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# FFSP Form Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047 2010

Open to Public Inspection

	10 calendar year, or tax year beginning $07/01/10$ , and ending $06/30$			
B Check if applica	· · · · · · · · · · · · · · · · · · ·		D Emplo	yer Identification number
Address chang	Seed Producers, Inc.		4	
Name change	Doing Business As		59-	0931036
Initial return	Number and street (or P O box if mail is not delivered to street address)	Room/suite		none number
Ä	PO Box 309		850	-594-4721
Terminated	City or town, state or country, and ZIP + 4			
Amended retur	m Greenwood FL 32443	ı	<b>G</b> Gross rece	npts\$ 1,551,091
Application per	F Name and address of principal officer	H(a) Isthis a	group return for a	affiliates? Yes X No
	John Beuttenmuller		•	H. H.
	PO Box 309	H(b) Are all		
	Greenwood FL 32443		io, attach a i	st (see instructions)
I Tax-exempt				
J Website:		H(c) Group		
K Form of organ		L Year of formation	L943	M State of legal domicile F1
Part I	Summary			<del> </del>
	efly describe the organization's mission or most significant activities:			_
. 8 W	Norks with the University of Florida Institute of Fo	od and Agri	cultura.	al .
ř   S	Sciences to increase foundation seed supply.			
90 2 Che	-			
(၂) 2 Che	eck this box ▶ 🔝 if the organization discontinued its operations or disposed of more tha	n 25% of its net as	sets	
3 Nun	mber of voting members of the governing body (Part VI, line 1a)		3	_13
<u>.</u> 4 Nun	mber of independent voting members of the governing body (Part VI, line 1b)		4	13
<u>₹</u> 5 Tota	al number of ındıvıduals employed ın calendar year 2010 (Part V, line 2a)		5	16
Very Strict Stri	al number of volunteers (estimate if necessary)		6	13
7a Tota	al unrelated business revenue from Part VIII, column (C), line 12		7a	
b Net	unrelated business taxable income from Form 990-T, line 34		7b	(
Į.		Prior Ye	ear	Current Year
g 8 Con	ntributions and grants (Part VIII, line 1h)		7.756	2,025
[ 9 Pro	gram service revenue (Part VIII, line 2g)		7,156	489,616
ا تم ہ	estment income (Part VIII, column (A), lines 3, 4, and 7d)		3,378	26,865
	er revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		1,186	530,007
	al revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,720	1,048,513
	ints and similar amounts paid (Part IX, column (A), lines 1–3)	23	3,203	123,602
	nefits paid to or for members (Partlix, column (A), line21)12			400 400
ဖွ   15 Sala	aries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	39	2,926	488,439
	fessional fundraising fees (Part IX, column (A), line 11e),			
	al fundraising expenses (Part IX column (D), line.25) ▶ U			
17 Oth	er expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		0,999	313,866
	al expenses Add lines 13–17 (must equal Part IX, column (A), line 25)		7,128	925,907
19 Rev	venue less expenses. Subtract line 18 from line 12		4,592	122,606
20 Tota	of second (Book V. Inc. 40)	Beginning of Cu		End of Year
20 lota	al assets (Part X, line 16)		9,134	6,247,414
	al liabilities (Part X, line 26)		9,194	2,484,868
	assets or fund balances Subtract line 21 from line 20	3,03	9,940	3,762,546
Part II	Signature Block	·		
	es of perjury, I declare that I have examined this return, including accompanying schedules and statement		of my knowled	ige and belief, it is
true, correct, a	and complete Auctoration of preparer (other tran officer) is based on all information of which preparer	nas any knowledge		2 2010
	Mall Sullette		720	<u> 2002 3 2012 </u>
Sign	Senature of officer		Date	•
Here		<u>cutive Di</u>	rector	<u> </u>
	Type or print name and title	<del></del>		
	nnt/Type preparer's name Preparer's signature	Date	Check	L_J
<u> </u>	cephen H. Kattell, CPA	02/03	3/12 self-er	nployed
	mm's name > Kattell & Company / P.L.		Firm's EIN	
	808B NW 16th Ave			
Use Only		ı		
, i	im's address > Gainesville, FL 32601		Phone no	<del> </del>
May the IRS d			Phone no	X Yes N

4e Total program service expenses ▶

(Expenses \$

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

including grants of \$

) (Revenue \$

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1		_X_
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		_X_
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III	5	x	ı
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	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
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	9	х	
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	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
_	complete Schedule D, Part VI	11a	х	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more	***		
-	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
c				
_	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
_	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	x	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a	x	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if			
-	the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
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, Parts I and IV	14b	X	
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 United States? If "Yes," complete Schedule F, Parts II and IV	15		X
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 United States? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on		-	
. •	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		х
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	19		х
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? <b>Note</b> . Some		-	_ <u></u>
-	Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		
	similar and operation on or more marginals must attack attack and mandal statements (see insulations)		000	——

Part IV Checklist of Required Schedules (continued)

					Yes	No
21	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		Ļ	21	X	
22	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		1	22		<u> </u>
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the		1			
	organization's current and former officers, directors, trustees, key employees, and highest compensated					
	employees? If "Yes," complete Schedule J		.	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than					
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b					
_	through 24d and complete Schedule K If "No," go to line 25		}	24a		<u> </u>
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary penod exception?		F	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year		ļ			
	to defease any tax-exempt bonds?		ŀ	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		ŀ	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			05-		
_	with a disqualified person during the year? If "Yes," complete Schedule L, Part I		. }	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior		Ì			
	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			25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or		ŀ	236		
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II			26		x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,		ŀ			
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?					
	If "Yes," complete Schedule L, Part III			27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,		Ī			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions).					
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	•		28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	•	ſ			
	Schedule L, Part IV			28b		X
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)					
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV		Ļ	28c		_X_
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		ļ	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			-		
	conservation contributions? If "Yes," complete Schedule M			30		_X_
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,		ł			
	Part I		ļ	31		<u> </u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"		l			
	complete Schedule N, Part II	•	ļ	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations					v
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I		ŀ	33	-	X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,					v
25	IV, and V, line 1		ŀ	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?		ŀ	35		
а	Did the organization receive any payment from or engage in any transaction with a					
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	Yes	X No			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	162	A NO			
	related organization? If "Yes," complete Schedule R, Part V, line 2			36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	•	·			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,					
	Part VI			37		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and		· Ì			
	19? Note. All Form 990 filers are required to complete Schedule O			38	X	
					990	

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part \	/				
					Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- If not applicable	1a	66			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and					
	reportable gaming (gambling) winnings to prize winners?			1c		X
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax					
	Statements, filed for the calendar year ending with or within the year covered by this return	2a	16			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retuined	ms?		2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction	s)				
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		•	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b		
4a	At any time duning the calendar year, did the organization have an interest in, or a signature or other	authon	ty			
	over, a financial account in a foreign country (such as a bank account, secunties account, or other fir	nancial				
	account)?			4a		X
b	If "Yes," enter the name of the foreign country					
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial	Accou	nts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	ction?		5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c	<b></b> -	<u> </u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	ne				<b>.</b>
	organization solicit any contributions that were not tax deductible?			6a	-	X
þ	If "Yes," did the organization include with every solicitation an express statement that such contribution	ons or		C.L		
7	gifts were not tax deductible?			. <u>6b</u>		
7	Organizations that may receive deductible contributions under section 170(c).	aaada				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for and services provided to the payor?	goods		7a	ŧ	l
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	26		7.5		
·	required to file Form 8282?	23		7c	<u> </u>	
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
6	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of		?	7e	Ī	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contr		•	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo		99 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization			7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting					
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring					
	organization, have excess business holdings at any time during the year?			8		
9	Sponsoring organizations maintaining donor advised funds.		·			
а	Did the organization make any taxable distributions under section 4966?			9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations. Enter:		•			
а	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter:		•			
а	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources					1
	against amounts due or received from them.)	11b			ŧ	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1 1	•	12a		<u> </u>
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				<b></b>	<b> </b>
а	Is the organization licensed to issue qualified health plans in more than one state?	•		13a	-	ļ
	Note. See the instructions for additional information the organization must report on Schedule O.					
b	Enter the amount of reserves the organization is required to maintain by the states in which	1 1	1		I	
	the organization is licensed to issue qualified health plans	13b			I	
C	Enter the amount of reserves on hand	13c	<u> </u>		╄	1
14a	Did the organization receive any payments for indoor tanning services during the tax year?		••	14a	├	X
D	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedul	e U		14b		1

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

	Check if Cabadala Constains a propose to any system in this Part VI			7
	Check if Schedule O contains a response to any question in this Part VI			X
<u>sec</u>	tion A. Governing Body and Management		1 1	
			Yes	<u>No</u>
1a	Enter the number of voting members of the governing body at the end of the tax year  1a 13	-		
b	Enter the number of voting members included in line 1a, above, who are independent  1b 13	-		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			7.7
_	any other officer, director, trustee, or key employee?	2	$\vdash$	<u> </u>
3	Did the organization delegate control over management duties customanly performed by or under the direct	l _		37
	supervision of officers, directors or trustees, or key employees to a management company or other person?	3_		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	$\vdash$	X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	7.	X
6	Does the organization have members or stockholders?	6	X	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			
	of the governing body?	7a	X	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	Х	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following	ŀ		
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		<u> </u>
<u>Sec</u>	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue	Coc	<u>le.)</u>	
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		X
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?	10b		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the			
	form?	11a		X
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		X
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b		
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this is done	12c		
13	Does the organization have a written whistleblower policy?	13		Х
14	Does the organization have a written document retention and destruction policy?	14		х
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	t i	X
b	Other officers or key employees of the organization	15b		X
_	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions.)			<b>-</b>
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a	1	x
ь	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?	16b	†	
Sec	tion C. Disclosure	100		
<u>500</u> 17	······································			
17 18		• • •	•	•
.0	Section 6104 requires an organization to make its Forms 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.			
40				
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy,			
00	and financial statements available to the public.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the			
	organization: ▶ John Beuttenmuller 3913 HWY 71			
Gı	reenwood FL 32443			

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

Check if Schedule O contains a response to any question in this Part VII

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order individual trustees or directors; institutional trustees; officers, key employees, highest compensated employees; and former such persons

(A) Name and Title	(B) Average	Pos	ition (		C) k all i	that ap	ınlv)	(D) Reportable	(E) Reportable	(F) Estimated
Name and the	hours per week (describe hours for related organizations in Schedule O)	Individual trustee or director		Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
(1) John Beuttenmull							$\Box$		_	
ED/Sec/Tresurer	40.00	x	_	X		$\vdash$		69,077	0	12,421
(2) Rex Wilson										_
President	1.00	X		X	_	<del> </del>		0	0	0
(3) Pat Cockrell				•					_	
Board Member	1.00	X				$\vdash$		0	0	0
(4) Nick Comerford		l								
Board Member	1.00	X				$\vdash$	_	0	0	0
(5) Millie Ferrer-Ch	_								_	
Board Member	1.00	X	_			$\vdash$	_	. 0	0	0
(6) Mark McLellan										
Board Member	1.00	X	_			$\vdash$		0	0	0
(7) Joe West		l								
Board Member	1.00	X	_			$\sqcup$		. 0	0	0
(8) Joe Campbell										
Board Member	1.00	X				$\vdash$		0	0	0
(9) Jerry Mixon		l						_		
Vice President	1.00	X	_	X	_	$\vdash$	_	0	0	0
(10) Dan Pelt						li		_	_	•
Board Member	1.00	X				$\sqcup$		0	0	0
(11) Buddy Thomas								_		
Board Member	1.00	X		$\vdash$	_	$\vdash$	_	0	0	0
(12) Bill Johnson						1 1		_	_	•
Board Member	1.00	X	_	_		$\vdash$	_	0	0	0
(13) Allen Williford						li		_		
Board Member	1.00	X	_			$\longmapsto$	_	0	0	0
(14) Will Nugent								_	_	_
Board Member	1.00	X	<u> </u>	$\vdash$		$\vdash \vdash$	_	0	. 0	0
(15)										
(16)	·	$\Box$			<u> </u>		$\dashv$			<del> </del>

-	9 –	$\sim$	$\sim$	2	•	$\mathbf{r}$	2	-
~ '	4 _	"	•	٠.		u	•	•

P	a	a	6	1

Pa	rt VII Section A. Officers	, Directors, Trus	stees	s, Ke	y Er	nplo	yees	s, aı	nd Highest Compensated	Employees (continued)				
	(A) Name and Title	(B) Average hours per	⊢	_	chec		that a			(E)  Reportable compensation from		( <b>F</b> ) Estima amour	ited	
		week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	co o	othempens from t rganizand relaganiza	er sation the ation ated	
(17)	, ,						_		_					
(18)														
(19)														
(20)														
(21)	•	-					ļ	-						
(22)														
(23)														
(24)														
(25)	,- <u></u>													<del></del>
(26)														
(27)														
(28)												_		
	Sub-total  Total from continuation shee	ets to Part VII S	ectic	n A	•	•		<b>&gt;</b>	69,077				12,	421
	Total (add lines 1b and 1c) Total number of individuals (in					o lic	ted s	box	69,077	\$100,000 ip			12,	421
_	reportable compensation from	•			uios	ic iis	- Cu	ibov	ve) who received more than	\$100,000 H1			Voc	No.
3	Did the organization list any for employee on line 1a? If "Yes,"								oyee, or highest compensat	ted		3	Yes	No X
4	For any individual listed on line organization and related organ	e 1a, is the sum	of re	port	able	com	pens	satio				•		
5	individual Did any person listed on line 1	la receive or acc	rue d	comp	oens	atior	n fror	n ar	ny unrelated organization or		.	4		X
	for services rendered to the or ction B. Independent Contract		es,"	com	plete	e Sc	hedu	le J	for such person	•		5	<u> </u>	<u> </u>
1	Complete this table for your five compensation from the organic	ve highest comp	ensa	ted i	inde	pend	lent o	cont	tractors that received more	than \$100,000 of				
		(A) business address							Descrip	(B) tion of services		Co	(C) mpensa	tion
	· · · ·													
				•										
										-			_	
2	Total number of independent or received more than \$100,000		-						se listed above) who	0				
544		componeduor			7.7	ے، ، ، ک					<u>.</u>	F	000	(2010)

	_	(2010) FIOIIda FO		CTOIL	<del></del>	<del></del>	39-0331036		Page 9
Pai	rt V	III Statement of Reve	nue			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
इइ	1a	Federated campaigns	1a					·- ·-	
힐		Membership dues	1b		2,025				
B.E.		Fundraising events	1c	-		ł			
ar ar		Related organizations	1d				1		
S,E		Government grants (contributions)	1e						
r si		All other contributions, gifts, grants,							
	•	and similar amounts not included above	1f				1		
들음	g	Noncash contributions included in lines 1a-		\$					
오림	_	Total. Add lines 1a-1f		Ψ	· • 1	2,025			
Program Service Revenue Contributions, gifts, grants		Total. Add lines Ta 11			Busn. Code	2,023			
E E	2a	Royalties Collection	n Paa		Busii. Code	430,309	430,309		İ
<u>§</u>	b	•	n ree			44,582	44,582		
9		Land Rent			·	14,725	14,725		<del></del>
<u>S</u>	٦	nana kent			+	11,725	11,123		
Εl	٠ •							e	-
<u> </u>	f	All other program service reve	nue		1				
옵		Total. Add lines 2a-2f	nue			489,616			,1
$\neg$		Investment income (including	dıvider	ds intere					i
	•	and other similar amounts)	u.v.uu.	ido, intere	<b>.</b>	26,865			26,865
	4	Income from investment of tax	-exem	nt bond n	roceeds				20,003
	5	Royalties	CACIII	pt bond p					<del> </del>
	•	(ı) Real		(II) F	Personal				
	6a	Gross Rents		1.7					
		Less rental exps							
		Rental inc or (loss)							
	d	Net rental income or (loss)			•	Ì	Ī		1
		Gross amount from (i) Securities		(11)	Other				
		sales of assets other than inventory		```					
	ь	Less cost or other					1		
	_	basis & sales exps					1		
	С	Gain or (loss)		_					
		Net gain or (loss)			•		Ť		
		Gross income from fundraising eve	nts [						
9		(not including \$	- 1						
8		of contributions reported on line 1c)	1						
ŘΙ		See Part IV, line 18	a				1		
Other Revenu	b	Less: direct expenses	ь						
0		Net income or (loss) from fund	raising	events	<b>•</b>				
	9a	Gross income from gaming activitie	s [					-	
		See Part IV, line 19	a				I		
	b	Less direct expenses	b[				1		
	С	Net income or (loss) from gam	ing ac	tivities	<b>•</b>				
	10a	Gross sales of inventory, less	ĺ						
		returns and allowances	a	1,	032,585				
ŀ	b	Less: cost of goods sold	ь[		502,578		1		
L	С	Net income or (loss) from sale	s of inv	entory .	▶	530,007	530,007		
Ĺ		Miscellaneous Revenue	)		Busn. Code		, , , , , , ,	•	
	11a								
	b	• •							
	С								
	-								
		All other revenue			L	_			
	d	All other revenue  Total. Add lines 11a–11d			<b>•</b>	1,048,513	1,019,623		0 26,865

### 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).

	All other organizations must				
	not include amounts reported on lines 6b, 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			<u> </u>	
•	organizations in the U.S. See Part IV, line 21	123,602			
2	Grants and other assistance to individuals in	1237002	-	·····	
2	the U.S. See Part IV, line 22				
2	·				
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,	4 007			
_	trustees, and key employees	4,897			
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	256 126			<u></u>
7	Other salaries and wages	376,136			
8	Pension plan contributions (include section 401(k)	22 22 -			
	and section 403(b) employer contributions)	33,296	:		
9	Other employee benefits	51,555			
10	Payroll taxes	22,555		. =,	
11	Fees for services (non-employees)				
а	Management				
b	Legal				
C	Accounting .	19,019			
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion	3,044			
13	Office expenses	30,443			
14	Information technology				
15	Royalties				
16	Occupancy	19,144			
17	Travel			=	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	22,610			
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	40,771			
23	Insurance	41,385			
24	Other expenses Itemize expenses not covered				
	above (List miscellaneous expenses in line 24f. If				
	line 24f amount exceeds 10% of line 25, column				
	(A) amount, list line 24f expenses on Schedule O)				
а	Seed Treatment/Drying	40,810			
b	Repair & Maintenance	22,529			-
c	Seed Packing/Cert	19,947			
d	Auto gas & Oil	14,396			
e	Peanut Inspection fees	12,447	_		
f	All other expenses	27,321	<del>-</del>		<u> </u>
25	Total functional expenses. Add lines 1 through 24f	925,907	0	0	0
	Joint costs. Check here ▶ If following	223,301			<u> </u>
	SOP 98-2 (ASC 958-720) Complete this line				
	only if the organization reported in column				
	(B) joint costs from a combined educational campaign and fundraising solicitation				1
DAA	campaign and idioralising solicitation .			<u> </u>	Form <b>990</b> (2010)

Part :	X Balance Sheet			· · · · · · · · · · · · · · · · · · ·			
					(A) Beginning of year		(B) End of year
1	Cash—non-interest bearing .				9,310	_1	10,364
2	Savings and temporary cash investments				4,554,532	_2	5,074,157
3	Pledges and grants receivable, net			_		_3	
4	Accounts receivable, net				163,903	4	55,676
5	Receivables from current and former officers, director	s, truste	es, key				
	employees, and highest compensated employees. Co	mplete	Part II of				
	Schedule L			ļ		5	
6	Receivables from other disqualified persons (as defin	ed unde	r section				
	4958(f)(1)), persons described in section 4958(c)(3)(8	3), and c	ontributir	ng			
	employers and sponsoring organizations of section 5	01(c)(9)	voluntary	,			
	employees' beneficiary organizations (see instruction	s)				6	
7	Notes and loans receivable, net					_7_	
7 8	Inventories for sale or use				87,267	8	117,957
9	Prepaid expenses and deferred charges				37,517	9	19,787
10a	Land, buildings, and equipment: cost or						
1	other basis Complete Part VI of Schedule D	10a	<u> </u>	2,942,635			
b	Less: accumulated depreciation	101	<u></u>	1,973,162	966,605	10c	969,473
11	Investments—publicly traded securities					11	
12	Investments—other securities See Part IV, line 11					12	
13	Investments—program-related See Part IV, line 11					13	_,_
14	Intangible assets					14	
15	Other assets See Part IV, line 11					15	
16	Total assets. Add lines 1 through 15 (must equal line	34)			5,819,134	16	6,247,414
17	Accounts payable and accrued expenses				66,209	17	117,449
18	Grants payable					18	
19	Deferred revenue				·····	19	
20	Tax-exempt bond liabilities					20	
g 21	Escrow or custodial account liability Complete Part I	√ of Sch	edule D		2,112,985	21	2,367,419
21 22	Payables to current and former officers, directors, true	stees, k	еу				
<u> </u>	employees, highest compensated employees, and dis	squalifie	d person:	s.			
š	Complete Part II of Schedule L					22	
23	Secured mortgages and notes payable to unrelated the	nird parti	ies		******	23	
24	Unsecured notes and loans payable to unrelated third	l parties				24	
25	Other liabilities. Complete Part X of Schedule D					25	
26	Total liabilities. Add lines 17 through 25				2,179,194	26	2,484,868
ß	Organizations that follow SFAS 117, check here ▶	X and	d comple	ete			
<b>≧</b>	lines 27 through 29, and lines 33 and 34.						
27	Unrestricted net assets				3,639,940	27	3,762 <u>,</u> 546
Ď 28	Temporarily restricted net assets					28	
29	Permanently restricted net assets					29	
2	Organizations that do not follow SFAS 117, check	here 🕨	∐ and				
5	complete lines 30 through 34.						
30	Capital stock or trust principal, or current funds					30_	
31	Paid-in or capital surplus, or land, building, or equipment			l		31	
27 28 29 30 31 32 33 34	Retained earnings, endowment, accumulated income	, or othe	er funds			32	
33	Total net assets or fund balances			[	3,639,940		3,762,546
34	Total liabilities and net assets/fund balances				5,819,134	34	6,247,414

Form **990** (2010)

<u>Form</u>	990 (2010) Florida Foundation	59-0931036			Pa	ge <b>12</b>
Pa	t XI Reconciliation of Net Assets					
	Check if Schedule O contains a response to a	ny question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)		1	1,0	48,	513
2	Total expenses (must equal Part IX, column (A), line 25)		2			907
3	Revenue less expenses. Subtract line 2 from line 1		3			606
4	Net assets or fund balances at beginning of year (must equal Part X,	line 33, column (A))	4	3,6		
5	Other changes in net assets or fund balances (explain in Schedule O)	* **	5			0
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5				_	
	column (B))		6	3,7	62,	546
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response to a	ny question in this Part XII				
					Yes	No
1	Accounting method used to prepare the Form 990: Cash	X Accrual Other				
	If the organization changed its method of accounting from a prior year	r or checked "Other," explain in				
	Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by	an independent accountant?		_2a		X
b	Were the organization's financial statements audited by an independe	ent accountant?		2b	X	
С	If "Yes" to line 2a or 2b, does the organization have a committee that	assumes responsibility for oversight				
	of the audit, review, or compilation of its financial statements and sele	ection of an independent accountant?		2c	X	<u> </u>
	If the organization changed either its oversight process or selection pr	rocess during the tax year, explain in				
	Schedule O.					
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the final	ancial statements for the year were				
	issued on a separate basis, consolidated basis, or both:					
	X Separate basis Consolidated basis Both consolidate	d and separate basis				
3a	As a result of a federal award, was the organization required to underg	go an audit or audits as set forth in				
	the Single Audit Act and OMB Circular A-133?			3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the	he organization did not undergo the				
	required audit or audits, explain why in Schedule O and describe any	steps taken to undergo such audits		3b		
				Form	1 <b>990</b>	(2010)

#### SCHEDULE C (Form 990 or 990-EZ)

## **Political Campaign and Lobbying Activities**

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

▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.

▶ See separate instructions.

OMB No 1545-0047 **2010** 

Open to Public Inspection

**Employer Identification number** 

Department of the Treasury Internal Revenue Service

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

- Section 501(c)(3) organizations: Complete Parts I-A and B Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below. Do not complete Part I-B
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A. Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35a (Proxy Tax), then

Section 501(c)(4), (5), or (6) organizations: Complete Part III

Name of organization Florida Foundation

Seed Producers, Inc.			59-09310	<u> 36</u>
Part I-A Complete if the organization is exen	npt under section 501(c	or is a section	on 527 organizatio	n.
1 Provide a description of the organization's direct and indire	ect political campaign activities	ın Part IV		
2 Political expenditures			▶\$	
3 Volunteer hours			_	
Part I-B Complete if the organization is exen	npt under section 501(c	)(3).		
Enter the amount of any excise tax incurred by the organiz	zation under section 4955		▶ \$ _	
2 Enter the amount of any excise tax incurred by organization	on managers under section 495	5	▶ \$ _	
3 If the organization incurred a section 4955 tax, did it file Fo	orm 4720 for this year?	•		∐ Yes ∐ No
4a Was a correction made?				Yes No
b If "Yes," describe in Part IV				- <del></del>
Part I-C Complete if the organization is exen	npt under section 501(c	<u>), except sect</u>	ion 501(c)(3).	
Enter the amount directly expended by the filing organization	ion for section 527 exempt fund	tion		
activities			▶ \$ _	
2 Enter the amount of the filing organization's funds contributed.	uted to other organizations for s	ection		
527 exempt function activities			▶ \$ _	
3 Total exempt function expenditures. Add lines 1 and 2. En	iter here and on Form 1120-PO	L,		
line 17b			. ▶\$_	
4 Did the filing organization file Form 1120-POL for this year				Yes No
5 Enter the names, addresses and employer identification n	umber (EIN) of all section 527 p	political organization	ons to which the filing	
organization made payments For each organization listed	l, enter the amount paid from th	e filing organization	on's funds Also enter	
the amount of political contributions received that were pro	• •		*	
as a separate segregated fund or a political action commit	ttee (PAC) If additional space i	s needed, provide	information in Part IV.	
(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
			filing organization's funds If none, enter -0-	contributions received and promptly and directly
			lulius il lione, enter -0-	delivered to a separate
				political organization If
				none, enter -0-
(1)				
	<u> </u>			
(2)				
			<u> </u>	
(3)				
			-	
(4)				
	<del></del>	-	<del> </del>	<del> </del>
(5)				
(0)			-	
(6)				

DAA

-SP -	•					
Schedule C (Form 990 or 990-EZ) 2010 F1c	rida Found	dation			59-09310	36 Page
Part II-A Complete if the organiz	zation is exemp	t under section 5	01(c)(3) an	d filed F	orm 5768 (ele	ction under
section 501(h)).						
A Check ▶ ☐ if the filing organizat	ion belongs to a	n affiliated group	•			
3 Check ▶ 🦳 if the filing organizat	ion checked box	A and "limited c	ontrol" provi	sions a	pply.	
Limits on Lob (The term "expenditures" i	bying Expendit means amounts p			•	a) Filing zation's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influence pu	ablic opinion (grass re	oots lobbying)				
<b>b</b> Total lobbying expenditures to influence a	legislative body (dıre	ct lobbying)				
c Total lobbying expenditures (add lines 1a	and 1b)					
d Other exempt purpose expenditures						
e Total exempt purpose expenditures (add li	nes 1c and 1d)					
f Lobbying nontaxable amount Enter the an	nount from the follow	ring table in both				
columns.						······································
If the amount on line 1e, column (a) or (b) is:	The lobbying nonta	axable amount is:	_			
Not over \$500,000	20% of the amount or	n line 1e				
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% o	of the excess over \$500,00	00			
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% o	f the excess over \$1,000,	000			
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of	the excess over \$1,500,0	00			
Over \$17,000,000	\$1,000,000					
g Grassroots nontaxable amount (enter 25%	of line 1f)					
h Subtract line 1g from line 1a. If zero or less	s, enter -0-					
i Subtract line 1f from line 1c. If zero or less	, enter -0-					
j If there is an amount other than zero on ei	ther line 1h or line 1i,	, did the organization t	ile Form 4720			
reporting section 4911 tax for this year?						Yes No
(Some organizations tha	_	ng Period Under n 501(h) election			mplete all of t	he five
columns bel	ow. See the inst	tructions for line	s 2a throug	h 2f on	page 4.)	
Lobb	ying Expenditu	res During 4-Yea	r Averagin	Period	d	
Calendar year (or fiscal year beginning in)	(a) 2007	<b>(b)</b> 2008	(c) 200	9	( <b>d)</b> 2010	(e) Total
2a Lobbying nontaxable amount						
b Lobbying ceiling amount (150% of line 2a, column(e))						
c Total lobbying expenditures						

Schedule C (Form 990 or 990-EZ) 2010

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

Pai	Complete if the organization is exempt under section 501(c)(3) and has NO (election under section 501(h)).	OT filed	Forr	n 5768			
	(election under section 50 I(ii)).	(6	9)		(b)		
		Yes	No	,	Amo	unt	
1	During the year, did the filing organization attempt to influence foreign, national, state or local						
	legislation, including any attempt to influence public opinion on a legislative matter or						
	referendum, through the use of:						
	Volunteers? .	<u> </u>					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?						
C	Media advertisements?						
þ	Mailings to members, legislators, or the public?						
	Publications, or published or broadcast statements?						
f	Grants to other organizations for lobbying purposes?						
g	Direct contact with legislators, their staffs, government officials, or a legislative body?						
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?						
i	Other activities? If "Yes," describe in Part IV						
j	Total. Add lines 1c through 1i						
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		ļ	•			
	If "Yes," enter the amount of any tax incurred under section 4912			ļ			
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912						
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	11 11 1	L	L			
Pal	t III-A Complete if the organization is exempt under section 501(c)(4), section 50 501(c)(6).	1(C)(5),	or se	ection			
	SS.(GRO).					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			ſ	1		х
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				2	х	†
	Did the organization agree to carryover lobbying and political expenditures from the prior year?	•			3		X
	t III-B Complete if the organization is exempt under section 501(c)(4), section 50	1(c)(5).	or se	ection			
	501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A				d		
	"Yes."	,			_		
1	Dues, assessments and similar amounts from members		1				
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political						
	expenses for which the section 527(f) tax was paid).						
а	Current year		2a				
b	Carryover from last year		2b				
С	Total	•	2c				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the						
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying						
	and political expenditure next year?		4				
5	Taxable amount of lobbying and political expenditures (see instructions)	_	5				
	t IV Supplemental Information	•	_				
	plete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4, Part I-C, line 5, and Part II	-B. line 1i	Also				
	elete this part for any additional information.	_,		•			
••		•	••			••	
• • •						• •	
		•				•	•
			• •			•	
	• • • • •		• •		• •		

Part IV Supplemental Information (continued)

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SCHEDULE D (Form 990)

Department of the Treasury

Internal Revenue Service

**Supplemental Financial Statements** 

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

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047 2010

Open to Public

Name of the organization **Employer identification number** Florida Foundation Seed Producers, Inc. 59-0931036 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 Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year 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? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for chantable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year Total number of conservation easements 2a 2b Total acreage restricted by conservation easements Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? 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 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) (i) and section 170(h)(4)(B)(ii)? 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 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenues included in Form 990, Part VIII, line 1 \$ Assets included in Form 990, Part X

	dule D (Form 990) 2010 FIOLICA FO				<u> </u>				aye z
Pa	式間 Organizations Maintaining (						ets (contir	nued)	
3	Using the organization's acquisition, accession, collection items (check all that apply):	, and other records, check	c any of the following	ng that are	a significant u	ise of its			
а	Public exhibition	d Loan or	exchange program	าร					
ь	Scholarly research	e Other							
c	Preservation for future generations				•				
4	Provide a description of the organization's colle	ctions and evoluin how th	ev further the orga	nızatınn's	evernt numos	e in Part			
•	XIV.	ctions and explain now th	icy further the orga	ilization 5	exempt purpor	o mi i ant			
_		1							
5	During the year, did the organization solicit or re				milar				٦
	assets to be sold to raise funds rather than to b				1 43 7	"		8S	<u>No</u>
Ра	rt IV Escrow and Custodial Arrar			ation an	swerea re	es to For	m 990, Pa	VI JIE	,
	line 9, or reported an amoun								
1a	Is the organization an agent, trustee, custodian	or other intermediary for	contributions or oth	ner assets	not			_	_
	included on Form 990, Part X?				•		Y	es X	No
b	If "Yes," explain the arrangement in Part XIV ar	nd complete the following	table						
							Amour	nt	
С	Beginning balance					1c			
d	Additions during the year					1d	-		
_	Distributions during the year	• ••				1e			
	Ending balance					1f			
"	J	m 000 Bart V line 212			•		XY		1
	Did the organization include an amount on Form	n 990, Fart A, line 21?	••		•		2 <u>1</u> Y	es _	No
	If "Yes," explain the arrangement in Part XIV	to if organization on	owered "Vee" t	o Form	OOO Dort IV	/ line 10			
Fø	rt V Endowment Funds. Comple								6 1
	•	(a) Current year	(b) Pnor year	(C) I WO	years back (d	) Three years	s back (e) Fol	ır years	Dack
1a	Beginning of year balance								
b	Contributions				<u> </u>				
C	Net investment earnings, gains, and				ŀ				
	losses								
d	Grants or scholarships								
е	Other expenditures for facilities and								
	programs				l		I		
f	Administrative expenses				<u> </u>				
g	End of year balance					***************************************			
2	Provide the estimated percentage of the year e	nd halanaa hald as:		I			<u>_</u>		
	,								
a	Board designated or quasi-endowment	%							
D	Permanent endowment \ %								
	Term endowment ▶ %								
3a	Are there endowment funds not in the possessi	ion of the organization tha	at are neld and adm	inistered	ror tne			<u></u>	T
	organization by						<u> </u>	Yes	No
	(i) unrelated organizations				•		3a(i)		├
	(ii) related organizations	••	•		•	٠	3a(ii)	<del> </del>	├
b	If "Yes" to 3a(II), are the related organizations li	· · · · · · · · · · · · · · · · · · ·	•				_3b	<u>L</u>	<u> </u>
4	Describe in Part XIV the intended uses of the o	rganization's endowment	funds				<del></del>		
Pa	tt VI Land, Buildings, and Equip	ment. See Form 990	0, Part X, line 1	10.					
	Description of investment	(a) Cost or other basis	(b) Cost or other	basis	(c) Accumu	lated	(d) Boo	k value	
		(investment)	(other)	]	depreciat	on			
1a	Land		448	,266			4	48,	266
	Buildings	······································		,880	68	3,254			626
	Leasehold improvements								
	Equipment		1,639	.489	1.28	9,908	3	49,	581
	Other		1 2,33	*		- ,			
	. Add lines 1a through 1e (Column (d) must equ	ial Form 990 Part Y colo	ımn (B) line 10(c)	\ <u> </u>			0	69	473
ı uldı	. Add lines to unough te (Column (d) must equ	aar onn 350, Fait A, COIL	(D), III (C)		••		<del></del>		<u> </u>

Part VII	Investments—Other Securities. See Form 996	0, Part X, line 12.		
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of Cost or end-of-year	
(1) Financial of	denvatives			
	eld equity interests			
(3) Other				
(A)	·			
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
<u>(I)</u>				
	n (b) must equal Form 990, Part X, col. (B) line 12.)	<u> </u>		
Part VIII	Investments—Program Related. See Form 99	1	1 (220)	
	(a) Description of investment type	(b) Book value	(c) Method of Cost or end-of-year	
_(1)				
(2)		ļ <del></del>	,	·
(3)				<del></del>
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				· · · · · · · · · · · · · · · · · · ·
(10)	(h) must soud Form 000 Port V set (D) top 42.)			
Part IX	n (b) must equal Form 990, Part X, col. (B) line 13.)  Other Assets. See Form 990, Part X, line 15.		<u> </u>	**************************************
FAILE	(a) Description			(b) Book value
(1)	(a) Description	· — - · · · · · · · · · · · · · · · · ·		(b) book value
(1)				
(3)				
(4)	· · · · · · · · · · · · · · · · · · ·			·
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
	n (b) must equal Form 990, Part X, col. (B) line 15.)			
Part X	Other Liabilities. See Form 990, Part X, line 2	5.		
1.	(a) Description of liability	(b) Amount		
(1) Federal	income taxes			
(2)				
(3)				
(4)			_	
_(5)		<u> </u>		
(6)			_	
(7)				
(8)			1	
(9)		<u></u>	1	
(10)			_	
(11)			_	
Total. (Column	n (b) must equal Form 990, Part X, col (B) line 25.)			
2 FIN 48 (AS	C 740) Footnote. In Part XIV, provide the text of the footnote t	o the organization's financ	al statements that reports the	•

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che	dule D (Form 990) 2010 Florida Foundation		59-0931036		Page 4
	Reconciliation of Change in Net Assets from Form 9	90 to Audited			
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1	Т	1,048,513
2	Total expenses (Form 990, Part IX, column (A), line 25)		2	1	925,907
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3		122,606
4	Net unrealized gains (losses) on investments		4	Т	
5	Donated services and use of facilities	•	5	$\Box$	
6	Investment expenses		6		
7	Prior penod adjustments		7		
8	Other (Describe in Part XIV.)		8		
9	Total adjustments (net). Add lines 4 through 8		9		
0	Excess or (deficit) for the year per audited financial statements. Combine lines	3 and 9	10		122,606
Pa	art XII Reconciliation of Revenue per Audited Financial Sta	tements With	Revenue per Return	1	
1	Total revenue, gains, and other support per audited financial statements		1	$\perp$	1,048,513
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains on investments	2a			
b	Donated services and use of facilities	2b			
¢	Recovenes of prior year grants	2c			
d	Other (Describe in Part XIV.)	2d		1	
е	Add lines 2a through 2d		2e	$oldsymbol{ol}}}}}}}}}}}}}}}}}}$	
3	Subtract line 2e from line 1		3		1,048,513
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV.)	4b			
C	Add lines 4a and 4b .		4c	丄	<del></del>
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	丄	1,048,513
Pa	ut X组 Reconciliation of Expenses per Audited Financial St	atements Wit	h Expenses per Retu	<u>ırn</u>	
1	Total expenses and losses per audited financial statements .		. 1	$\bot$	925,907
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	, ,		1	
		2a			
	Prior year adjustments .	. 2b		1	
С	Other losses .	2c		1	
d	Other (Describe in Part XIV.)	2d	0	1	

Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Part XIV Supplemental Information

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

Add lines 2a through 2d

Subtract line 2e from line 1

**b** Other (Describe in Part XIV.)

c Add lines 4a and 4b

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, line 2; 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.

Part IV, Line 2b - Escrow Liability Arrangement Explanation The Organization receieves royalties from licensees and pays a portion to the University of Florida and inventors. Amounts reported on Line 21 of Form 990, Part X are amounts yet to be distributed. Part X - Liability Under FIN 48 Footnote The Corporation holds no uncertain tax position and, therefore has no policy for evaluating them.

925,907

925,907

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Schedule D (Form 990) 2010 Florida Foundation
Part XIV Supplemental Information (continued)

59-0931036

Page 5

#### SCHEDULE F (Form 990)

**Statement of Activities Outside the United States** 

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

Part IV, line 14b, 15, or 16.

▶ Attach to Form 990. ▶ See separate instructions.

2010 Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

Florida Foundation Name of the organization Employer identification number 59-0931036 Seed Producers, Inc. General Information on Activities Outside the United States. Complete if the organization answered "Yes" Part I to Form 990. Part IV. line 14b. For grantmakers. 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 X Yes No grants or assistance? 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of grant funds outside the 3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (a) Region (b) Number of (c) Number of (d) Activities conducted in (e) If activity listed in (d) is (f) Total employees, agents, expenditures for offices in the region (by type) (e g, a program service, region and independent fundraising, program describe specific type of and investments contractors services investments service(s) in region in region grants to recipients in region located in the region) Central America and the Caribbean None N/A East Asia and the Pacific 0 None N/A (2) Europe 0 None N/A Middle East and North Africa N/A 0 None (4) South America None N/A (5) (6)

sheets to Part I

c Totals (add lines 3a and 3b)

FFSP

Page 2 (i) Method of valuation (book, FMV, appraisal, other) Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, (h) Description of non-cash assistance Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 (g) Amount of non-cash assistance (f) Manner of cash disbursement 59-0931036 (e) Amount of cash grant (d) Purpose of grant Part II can be duplicated if additional space is needed. Schedule F (Form 990) 2010 Florida Foundation (c) Region (b) IRS code section and EIN (if applicable) (a) Name of organization  $\Xi$ 3 3 2 3 Ø 8

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ~

3 Enter total number of other organizations or entities

(11)

(12)

(10)

2

(8)

\$

(14)

(15)

(16)

Schedule F (Form 990) 2010

FFSP

Gest grant debursement assistance of non-cesh assistance	Part III can be duplicated if additional space is needed	Part III can be duplicated if additional space is needed.  (a) Manner of (f) Amount of (g) Amount of (g) Amount of (g) Amount of (g) Description (h) Method of (g) Amount of (g) A		(e) Manner of	(f) Amount of	(a) Description	(h) Method of
		(c) Number of recipients	(d) Amount of cash grant	cash disbursement	non-cash assistance	(g) Description of non-cash assistance	valuation (book, FMV, appraisal, other)
	+						
	-						
							•
	<del>                                     </del>						
							-
		!					

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Sch	edule F (Form 990) 2010 Florida Foundation	59-0931036		Page 4
P	art IV Foreign Forms			
1	Was the organization a U S transferor of property to a foreign conthe organization may be required to file Form 926, Return by a U. Corporation (see Instructions for Form 926)		Yes	X No
2	Did the organization have an interest in a foreign trust during the timay be required to file Form 3520, Annual Return to Report Trans Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Info U.S. Owner (see Instructions for Forms 3520 and 3520-A)	sactions with Foreign Trusts and	. Yes	X No
3	Did the organization have an ownership interest in a foreign corporate organization may be required to file Form 5471, Information R Certain Foreign Corporations (see Instructions for Form 5471)	Return of U.S Persons with respect to	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive qualified electing fund during the tax year? If "Yes," the organization Return by a Shareholder of a Passive Foreign Investment Compainstructions for Form 8621)	ion may be required to file Form 8621,	☐ Yes	X No
5	Did the organization have an ownership interest in a foreign partnithe organization may be required to file Form 8865, Return of U.S Foreign Partnerships (see Instructions for Form 8865)		Yes	X No
6	Did the organization have any operations in or related to any boyo "Yes," the organization may be required to file Form 5713, Internator Form 5713)		Yes	X No

#### Part V Supplemental Information

Complete this part to provide the information required in Part I, line 2 (monitoring of funds), Part I, line 3, column (f) (accounting method); Part II, line 1 (accounting method); Part III (accounting method), and Part III, column (c) (estimated number of recipients), as applicable Also complete this part to provide any additional information (see instructions).

#### Part V - Additional Information

The Organization answered Yes to Form 990, Part IV, Line 14b because it receives royalty revenues from licensees located in the regions indicated on Line 3, Part 1, Schedule F.

SCHEDULEI (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Parti

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

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ► Attach to Form 990. 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and

General Information on Grants and Assistance

Inc.

Florida Foundation Seed Producers,

OMB No 1545-0047

Open to Public Inspection 2010

> Employer identification number 59-0931036

the selection criteria used to award the grants or assistance.  Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	stance? monitoring the use of	arant funds	and funds in the United States			2	X Yes	Ŷ
1 65	Governments an recipient that re	<b>d Organ</b> i ceived m	izations in the Ur lore than \$5,000.	ited States. Com Check this box if	plete if the org no one recipie	janization ans int received m	wered "Yes" to ore than \$5,000. Part II	▎ □
1 (a) Name and address of organization or government	(p) EIN	(c) IRC 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	
(1) University of Florida PO Box 113203 W1 32611		100	123 602				Agricultural	
	1000	3						
(6)								
(4)								
				-				
(5)								
(9)								
(2)								
(6)								
1								
<ol> <li>Enter total number of section 501(c)(3) and government organizations</li> <li>Enter total number of other organizations</li> </ol>	ant organizations		:					

Schedule I (Form 990) (2010)

For Paperwork Reduction Act Notice, see the instructions for Form 990. DAA

Schedule | (Form 990) (2010) Florida Foundation

FFSP

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. 59-0931036

Part III can be duplicated if additional space is needed.

	rait III cari de ouplicateu II additional space 18 needeu	ional space is neede	ď.			
	(a) Type of grant or assistance	(b) Number of	(c) Amount of	(d) Amount of	(e) Method of valuation (book,	(e) Method of valuation (book, (f) Description of non-cash assistance
		recipients	cash grant	non-cash assistance	FMV, appraisal, other)	
-						
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ro.						•
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7						9 9 9 9 9 9 9 1 1
Part IV	Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.	nplete this part to pro	vide the information	required in Part I, Ii	ne 2, and any other additi	onal information.

Part IV - Additional Information

Grant funds are provided to the University of Florida (UF) to reimburse UF

for the cost of salaries of individuals who work on behalf of Florida

Foundation Seed Producers. These individuals have offices on the UF campus

and contribute importantly to the licensing and marketing of released

cultivars.

:

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

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees

 Complete if the organization answered "Yes" to Form 990, Part IV, line 23.
 Attach to Form 990. ➤ See separate instructions. Open To Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Florida Foundation

Seed Producers, Inc.

Employer identification number 59 - 0931036

**Questions Regarding Compensation** Yes No 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 First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to 1b 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? 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 Compensation committee Written employment contract Independent compensation consultant Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee 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: Receive a severance payment or change-of-control payment from the organization or a related organization? b Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b c Participate in, or receive payment from, an equity-based compensation arrangement? 4c If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9. 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: The organization? Any related organization? 5b If "Yes" to line 5a or 5b, describe in Part III 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? 6a **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 7 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 Regulations section 53 4958-4(a)(3)? If "Yes," describe If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?

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

Schedule J (Form 990) 2010

Page 2

59-0931036

Florida Foundation

Schedule J (Form 990) 2010

FFSP

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

For each individual whose compensation must be reported 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 Part II

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

	(B)	) Breakdown o	(B) Breakdown of W-2 and/or 1099-MISC compensation	3 compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name	<b>)</b>	(i) Base compensation	(ii) Bonus & incentive compensation	(III) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in pnor Form 990 or Form 990-EZ
John Beuttenmuller	€ €	69,077			6,807	5,614	81,498	0 0
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Schedule J (Form 990) 2010

FFSP

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.

Part III - Other Additional Information

salary and benefits from the University of Florida which does not meet the The Executive Director/Secretary/Treasurer, John Beuttenmuller, was paid definition of a related organization as provided by the IRS. Schedule J (Form 990) 2010

#### SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

#### Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2010
Open to Public Inspection

Name of the organization

Florida Foundation Seed Producers, Inc.

Employer identification number 59 - 0931036

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990

The Form 990 is prepared by an independent auditor and then reviewed by the Executive Director and Office Manager.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation Governing Documents are made available to the public upon request.