.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's **current** key employees 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, or 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 the organization did not compensate any current or former officer, director, trustee or key employee.

<b>1b Total</b>	525,343	0	94,522
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**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 **►4**

		<b>Yes</b>	<b>No</b>
<b>3</b> Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	<b>3</b>		No
<b>4</b> 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	<b>4</b>	Yes	
<b>5</b> Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person	<b>5</b>		No

## 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

(A) Name and business address	(B) Description of services	(C) Compensation
Fairfield Index Inc 10117 Princess Palm Ave Suite 3 Tampa, FL 33610	Strategic Plan Consulting	502,300
Moore Consulting Group 2011 delta blvd suite 2 tallahassee, FL 32303	Marketing Consulting	371,521
Florida Trend's NEXT po box 919041 orlando, FL 328919041	Marketing	250,772
<b>2</b> Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization <b>►3</b>		

**Part VIII Statement of Revenue**

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	<b>1a</b> Federated campaigns . . . . .	<b>1a</b>				
	<b>b</b> Membership dues . . . . .	<b>1b</b>				
	<b>c</b> Fundraising events . . . . .	<b>1c</b>				
	<b>d</b> Related organizations . . . . .	<b>1d</b>				
	<b>e</b> Government grants (contributions)	<b>1e</b>	10,464,153			
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>	17,217			
	<b>g</b> Noncash contributions included in lines 1a-1f \$					
	<b>h</b> <b>Total.</b> Add lines 1a-1f . . . . .		10,481,370			
Program Service Revenue	Business Code					
			<b>2a</b>			
			<b>b</b>			
			<b>c</b>			
			<b>d</b>			
			<b>e</b>			
			<b>f</b> All other program service revenue			
	<b>g</b> <b>Total.</b> Add lines 2a-2f . . . . .					
Other Revenue	<b>3</b> Investment income (including dividends, interest and other similar amounts) . . . . .					
			110		110	
	<b>4</b> Income from investment of tax-exempt bond proceeds . . . . .					
	<b>5</b> Royalties . . . . .					
	<b>6a</b> Gross Rents	(I) Real	(II) Personal			
	<b>b</b> Less rental expenses					
	<b>c</b> Rental income or (loss)					
	<b>d</b> Net rental income or (loss) . . . . .					
<b>7a</b> Gross amount from sales of assets other than inventory	(I) Securities	(II) Other				
<b>b</b> Less cost or other basis and sales expenses						
<b>c</b> Gain or (loss)						
<b>d</b> Net gain or (loss) . . . . .						
<b>8a</b> Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18 . . . . .						
<b>b</b> Less direct expenses . . . . .	<b>b</b>					
<b>c</b> Net income or (loss) from fundraising events . . . . .						
<b>9a</b> Gross income from gaming activities See Part IV, line 19 . . . . .	<b>a</b>					
<b>b</b> Less direct expenses . . . . .	<b>b</b>					
<b>c</b> Net income or (loss) from gaming activities . . . . .						
<b>10a</b> Gross sales of inventory, less returns and allowances . . . . .	<b>a</b>					
<b>b</b> Less cost of goods sold . . . . .	<b>b</b>					
<b>c</b> Net income or (loss) from sales of inventory . . . . .						
Miscellaneous Revenue		Business Code				
<b>11a</b>						
<b>b</b>						
<b>c</b>						
<b>d</b> All other revenue . . . . .						
<b>e</b> <b>Total.</b> Add lines 11a-11d . . . . .						
<b>12</b> <b>Total revenue.</b> See Instructions . . . . .		10,481,480	0	0	110	

**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) but are not required to complete columns (B), (C), and (D).**

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	6,276,231	6,276,231		
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 . . . . .	377,791		377,791	
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	1,582,047		1,582,047	
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) . . . . .	92,327		92,327	
9 Other employee benefits . . . . .	153,478		153,478	
10 Payroll taxes . . . . .	78,083		78,083	
11 Fees for services (non-employees)				
a Management . . . . .				
b Legal . . . . .				
c Accounting . . . . .	32,000		32,000	
d Lobbying . . . . .				
e Professional fundraising See Part IV, line 17 . . . . .				
f Investment management fees . . . . .				
g Other . . . . .	1,318,681	1,173,132	145,549	
12 Advertising and promotion . . . . .				
13 Office expenses . . . . .	115,600	5,684	109,916	
14 Information technology . . . . .				
15 Royalties . . . . .				
16 Occupancy . . . . .	165,987		165,987	
17 Travel . . . . .	110,165		110,165	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials . . . . .				
19 Conferences, conventions, and meetings . . . . .	106,342	68,125	38,217	
20 Interest . . . . .				
21 Payments to affiliates . . . . .				
22 Depreciation, depletion, and amortization . . . . .	6,374		6,374	
23 Insurance . . . . .	8,728		8,728	
24 Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below )				
a TELEPHONE	29,476		29,476	
b PRINTING AND PUBLICATIO	10,353		10,353	
c EQUIPMENT RENTAL AND MA	9,481		9,481	
d POSTAGE AND SHIPPING	5,932		5,932	
e MARKETING	1,395	1,395		
f All other expenses	8,277		8,277	
<b>25 Total functional expenses.</b> Add lines 1 through 24f	10,488,748	7,524,567	2,964,181	0
<b>26 Joint costs.</b> Check here <input checked="" type="checkbox"/> if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

**Part X Balance Sheet**

		<b>(A)</b> Beginning of year	<b>(B)</b> End of year
Assets	1 Cash—non-interest-bearing . . . . .	1	
	2 Savings and temporary cash investments . . . . .	3,174,176	2,986,272
	3 Pledges and grants receivable, net . . . . .	929,273	660,692
	4 Accounts receivable, net . . . . .	4	1,670
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L . . . . .	5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L . . . . .	6	
	7 Notes and loans receivable, net . . . . .	7	
	8 Inventories for sale or use . . . . .	8	
	9 Prepaid expenses and deferred charges . . . . .	35,991	36,235
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	95,201
	b Less accumulated depreciation . . . . .	10b	89,323
		12,252	10c
			5,878
	11 Investments—publicly traded securities . . . . .	11	
	12 Investments—other securities See Part IV, line 11 . . . . .	9,989,685	12
	13 Investments—program-related See Part IV, line 11 . . . . .	13	
	14 Intangible assets . . . . .	14	
	15 Other assets See Part IV, line 11 . . . . .	13,600	15
	16 <b>Total assets.</b> Add lines 1 through 15 (must equal line 34) . . . . .	14,154,977	16
			13,701,995
Liabilities	17 Accounts payable and accrued expenses . . . . .	903,368	17
	18 Grants payable . . . . .	18	168,268
	19 Deferred revenue . . . . .	12,536,105	19
	20 Tax-exempt bond liabilities . . . . .	20	
	21 Escrow or custodial account liability Complete Part IV of Schedule D . . . . .	21	
	22 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 Complete Part X of Schedule D . . . . .	5,500	25
	26 <b>Total liabilities.</b> Add lines 17 through 25 . . . . .	13,444,973	26
			12,999,259
Net Assets or Fund Balances	27 Unrestricted net assets . . . . .	27	
	28 Temporarily restricted net assets . . . . .	28	
	29 Permanently restricted net assets . . . . .	29	
	30 Capital stock or trust principal, or current funds . . . . .	0	30
	31 Paid-in or capital surplus, or land, building or equipment fund . . . . .	0	31
	32 Retained earnings, endowment, accumulated income, or other funds . . . . .	710,004	32
	33 Total net assets or fund balances . . . . .	710,004	33
	34 Total liabilities and net assets/fund balances . . . . .	14,154,977	34
			13,701,995
	<b>Organizations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b>		
	<b>Organizations that do not follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 30 through 34.</b>		
	30 Capital stock or trust principal, or current funds . . . . .	0	30
	31 Paid-in or capital surplus, or land, building or equipment fund . . . . .	0	31
	32 Retained earnings, endowment, accumulated income, or other funds . . . . .	710,004	32
	33 Total net assets or fund balances . . . . .	710,004	33
	34 Total liabilities and net assets/fund balances . . . . .	14,154,977	34
			13,701,995

**Part XI Financial Statements and Reporting**

**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? . . . . .

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

**c** If "Yes," to 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 . . . . .

**d** If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both  
 Separate basis       Consolidated basis       Both consolidated and separated basis

**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
<b>2a</b>		No
<b>2b</b>	Yes	
<b>2c</b>	Yes	
<b>3a</b>	Yes	
<b>3b</b>	Yes	

**SCHEDULE A**  
(Form 990 or 990EZ)**Public Charity Status and Public Support****2009****Open to Public  
Inspection**

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. ► See separate instructions.

Department of the Treasury  
Internal Revenue Service  
Name of the organization  
WORKFORCE FLORIDA INCEmployer identification number  
59-3659026**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 **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 3 31/3% 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 3 31/3% 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 11e through 11h  
 a  Type I      b  Type II      c  Type III - Functionally integrated      d  Type III - Other

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 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)		No
11g(ii)		No
11g(iii)		No

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 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 support?
			Yes	No	Yes	No	Yes	No	
STATE OF FLORIDA	596001874	06	Yes			No	Yes		10,464,153
<b>Total</b>									10,464,153

**Part II Support Schedule for Organizations Described in IRC 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.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(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 <b>Total.</b> 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 <b>Public Support.</b> Subtract line 5 from line 4						

**Section B. Total Support**

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(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 (Explain in Part IV) Do not include gain or loss from the sale of capital assets						
11 <b>Total support</b> (Add lines 7 through 10)						
12 Gross receipts from related activities, etc (See instructions)					12	
13 <b>First Five Years</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and <b>stop here</b>						►

**Section C. Computation of Public Support Percentage**

14 Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f))	14	
15 Public Support Percentage for 2008 Schedule A, Part II, line 14	15	
16a <b>33 1/3% support test—2009.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization		►
b <b>33 1/3% support test—2008.</b> If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization		►
17a <b>10%-facts-and-circumstances test—2009.</b> 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 <b>stop here</b> . Explain in Part IV how the organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization		►
b <b>10%-facts-and-circumstances test—2008.</b> 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 <b>stop here</b> . Explain in Part IV how the organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization		►
18 <b>Private Foundation</b> If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions		►

**Part III Support Schedule for Organizations Described in IRC 509(a)(2)**  
 (Complete only if you checked the box on line 9 of Part I.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(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						
<b>6 Total.</b> Add lines 1 through 5						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons						
<b>b</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						
<b>c</b> Add lines 7a and 7b						
<b>8 Public Support</b> (Subtract line 7c from line 6 )						

**Section B. Total Support**

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
<b>c</b> Add lines 10a and 10b						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
<b>12</b> Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV )						
<b>13 Total support</b> (Add lines 9, 10c, 11 and 12 )						
<b>14 First Five Years</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and <b>stop here</b>						

**Section C. Computation of Public Support Percentage**

15 Public Support Percentage for 2009 (line 8 column (f) divided by line 13 column (f))	15
16 Public support percentage from 2008 Schedule A, Part III, line 15	16

**Section D. Computation of Investment Income Percentage**

17 Investment income percentage for 2009 (line 10c column (f) divided by line 13 column (f))	17
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18
<b>19a 33 1/3% support tests—2009.</b> 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 <b>stop here</b> . The organization qualifies as a publicly supported organization	
<b>b 33 1/3% support tests—2008.</b> 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 <b>stop here</b> . The organization qualifies as a publicly supported organization	
<b>20 Private Foundation</b> If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions	

**Part IV** **Supplemental Information.** Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. See instructions

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2009

Open to Public  
Inspection**SCHEDULE D**  
(Form 990)**Supplemental Financial Statements**

► Complete if the organization answered "Yes," to Form 990,  
Part IV, line 6, 7, 8, 9, 10, 11, or 12.  
► Attach to Form 990. ► See separate instructions.

Department of the Treasury  
Internal Revenue Service**Name of the organization**  
WORKFORCE FLORIDA INC**Employer identification number**

59-3659026

**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?  Yes  No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may 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?  Yes  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 pleasure)  Preservation of an historically importantly land area

Protection of natural habitat  Preservation of a certified historic structure

Preservation of open space

2 Complete lines 2a-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 Year
2a	
2b	
2c	
2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable 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 170(h)(4)(B)(ii)?  Yes  No

9 In Part XIV, 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, 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 XIV, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116, 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 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 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 XIV

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 XIV and complete the following table

	<b>Amount</b>
<b>1c</b>	
<b>1d</b>	
<b>1e</b>	
<b>1f</b>	

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

**b** If "Yes," explain the arrangement in Part XIV

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

	<b>(a) Current Year</b>	<b>(b) Prior Year</b>	<b>(c) Two Years Back</b>	<b>(d) Three Years Back</b>	<b>(e) Four Years Back</b>
<b>1a</b> Beginning of year balance . . . . .					
<b>b</b> Contributions . . . . .					
<b>c</b> Investment earnings or losses . . . . .					
<b>d</b> Grants or scholarships . . . . .					
<b>e</b> Other expenditures for facilities and programs . . . . .					
<b>f</b> Administrative expenses . . . . .					
<b>g</b> End of year balance . . . . .					

**2** Provide the estimated percentage of the year end balance held as

**a** Board designated or quasi-endowment ► %

**b** Permanent endowment ► %

**c** Term endowment ► %

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

**(i)** unrelated organizations . . . . .  Yes  No

**(ii)** related organizations . . . . .  Yes  No

**b** If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? . . . . .  Yes  No

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

**Part VI Investments—Land, Buildings, and Equipment.** See Form 990, Part X, line 10.

	<b>Description of investment</b>	<b>(a) Cost or other basis (investment)</b>	<b>(b) Cost or other basis (other)</b>	<b>(c) Accumulated depreciation</b>	<b>(d) Book value</b>
<b>1a</b> Land . . . . .					
<b>b</b> Buildings . . . . .					
<b>c</b> Leasehold improvements . . . . .	7,365		5,229		2,136
<b>d</b> Equipment . . . . .	71,687		68,529		3,158
<b>e</b> Other . . . . .	16,149		15,565		584
<b>Total.</b> Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) . . . . .					5,878

**Part VII Investments—Other Securities.** 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
Financial derivatives		
Closely-held equity interests		
Other		
US TREASURY BILLS	9,997,998	C
<b>Total</b> (Column (b) should equal Form 990, Part X, col (B), line 12.)	9,997,998	

**Total.** (Column (b) should equal Form 990, Part X, col (B) line 12.) **9,997,998**

**Part VIII Investments—Program Related.** See Form 990, Part X, line 13

**Total.** (Column (b) should equal Form 990, Part X, col (B) line 13)

**Part IX Other Assets.** See Form 990, Part X, line 15

**Total.** (Column (b) should equal Form 990, Part X, col.(B) line 15.)

**Part X Other Liabilities.** See Form 990, Part X, line 25

**Total. (Column (b) should equal Form 990, Part X, col (B) line 25 )** ► **5,500**

**Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements**

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	10,481,480
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	10,488,748
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-7,268
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	0
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-7,268

**Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return**

1	Total revenue, gains, and other support per audited financial statements . . . . .	1	10,481,480
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 XIV) . . . . .	2d	
e	Add lines 2a through 2d . . . . .	2e	0
3	Subtract line 2e from line 1 . . . . .	3	10,481,480
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 XIV) . . . . .	4b	
c	Add lines 4a and 4b . . . . .	4c	0
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12 ) . . . . .	5	10,481,480

**Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**

1	Total expenses and losses per audited financial statements . . . . .	1	10,488,748
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 XIV) . . . . .	2d	
e	Add lines 2a through 2d . . . . .	2e	0
3	Subtract line 2e from line 1 . . . . .	3	10,488,748
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 XIV) . . . . .	4b	
c	Add lines 4a and 4b . . . . .	4c	0
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18 ) . . . . .	5	10,488,748

**Part XIV Supplemental Information**

Complete this part to 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, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information

Identifier	Return Reference	Explanation

## Schedule I (Form 990)

## **Grants and Other Assistance to Organizations, Governments and Individuals in the United States**

**Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.**

► Attach to Form 990

2009

**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

Name of the organization  
**WORKFORCE FLORIDA INC**

**Employer identification number**

59-3659026

## **Part I General Information on Grants and Assistance**

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . .  Yes  No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

**Part II Grants and Other Assistance to Governments and Organizations in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed.

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC Code section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
See Additional Data Table							

**Part III Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed.

**Part IV Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information.

Identifier	Return Reference	Explanation
Procedure for Monitoring Grants in the U S	Part I, Line 2	Schedule I, Part I, Line 2 AS A RECIPIENT OF FEDERAL FUNDS, WFI IS REQUIRED TO HAVE A MONITORING PLAN IN PLACE IN ACCORDANCE WITH OMB CIRCULARS AND GRANT TERMS AND CONDITIONS THIS PLAN IS REVIEWED BY THE GRANTING AGENCY WORKFORCE FLORIDA MONITORS ITS GRANTS TO ENSURE THAT SUCH GRANTS ARE USED FOR PROPER PURPOSES AND ARE NOT OTHERWISE DIVERTED FROM THE INTENDED USE THIS IS ACCOMPLISHED USING A MIX OF SEVERAL DIFFERENT MONITORING TOOLS INCLUDING PERIODIC REPORTS, SITE VISITS TO SELECTED GRANTEES, AND ADHERENCE TO THE POLICIES AND PROCEDURES OUTLINED IN OUR MONITORING PLAN WHICH IS UPDATED ANNUALLY AND INCLUDES IN-HOUSE MONITORING DESK REVIEW ACTIVITIES

**Software ID:**  
**Software Version:**  
**EIN:** 59-3659026  
**Name:** WORKFORCE FLORIDA INC

**Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States**

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AAA Auto Club south			88,285				To assist in helping Florida's Business Employment climate
Access Mediquip Inc			53,884				To assist in helping Florida's Business Employment climate
ALDI FLORIDA LLC			8,138				To assist in helping Florida's Business Employment climate
APPRIVER LLC			33,359				To assist in helping Florida's Business Employment climate
BAUGH SOUTHEAST			32,346				To assist in helping Florida's Business Employment climate
BECTON DICKINSON			12,747				To assist in helping Florida's Business Employment climate
BELCAN ENGINEERING GROUP INC			17,061				To assist in helping Florida's Business Employment climate
BELL SOUTH ADVERTISING			16,748				To assist in helping Florida's Business Employment climate
BIODERM INC			9,306				To assist in helping Florida's Business Employment climate
BRAZIL JACKSONVILLE ALLIANCE			15,750				To assist in helping Florida's Business Employment climate

**Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC Code section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
Bridgestone Firestone North American Tire LLC			9,712				To assist in helping Florida's Business Employment climate
Brinkmann Instruments INC			7,214				To assist in helping Florida's Business Employment climate
Cbeyond Communications LLC			10,815				To assist in helping Florida's Business Employment climate
CCE Enterprises			13,335				To assist in helping Florida's Business Employment climate
Choctawhatchee Electric Company			12,171				To assist in helping Florida's Business Employment climate
Coca Cola North America			19,945				To assist in helping Florida's Business Employment climate
COLORADO BOXED BEEF COMPANY			41,198				To assist in helping Florida's Business Employment climate
D2E TECHNOLOGIES INC			43,054				To assist in helping Florida's Business Employment climate
DEUTSCHE BANK			109,597				To assist in helping Florida's Business Employment climate
EAN SERVICES LLC			45,085				To assist in helping Florida's Business Employment climate

**Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States**

<b>(a) Name and address of organization or government</b>	<b>(b) EIN</b>	<b>(c) IRC Code section if applicable</b>	<b>(d) Amount of cash grant</b>	<b>(e) Amount of non-cash assistance</b>	<b>(f) Method of valuation (book, FMV, appraisal, other)</b>	<b>(g) Description of non-cash assistance</b>	<b>(h) Purpose of grant or assistance</b>
EFI FOR PARTNER COMPANIES		501(c)(3)	228,038				To assist in helping Florida's Business Employment climate
FAMILY DOLLAR			34,440				To assist in helping Florida's Business Employment climate
FERGUSON ENTERPRISES INC			121,511				To assist in helping Florida's Business Employment climate
FLORIDA CROWN WORKFORCE BOARD		501(c)(3)	112,948				To assist in helping Florida's Business Employment climate
GENERAL DYNAMICS			88,769				To assist in helping Florida's Business Employment climate
HEARTLAND WORKFORCE		501(c)(3)	107,094				To assist in helping Florida's Business Employment climate
HOERBIGER CORPORATION			193,806				To assist in helping Florida's Business Employment climate
JABIL			141,656				To assist in helping Florida's Business Employment climate
JACKSONVILLE ELECTRIC AUTHORITY			63,945				To assist in helping Florida's Business Employment climate
KEYMARK CORPORATION OF FLORIDA			25,515				To assist in helping Florida's Business Employment climate

**Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC Code section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
LIBERATOR MEDICAL SUPPLY INC			101,854				To assist in helping Florida's Business Employment climate
LIBERTY MEDICAL SUPPLY INC			676,558				To assist in helping Florida's Business Employment climate
LOCKHEED MARTIN CORPORATION			444,764				To assist in helping Florida's Business Employment climate
MARKET TECHNOLOGIES			8,400				To assist in helping Florida's Business Employment climate
MERIDIAN TECHNOLOGIES INC			10,332				To assist in helping Florida's Business Employment climate
MORRIS AND LEE INC			41,549				To assist in helping Florida's Business Employment climate
NATIONAL ELECTRICAL CONTRACTORS ASSN		501(c)(6)	148,396				To assist in helping Florida's Business Employment climate
NORTH FLORIDA WDB		501(c)(3)	11,830				To assist in helping Florida's Business Employment climate
NORTHWEST FLORIDA BUSINESS DEVELOPMENT COUNCIL DBA OPPORTUNITY FLORIDA		501(c)(6)	59,220				To assist in helping Florida's Business Employment climate
OXFORD MANAGEMENT SERVICES			153,715				To assist in helping Florida's Business Employment climate

**Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States**

<b>(a) Name and address of organization or government</b>	<b>(b) EIN</b>	<b>(c) IRC Code section if applicable</b>	<b>(d) Amount of cash grant</b>	<b>(e) Amount of non-cash assistance</b>	<b>(f) Method of valuation (book, FMV, appraisal, other)</b>	<b>(g) Description of non-cash assistance</b>	<b>(h) Purpose of grant or assistance</b>
PALM COAST DATA			169,777				To assist in helping Florida's Business Employment climate
PEMCO WORLD AIR SERVICES			6,270				To assist in helping Florida's Business Employment climate
PINNACLE AN AMERICAN MANAGEMENT SERVICES COMPANY			26,003				To assist in helping Florida's Business Employment climate
POWER DESIGN INC			101,598				To assist in helping Florida's Business Employment climate
PROGRESS ENERGY INC			21,819				To assist in helping Florida's Business Employment climate
SPARTON			56,248				To assist in helping Florida's Business Employment climate
TATA BUSINESS SUPPORT SERVICES UNLIMITED INC			28,561				To assist in helping Florida's Business Employment climate
THE LAUNCH PAD			5,441				To assist in helping Florida's Business Employment climate
TMS HEALTH			8,530				To assist in helping Florida's Business Employment climate
VEETHREE ELECTRONICS & MARINE LLC			12,994				To assist in helping Florida's Business Employment climate

**Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC Code section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
WEBSITE PROS INC			48,823				To assist in helping Florida's Business Employment climate
WELLDYNERX			22,911				To assist in helping Florida's Business Employment climate
XHALE INNOVATIONS INC			7,575				To assist in helping Florida's Business Employment climate
ZACHRY INDUSTRIAL			43,721				To assist in helping Florida's Business Employment climate
ABB Concise Optical Group			27,650				To assist in helping Florida's Business Employment climate
Actron Entities			5,910				To assist in helping Florida's Business Employment climate
Actsoft Inc			27,500				To assist in helping Florida's Business Employment climate
Advanced C4 Solutions			20,532				To assist in helping Florida's Business Employment climate
Advanced Electrical Solutions			7,375				To assist in helping Florida's Business Employment climate
Advanced Payroll Solutions			6,000				To assist in helping Florida's Business Employment climate

**Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States**

<b>(a) Name and address of organization or government</b>	<b>(b) EIN</b>	<b>(c) IRC Code section if applicable</b>	<b>(d) Amount of cash grant</b>	<b>(e) Amount of non-cash assistance</b>	<b>(f) Method of valuation (book, FMV, appraisal, other)</b>	<b>(g) Description of non-cash assistance</b>	<b>(h) Purpose of grant or assistance</b>
Advanced Technologies Group			5,946				To assist in helping Florida's Business Employment climate
Aero Industries			8,999				To assist in helping Florida's Business Employment climate
Aerosonic Corp			5,850				To assist in helping Florida's Business Employment climate
Air Technology Engines			16,613				To assist in helping Florida's Business Employment climate
Airpro Corp of America			7,875				To assist in helping Florida's Business Employment climate
Allcases			9,375				To assist in helping Florida's Business Employment climate
Aluminum Distributing			9,563				To assist in helping Florida's Business Employment climate
Answers Systems			22,779				To assist in helping Florida's Business Employment climate
Architectural Finish Systems			6,750				To assist in helping Florida's Business Employment climate
Armstrong World			19,167				To assist in helping Florida's Business Employment climate

**Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC Code section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
Basewest Inc			11,588				To assist in helping Florida's Business Employment climate
Bausch & Lomb Inc			12,421				To assist in helping Florida's Business Employment climate
Bealls Inc			46,252				To assist in helping Florida's Business Employment climate
BRPH Architects			39,011				To assist in helping Florida's Business Employment climate
AERO TECHNICAL COMPONENTS			5,175				To assist in helping Florida's Business Employment climate
ALLIANT TECH SYSTEMS			27,675				To assist in helping Florida's Business Employment climate
ANDERSON COLUMBIA			9,000				To assist in helping Florida's Business Employment climate
ARRAY CONNECTOR CORP			28,988				To assist in helping Florida's Business Employment climate
BIC GRAPHIC			25,000				To assist in helping Florida's Business Employment climate
BOBCAD-CAM INC			8,223				To assist in helping Florida's Business Employment climate

**Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC Code section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
BRYANT'S PRECISION			10,125				To assist in helping Florida's Business Employment climate
BTI			6,375				To assist in helping Florida's Business Employment climate
BUCKEYE FLORIDA CORP			25,635				To assist in helping Florida's Business Employment climate
CARDIO COMMAND			6,588				To assist in helping Florida's Business Employment climate
CEE JAY'S GROUP HOME			37,480				To assist in helping Florida's Business Employment climate
CGI WINDOWS			11,063				To assist in helping Florida's Business Employment climate
COASTAL PLYWOOD			13,960				To assist in helping Florida's Business Employment climate
COMMAND MEDICAL PRODUCTS			17,010				To assist in helping Florida's Business Employment climate
COMMERCIAL CASEWORK			5,532				To assist in helping Florida's Business Employment climate
COMMERCIAL REFRIGERATOR			18,604				To assist in helping Florida's Business Employment climate

**Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC Code section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
COMPRO COMPUTER SERVICES			10,000				To assist in helping Florida's Business Employment climate
CONNECTICUT GENERAL			17,696				To assist in helping Florida's Business Employment climate
COSMETIC SOLUTIONS			22,793				To assist in helping Florida's Business Employment climate
CREATIVE MAILBOX DESIGNS			9,063				To assist in helping Florida's Business Employment climate
CROSS MATCH TECHNOLOGIES			9,612				To assist in helping Florida's Business Employment climate
DELTA METAL FINISHING			9,750				To assist in helping Florida's Business Employment climate
DME CORPORATION			5,307				To assist in helping Florida's Business Employment climate
DRUMMOND PRESS			7,960				To assist in helping Florida's Business Employment climate
DYNAMIC ENGINEERING			5,175				To assist in helping Florida's Business Employment climate
EEI MANUFACTURING SERVICES			22,411				To assist in helping Florida's Business Employment climate

**Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC Code section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
ENDO-THERAPEUTICS			12,583				To assist in helping Florida's Business Employment climate
ENVIRONMENTAL SERVICES			6,338				To assist in helping Florida's Business Employment climate
E-ONE			13,074				To assist in helping Florida's Business Employment climate
FAIRPOINT COMMUNICATIONS			20,444				To assist in helping Florida's Business Employment climate
FAY TOOL & DIE INC			6,900				To assist in helping Florida's Business Employment climate
FI-DE MACHINE INC			5,438				To assist in helping Florida's Business Employment climate
FIRST COAST SUZUKI			5,531				To assist in helping Florida's Business Employment climate
FIRST ST BANK OF FL KEYS			7,196				To assist in helping Florida's Business Employment climate
FP TOOLS INC			5,175				To assist in helping Florida's Business Employment climate
FRIATEC NA LLC			10,500				To assist in helping Florida's Business Employment climate

**Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC Code section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
FRITO-LAY			22,443				To assist in helping Florida's Business Employment climate
GE GENERATORS			4,046				To assist in helping Florida's Business Employment climate
GENERAL DYNAMICS-ORLANDO			23,250				To assist in helping Florida's Business Employment climate
GEOGRAPHIC SOLUTIONS INC			8,331				To assist in helping Florida's Business Employment climate
GILBERT MEDICAL TRANSCRIPTION			7,375				To assist in helping Florida's Business Employment climate
GT TECHNOLOGIES I INC			33,810				To assist in helping Florida's Business Employment climate
HARVEY COVINGTON & THOMAS LLC			11,063				To assist in helping Florida's Business Employment climate
HEICO PARTS GROUP			30,386				To assist in helping Florida's Business Employment climate
HILLUSA CORP			6,000				To assist in helping Florida's Business Employment climate
HOLLANDER HOME FASHIONS			6,800				To assist in helping Florida's Business Employment climate

**Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States**

<b>(a) Name and address of organization or government</b>	<b>(b) EIN</b>	<b>(c) IRC Code section if applicable</b>	<b>(d) Amount of cash grant</b>	<b>(e) Amount of non-cash assistance</b>	<b>(f) Method of valuation (book, FMV, appraisal, other)</b>	<b>(g) Description of non-cash assistance</b>	<b>(h) Purpose of grant or assistance</b>
HOLLYWOOD WOODWORK INC			11,650				To assist in helping Florida's Business Employment climate
INSTRUMENT TRANSFORMERS INC			6,370				To assist in helping Florida's Business Employment climate
INTERMODAL SUPPORT SERVICES			11,063				To assist in helping Florida's Business Employment climate
INTERPLEX SUNBELT INC			37,700				To assist in helping Florida's Business Employment climate
INT'L MARITIME ASSOC			8,201				To assist in helping Florida's Business Employment climate
ION LABS INC			41,321				To assist in helping Florida's Business Employment climate
JENOPTIK OPTICAL SYSTEMS			18,500				To assist in helping Florida's Business Employment climate
JIMERICO CONSTRUCTION			11,063				To assist in helping Florida's Business Employment climate
KNIGHT ENTERPRISES LLC			11,104				To assist in helping Florida's Business Employment climate
LAKE CITY CC CONSORTIUM			63,615				To assist in helping Florida's Business Employment climate

**Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States**

<b>(a) Name and address of organization or government</b>	<b>(b) EIN</b>	<b>(c) IRC Code section if applicable</b>	<b>(d) Amount of cash grant</b>	<b>(e) Amount of non-cash assistance</b>	<b>(f) Method of valuation (book, FMV, appraisal, other)</b>	<b>(g) Description of non-cash assistance</b>	<b>(h) Purpose of grant or assistance</b>
LANIER UPSHAW INC			21,542				To assist in helping Florida's Business Employment climate
LIFESAVINGS SYSTEMS			5,250				To assist in helping Florida's Business Employment climate
MZ MACHINE INC			10,179				To assist in helping Florida's Business Employment climate
MANUFACTURING INC			9,895				To assist in helping Florida's Business Employment climate
MARINE CONCEPTS			9,000				To assist in helping Florida's Business Employment climate
MATRIX COMPOSITES INC			5,000				To assist in helping Florida's Business Employment climate
MAVERICK CONSTRUCTORS LLC			7,375				To assist in helping Florida's Business Employment climate
MAXIFORCE INC			9,857				To assist in helping Florida's Business Employment climate
MEDICAL EXPRESS CORP			11,063				To assist in helping Florida's Business Employment climate
MICROMO ELECTRONICS INC			5,935				To assist in helping Florida's Business Employment climate

**Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States**

<b>(a) Name and address of organization or government</b>	<b>(b) EIN</b>	<b>(c) IRC Code section if applicable</b>	<b>(d) Amount of cash grant</b>	<b>(e) Amount of non-cash assistance</b>	<b>(f) Method of valuation (book, FMV, appraisal, other)</b>	<b>(g) Description of non-cash assistance</b>	<b>(h) Purpose of grant or assistance</b>
MICRORAM ELECTRONICS			25,706				To assist in helping Florida's Business Employment climate
MP MFG & DESIGN			12,677				To assist in helping Florida's Business Employment climate
NATIONAL SAFE			6,338				To assist in helping Florida's Business Employment climate
NORTH FLORIDA BLDG & CONSTRUCTION			7,388				To assist in helping Florida's Business Employment climate
OCEAN DESIGN INC			44,400				To assist in helping Florida's Business Employment climate
OFFICE DEPOT			26,153				To assist in helping Florida's Business Employment climate
ONE SOURCE ROOFING			11,063				To assist in helping Florida's Business Employment climate
PELICAN WIRE CO			5,550				To assist in helping Florida's Business Employment climate
R&D CONCEPTS INC			7,313				To assist in helping Florida's Business Employment climate
RADIATION SHIELD			13,875				To assist in helping Florida's Business Employment climate

**Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States**

<b>(a) Name and address of organization or government</b>	<b>(b) EIN</b>	<b>(c) IRC Code section if applicable</b>	<b>(d) Amount of cash grant</b>	<b>(e) Amount of non-cash assistance</b>	<b>(f) Method of valuation (book, FMV, appraisal, other)</b>	<b>(g) Description of non-cash assistance</b>	<b>(h) Purpose of grant or assistance</b>
RAINBOW TRANSMISSION			10,031				To assist in helping Florida's Business Employment climate
REAL-TIME LABORATORIES LLC			8,141				To assist in helping Florida's Business Employment climate
Rollins-PCI Construction			11,063				To assist in helping Florida's Business Employment climate
Rosey Electronic Products			13,500				To assist in helping Florida's Business Employment climate
RS Design			7,870				To assist in helping Florida's Business Employment climate
SCC Soft Computer			36,642				To assist in helping Florida's Business Employment climate
Scents of Nature			30,389				To assist in helping Florida's Business Employment climate
Schneller LLC			7,070				To assist in helping Florida's Business Employment climate
Sea Sub Systems Inc			10,381				To assist in helping Florida's Business Employment climate
Skyway Builders			10,514				To assist in helping Florida's Business Employment climate

**Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States**

<b>(a) Name and address of organization or government</b>	<b>(b) EIN</b>	<b>(c) IRC Code section if applicable</b>	<b>(d) Amount of cash grant</b>	<b>(e) Amount of non-cash assistance</b>	<b>(f) Method of valuation (book, FMV, appraisal, other)</b>	<b>(g) Description of non-cash assistance</b>	<b>(h) Purpose of grant or assistance</b>
SMI Systems			6,338				To assist in helping Florida's Business Employment climate
Smurfit-Stone Container			22,283				To assist in helping Florida's Business Employment climate
Southern Gear Inc			28,350				To assist in helping Florida's Business Employment climate
Space Machine			9,375				To assist in helping Florida's Business Employment climate
SPIN Magnetics			8,625				To assist in helping Florida's Business Employment climate
Structural Composites			9,679				To assist in helping Florida's Business Employment climate
Sun Hydraulics Corp			25,800				To assist in helping Florida's Business Employment climate
Tampa Bay Steel			5,625				To assist in helping Florida's Business Employment climate
Techno-Coatings			30,846				To assist in helping Florida's Business Employment climate
Technology Research			17,841				To assist in helping Florida's Business Employment climate

**Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC Code section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
Thermal concepts			7,375				To assist in helping Florida's Business Employment climate
thermal WIRE & CABLE			6,750				To assist in helping Florida's Business Employment climate
TRIPLE PLAY COMMUNICATIONS			7,031				To assist in helping Florida's Business Employment climate
TROPICANA MFG COMPANY			49,723				To assist in helping Florida's Business Employment climate
TRYCOM COMPONENTS			10,500				To assist in helping Florida's Business Employment climate
US SAFETY CONSORTIUM			154,130				To assist in helping Florida's Business Employment climate
ULTIMATE HAIR			21,075				To assist in helping Florida's Business Employment climate
UNIV N FL CONSORTIUM			5,500				To assist in helping Florida's Business Employment climate
VECTORWORKS MARINE			8,414				To assist in helping Florida's Business Employment climate
VENATORE LLC			7,587				To assist in helping Florida's Business Employment climate

**Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC Code section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
VENTEL PLASTICS CORP			9,000				To assist in helping Florida's Business Employment climate
VULCAN Machine INC			44,282				To assist in helping Florida's Business Employment climate
WG PITTS CO			11,063				To assist in helping Florida's Business Employment climate
WAFER WORLD			9,825				To assist in helping Florida's Business Employment climate
WEST PHARMACEUTICAL SERVICE			23,150				To assist in helping Florida's Business Employment climate
WIREMASTERS ELECTRIC			6,090				To assist in helping Florida's Business Employment climate

**Schedule J**  
(Form 990)**Compensation Information**

OMB No 1545-0047

**2009****Open to Public  
Inspection**Department of the Treasury  
Internal Revenue Service

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees  
**► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.**  
**► Attach to Form 990. ► See separate instructions.**

**Name of the organization**  
WORKFORCE FLORIDA INC**Employer identification number**  
59-3659026**Part I Questions Regarding Compensation**

**1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items

<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use
<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence
<input type="checkbox"/> Tax indemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees
<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)

**b** If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain

**2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?

**3** Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply

<input type="checkbox"/> Compensation committee	<input checked="" type="checkbox"/> Written employment contract
<input checked="" type="checkbox"/> Independent compensation consultant	<input type="checkbox"/> Compensation survey or study
<input type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee

**4** During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization

**a** Receive a severance payment or change-of-control payment?

**b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?

**c** Participate in, or receive payment from, an equity-based compensation arrangement?

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III

**Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.**

**5** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of

**a** The organization?

**b** Any related organization?

If "Yes," to line 5a or 5b, describe in Part III

**6** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of

**a** The organization?

**b** Any related organization?

If "Yes," to line 6a or 6b, describe in Part III

**7** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III

**8** Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III

**9** If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
<b>1b</b>		
<b>2</b>		
<b>4a</b>		No
<b>4b</b>		No
<b>4c</b>		No
<b>5a</b>		No
<b>5b</b>		No
<b>6a</b>		No
<b>6b</b>		No
<b>7</b>		No
<b>8</b>		No
<b>9</b>		

**Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use Schedule J-1 if additional space needed.

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

**Note.** The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

**Part III Supplemental Information**

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information

Identifier	Return Reference	Explanation

**SCHEDULE O**  
(Form 990)**Supplemental Information to Form 990****2009****Open to Public  
Inspection**

**Complete to provide information for responses to specific questions on  
Form 990 or to provide any additional information.  
► Attach to Form 990.**

**Name of the organization**  
WORKFORCE FLORIDA INC**Employer identification number**

59-3659026

Identifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 11		THE PHYSICAL FORM 990 WAS NOT REVIEWED BY THE GOVERNING BODY, BUT THE AUDIT REPORT AS COMPILED BY THE AUDIT FIRM WAS PRESENTED BY THE CONTRACTED AUDIT FIRM TO THE FINANCE AND ADMINISTRATION COUNCIL FOR ACCEPTANCE, AND FURTHER PRESENTED TO THE FULL BOARD FOR APPROVAL BY THE FINANCE AND ADMINISTRATION COUNCIL. THE BOARD'S DESIGNATED TREASURER AND CHIEF FINANCIAL OFFICER THEN COORDINATED THE PREPARATION OF THE 990 BASED UPON THE AUDITED FINANCIAL REPORT

Identifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 12c		BOARD STAFF WHO ADMINISTER THE AWARDING OF GRANT OR CONTRACT FUNDS MUST IDENTIFY ANY POTENTIAL CONFLICT OF INTEREST WITH ANY BOARD MEMBER PRIOR TO THE ISSUANCE OF ANY AWARD IF IT IS DETERMINED THAT THERE MAY BE ANY POTENTIAL CONFLICT WITH A BOARD MEMBER, THE PRESIDENT AND GENERAL COUNSEL ARE ADVISED AND THEIR ASSISTANCE IS SOUGHT TO INSURE APPROPRIATE DISCLOSURE BEFORE THE FULL BOARD TAKES ANY ACTION UNDER THE CURRENT POLICY, ANY BOARD MEMBER THAT HAS A CONFLICT OF INTEREST IS NOT ALLOWED TO VOTE ON ANY ACTION THAT WOULD BENEFIT THEM OR THEIR ORGANIZATIONS

Identifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 15		THE CEO SELECTION PROCESS AND SALARY OFFER WAS COORDINATED BY AN INDEPENDENT FIRM CONTRACTED BY WFI (HR EXPERTISE) WHO REPORTED DIRECTLY TO THE BOARD CHAIR AND THE SELECTION COMMITTEE. IN THIS PROCESS, COMPARABLE DATA WAS BROUGHT FORWARD AND DISCLOSED PRIOR TO THE ESTABLISHMENT OF A SALARY. THE SELECTION PROCESS WAS OPEN TO THE PUBLIC AND SEVERAL INDIVIDUALS DID ATTEND THE SELECTION OF OTHER KEY MEMBERS OF THE ORGANIZATION. KEY POSITIONS ARE ADVERTIZED IN SEVERAL VENUES, INCLUDING EMPLOYFLORIDA.COM, NEWSPAPERS, AND POSTED ON THE WFI INTERNET AND INTRANET. THE DETERMINATION OF SALARY LEVELS IS BASED UPON THE RESPONSIBILITIES ASSIGNED TO SUCH INDIVIDUALS AND UPON THE REVIEW AND ANALYSIS OF COMPARABLE SALARIES OFFERED BY OTHER SIMILAR ORGANIZATIONS AND WORKFORCE PARTNER ORGANIZATIONS.

Identifier	Return Reference	Explanation
Form 990, Part VI, Section C, line 18		FLORIDA STATUTES WHICH CREATED WORKFORCE FLORIDA REQUIRES THAT WE OPERATE IN COMPLIANCE WITH CHAPTER 119 FLORIDA STATUTES RELATING TO PUBLIC RECORDS AND CHAPTER 286 RELATING TO PUBLIC MEETINGS CONSEQUENTLY, ANY RECORDS OF THE ORGANIZATION ARE PUBLIC RECORDS AND MAY BE REQUESTED BY THE PUBLIC LIKEWISE, ALL MEETINGS OF THE BOARD, COUNCILS, COMMITTEES AND OTHER IDENTIFIED BOARD MEETINGS ARE OPEN TO THE PUBLIC FORMAL MINUTES ARE TAKEN FOR ALL MEETINGS OF THE BOARD AND THE EXECUTIVE COMMITTEE

Identifier	Return Reference	Explanation
Form 990, Part VI, Section C, line 19		FLORIDA STATUTES WHICH CREATED WORKFORCE FLORIDA REQUIRES THAT WE OPERATE IN COMPLIANCE WITH CHAPTER 119 FLORIDA STATUTES RELATING TO PUBLIC RECORDS AND CHAPTER 286 RELATING TO PUBLIC MEETINGS CONSEQUENTLY, ANY RECORDS OF THE ORGANIZATION ARE PUBLIC RECORDS AND MAY BE REQUESTED BY THE PUBLIC LIKEWISE, ALL MEETINGS OF THE BOARD, COUNCILS, COMMITTEES AND OTHER IDENTIFIED BOARD MEETINGS ARE OPEN TO THE PUBLIC FORMAL MINUTES ARE TAKEN FOR ALL MEETINGS OF THE BOARD AND THE EXECUTIVE COMMITTEE

Identifier	Return Reference	Explanation
Form 990, part xi, line 2c		The organization's finance and administration council is responsible for oversight of the audit and selection of the independent accountant



**Additional Data**

**Software ID:**  
**Software Version:**  
**EIN:** 59-3659026  
**Name:** WORKFORCE FLORIDA INC

**Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)					(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	Official	Key employee	Highest compensated employee			
CHARLIE CRIST BOARD MEMBER	1 00	X					0	0	0
BELINDA KEISER BOARD MEMBER	1 00	X					0	0	0
J DAVID ARMSTRONG JR BOARD MEMBER	1 00	X					0	0	0
JAMES BAIARDI BOARD MEMBER	1 00	X					0	0	0
DANIEL BALDWIN BOARD MEMBER	1 00	X					0	0	0
DOUGLAS BEACH BOARD MEMBER	1 00	X					0	0	0
ROBERT BECK BOARD MEMBER	1 00	X					0	0	0
RANDOLPH BERRIDGE BOARD MEMBER	1 00	X					0	0	0
MARY LOU BRUNELL BOARD MEMBER	1 00	X					0	0	0
KATHRYN COWLING BOARD MEMBER	1 00	X					0	0	0
JAMES DEBEAUGRINE BOARD MEMBER	1 00	X					0	0	0
MIKE FASANO BOARD MEMBER	1 00	X					0	0	0
MIGUEL FUENTES BOARD MEMBER	1 00	X					0	0	0
G SCOTT GOYER BOARD MEMBER	1 00	X					0	0	0
JENNIFER GROVE BOARD MEMBER	1 00	X					0	0	0
BENEDICT GRZESIK BOARD MEMBER	1 00	X					0	0	0
DON GUGLIUZZA BOARD MEMBER	1 00	X					0	0	0
GEORGE HAUER BOARD MEMBER	1 00	X					0	0	0
DWAYNE INGRAM BOARD MEMBER	1 00	X					0	0	0
LESLIE CAGLE INGRAM BOARD MEMBER	1 00	X					0	0	0
LILA JABER BOARD MEMBER	1 00	X					0	0	0
EVERETT KELLY BOARD MEMBER	1 00	X					0	0	0
ERIC KENNEDY BOARD MEMBER	1 00	X					0	0	0
CYNTHIA LORENZO BOARD MEMBER	1 00	X					0	0	0
TIMOTHY LYONS BOARD MEMBER	1 00	X					0	0	0

**Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)					(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			
LUMON MAY BOARD MEMBER	1 00	X					0	0	0
W ALEXANDER MOSELEY BOARD MEMBER	1 00	X					0	0	0
MARLENE O'TOOLE BOARD MEMBER	1 00	X					0	0	0
TOM PELHAM BOARD MEMBER	1 00	X					0	0	0
FRANK PETERMAN JR BOARD MEMBER	1 00	X					0	0	0
ANDRE PEREZ BOARD MEMBER	1 00	X					0	0	0
STEVE PRECOURT BOARD MEMBER	1 00	X					0	0	0
HILDA QUINTERO BOARD MEMBER	1 00	X					0	0	0
ERIC W ROBINSON BOARD MEMBER	1 00	X					0	0	0
JAY ROSARIO BOARD MEMBER	1 00	X					0	0	0
MARK SHARPE BOARD MEMBER	1 00	X					0	0	0
GEORGE SHELDON BOARD MEMBER	1 00	X					0	0	0
ERIC J SMITH BOARD MEMBER	1 00	X					0	0	0
LINDA SPARKS BOARD MEMBER	1 00	X					0	0	0
MICHAEL STEPHENSON BOARD MEMBER	1 00	X					0	0	0
SHAYNE STEWART BOARD MEMBER	1 00	X					0	0	0
ALFREDO STIMAC BOARD MEMBER	1 00	X					0	0	0
SAMUEL STREIT BOARD MEMBER	1 00	X					0	0	0
DANIEL SUAREZ BOARD MEMBER	1 00	X					0	0	0
MARK WILSON BOARD MEMBER	1 00	X					0	0	0
STEPHEN R WISE BOARD MEMBER	1 00	X					0	0	0
CHRIS HART PRESIDENT/CEO	40 00		X				196,393	0	38,425
LARRY CHAMPION EXECUTIVE VP OF OPERATIONS	40 00		X				120,304	0	19,316
Jay Barber General Counsel	40 00			X			101,019	0	12,646
Andra Cornelius VP for Business Outreach	40 00				X		107,627	0	24,135

**Form 990, Part IX - Statement of Functional Expenses - 24a - 24e Other Expenses**

<i><b>Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII.</b></i>	<b>(A) Total expenses</b>	<b>(B) Program service expenses</b>	<b>(C) Management and general expenses</b>	<b>(D) Fundraising expenses</b>
TELEPHONE	29,476		29,476	
PRINTING AND PUBLICATIO	10,353		10,353	
EQUIPMENT RENTAL AND MA	9,481		9,481	
POSTAGE AND SHIPPING	5,932		5,932	
MARKETING	1,395	1,395		