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Form **990**

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

2011

Open to Public Inspection

A For the 2011 calendar year, or tax year beginning , and ending

B Check if applicable:

☐ Address change

☐ Name change

☐ Initial return

☐ Terminated

☐ Amended return

☐ Application pending

C Name of organization

FLORIDA CATTLEMEN'S COUNTY

ASSOCIATION INC., GROUP RETURN

Doing Business As

Number and street (or P.O. box if mail is not delivered to street address)

800 SHAKERAG RD

City or town, state or country, and ZIP + 4

KISSIMMEE

FL 34744-4445

F Name and address of principal officer

THOMAS J. BRYANT

800 SHAKERAG RD

KISSIMMEE

FL 34744-4445

D Employer identification number

45-3805166

E Telephone number

G Gross receipts \$ 279,866

H(a) Is this a group return for affiliates? ☒ Yes ☐ No

H(b) Are all affiliates included? ☐ Yes ☒ No

If "No," attach a list (see instructions)

SEE STMT 1

H(c) Group exemption number 5784

I Tax-exempt status

501(c)(3)

☒

501(c)

(5)

(insert no)

4947(a)(1) or

527

J Website: N/A

K Form of organization

☒

Corporation

☐

Trust

☐

Association

☐

Other

L Year of formation 2010

M State of legal domicile FL

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities

SEE SCHEDULE O

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)

3 237

4 Number of independent voting members of the governing body (Part VI, line 1b)

4 0

5 Total number of individuals employed in calendar year 2011 (Part V, line 2a)

5 0

6 Total number of volunteers (estimate if necessary)

6 0

7a Total unrelated business revenue from Part VIII, column (C), line 12

7a -150

b Net unrelated business taxable income from Form 990-T, line 34

7b -150

Revenue

8 Contributions and grants (Part VIII, line 1h)

Prior Year

Current Year

472,150

128,569

9 Program service revenue (Part VIII, line 2g)

175,980

141,429

10 Investment income (Part VIII, column (A), lines 3, 4, and 7a)

4,454

3,918

11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)

-40

-150

12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)

652,544

273,766

Expenses

13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)

122,185

91,530

14 Benefits paid to or for members (Part IX, column (A), line 4)

0

0

15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)

0

0

16a Professional fundraising fees (Part IX, column (A), line 11e)

0

0

b Total fundraising expenses (Part IX, column (D), line 25) ►

59,052

17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)

86,491

150,041

18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)

208,676

241,571

19 Revenue less expenses Subtract line 18 from line 12

443,868

32,195

Net Assets or Fund Balances

20 Total assets (Part X, line 16)

Beginning of Current Year

End of Year

443,868

476,252

21 Total liabilities (Part X, line 26)

0

0

22 Net assets or fund balances Subtract line 21 from line 20

443,868

476,252

Part II Signature Block

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

Sign Here

Signature of officer

THOMAS J. BRYANT

Type or print name and title

CHAIRMAN ELECT

Date

11-13-12

Paid

Preparer Use Only

Print/Type preparer's name

DENNIS E. BEASLEY

Preparer's signature

Dennis E. Beasley, CPA

Date

11-15-12

Check ☐ if self-employed

PTIN

P01400962

Firm's name

BEASLEY, BRYANT & COMPANY CPAs, P.A.

Firm's EIN

59-3188484

Firm's address

LAKELAND, FL 33813-2042

Phone no

863-646-1373

May the IRS discuss this return with the preparer shown above? (see instructions)

☐ Yes ☒ No

For Paperwork Reduction Act Notice, see the separate instructions.

DAA

Form 990 (2011)

W

SCANNED DEC 20 2012

Part III Statement of Program Service Accomplishments

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

☒ **X****1** Briefly describe the organization's mission.**SEE SCHEDULE O****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 ☒ **X** 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 ☒ **X** No

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations 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.**4a** (Code.) (Expenses \$ including grants of \$) (Revenue \$)**FOR EACH INDIVIDUAL COUNTY TO FILE ALL THE PAPERWORK NECESSARY TO BECOME A PART OF THE FLORIDA COUNTY CATTLEMEN'S ASSOCIATION, INC IN AN EFFORT TO GAIN PROPER NON-PROFIT STATUS AND MAINTAIN PROPER BYLAWS, ARTICLES OF INCORPORATION, BOOKKEEPING AND ANNUAL TAX FILING.****4b** (Code.) (Expenses \$ **91,530** including grants of \$ **91,530**) (Revenue \$)**EACH COUNTY HELD SEVERAL FUNDRAISING EVENTS WHICH EDUCATED THE COMMUNITY AND ITS YOUTH ABOUT THE CATTLE INDUSTRY.****4c** (Code.) (Expenses \$ including grants of \$) (Revenue \$)**4d** Other program services (Describe in Schedule O)

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

4e Total program service expenses **▶ 91,530**

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A		X
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?		X
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II		
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		X
9 Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV		X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V		X
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI		X
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII		X
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII		X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX		X
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X		X
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X		X
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII		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		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		X
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		

Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II		X
22 Did the organization report more than \$5,000 of grants 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	X	
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J		X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		
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		
26 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		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)		
a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV		X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		X
34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b 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		X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

		Yes	No
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	1a 0		
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 0		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	2b		
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	X	
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	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 Accounts.			
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?	5b		X
c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7 Organizations that may receive deductible contributions under section 170(c).			
a 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?	7a		
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 required to file Form 8282?	7c		
d If "Yes," indicate the number of Forms 8282 filed during the year.	7d		
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	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.			
a 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:			
a 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:			
a Gross income from members or shareholders.	11a		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b		
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b 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.			
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13a		
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.	13b		
c Enter the amount of reserves on hand.	13c		
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b		

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

Section A. Governing Body and Management

	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O	237	
b Enter the number of voting members included in line 1a, above, who are independent	0	
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?		X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6 Did the organization have members or stockholders?		X
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
a The governing body?	X	
b Each committee with authority to act on behalf of the governing body?	X	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

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

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

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed ► **NONE**
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
☐ Own website ☐ Another's website ☒ Upon request
- 19** Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ► **BEASLEY, BRYANT & COMPANY, CPAS, PA 4940 SOUTHFORK DRIVE**

LAKELAND**FL 33813****863-646-1373**

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.

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) SEE ATTACHED LIST OF OFFICER/DIRECTOR	2.00	X						0	0	0
(2)										
(3)										
(4)										
(5)										
(6)										
(7)										
(8)										
(9)										
(10)										
(11)										
(12)										
(13)										
(14)										

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15)										
(16)										
(17)										
(18)										
(19)										
(20)										
(21)										
(22)										
(23)										
(24)										
(25)										
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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

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

	Yes	No
3		X
4		X
5		X

Section B. Independent Contractors

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

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

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

Part VIII Statement of Revenue

			(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	1a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	128,569			
	g Noncash contributions included in lines 1a-1f	\$				
	h Total. Add lines 1a-1f		128,569			
Program Service Revenue	2a EDUCATIONAL EVENTS	Busn. Code	355,895			355,895
	b EDUCATION EXPENSES		-214,466			-214,466
	c					
	d					
	e					
	f All other program service revenue					
	g Total. Add lines 2a-2f		141,429			
	Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		3,918		
4 Income from investment of tax-exempt bond proceeds						
5 Royalties						
6a Gross rents		(i) Real (ii) Personal	5,950			
b Less rental exps			6,100			
c Rental inc or (loss)			-150			
d Net rental income or (loss)			-150		-150	
7a Gross amount from sales of assets other than inventory		(i) Securities (ii) Other				
b Less cost or other basis & sales exps						
c Gain or (loss)						
d Net gain or (loss)						
8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18		a				
b Less direct expenses		b				
c Net income or (loss) from fundraising events						
9a Gross income from gaming activities. See Part IV, line 19		a				
b Less direct expenses	b					
c Net income or (loss) from gaming activities						
10a Gross sales of inventory, less returns and allowances	a					
b Less cost of goods sold	b					
c Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Busn. Code				
11a						
b						
c						
d All other revenue						
e Total. Add lines 11a-11d						
12 Total revenue. See instructions		273,766	0	-150	145,347	

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).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22	91,530	91,530		
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				
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				
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (non-employees)				
a Management	21,734		16,226	5,508
b Legal				
c Accounting	1,354		1,354	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other	24,752			24,752
12 Advertising and promotion	3,391			3,391
13 Office expenses	54,912		31,943	22,969
14 Information technology				
15 Royalties				
16 Occupancy	2,479		848	1,631
17 Travel	801			801
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	30,326		30,326	
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance	10,292		10,292	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a				
b				
c				
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	241,571	91,530	90,989	59,052
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest bearing	226,594	1	213,723
	2 Savings and temporary cash investments	217,274	2	262,529
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net		4	
	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)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges		9	
	10a Land, buildings, and equipment, cost or other basis Complete Part VI of Schedule D	10a		
	b Less accumulated depreciation	10b	10c	
	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)	443,868	16	476,252	
Liabilities	17 Accounts payable and accrued expenses		17	
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	0	26	0
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ☒ and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	443,868	27	476,252
	28 Temporarily restricted net assets		28	
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here ☐ and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	443,868	33	476,252	
34 Total liabilities and net assets/fund balances	443,868	34	476,252	

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response to any question in this Part XI ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	273,766
2	Total expenses (must equal Part IX, column (A), line 25)	2	241,571
3	Revenue less expenses. Subtract line 2 from line 1	3	32,195
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	443,868
5	Other changes in net assets or fund balances (explain in Schedule O)	5	189
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	476,252

Part XII Financial Statements and ReportingCheck if Schedule O contains a response to any question in this Part XII ☐

- 1** Accounting method used to prepare the Form 990 ☒ Cash ☐ Accrual ☐ Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?
- b** Were the organization's financial statements audited by an independent accountant?
- c** If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.
- 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 separate basis, consolidated basis, or both
☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate 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
2a		X
2b		X
2c		
3a		X
3b		

Form **990** (2011)

**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.

Department of the Treasury
Internal Revenue Service

Name of the organization

FLORIDA CATTLEMEN'S COUNTY
ASSOCIATION INC., GROUP RETURN

Employer identification number

45-3805166

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?**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.

Part II can be duplicated if additional space is needed

☐ Yes ☒ No

1	(a) Name and address of organization or government	(b) 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)								
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table**3** Enter total number of other organizations listed in the line 1 table

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

Schedule I (Form 990) (2011)

2011**Open to Public Inspection**

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.

Part III can be duplicated if additional space is needed.

	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1	SCHOLARSHIPS/DONATIONS	150	91,530			
2						
3						
4						
5						
6						
7						

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

SCHEDULE O
(Form 990 or 990-EZ)Department of the Treasury
Internal Revenue Service

Name of the organization

Supplemental Information to Form 990 or 990-EZComplete 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.

OMB No 1545-0047

2011Open to Public
Inspection**FLORIDA CATTLEMEN'S COUNTY
ASSOCIATION INC., GROUP RETURN**Employer identification number
45-3805166

FORM 990 - ORGANIZATION'S MISSION OR MOST SIGNIFICANT ACTIVITIES

TO PROMOTE AND ENHANCE THE FLORIDA BEEF INDUSTRY THROUGH EDUCATION AND SPECIAL EVENTS, AND PROVIDE A FORUM FOR DISSEMINATING AND SHARING OF INFORMATION FOR EDUCATION, RESEARCH AND THE DEVELOPMENT OF LEADERSHIP PROGRAMS. TO PROVIDE EDUCATION, GUIDANCE AND LEADERSHIP TO THE YOUTH ABOUT THE BEEF INDUSTRY.

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990

UPON COMPLETION OF FORM 990, A COPY OF THE ENTIRE FORM WITH ALL ATTACHMENTS WAS MAILED TO ALL BOARD MEMBERS. THEY REVIEWED THIS TAX RETURN FOR ACCURACY AND COMPLETENESS, WITH NOTIFICATION BACK TO THE CHAIRMAN OF THE BOARD FOR EXECUTION AND PROCESSING TO IRS.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY

ANNUALLY THE BOARD UPDATES AND REVIEWS ANY CONFLICTS OF INTEREST OF ANY BOARD MEMBER AND ANY RELATED FINANCIAL DEALING.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION

DISCLOSURE FOR 1023, 990, BOARD/GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY OR FINANCIAL STATEMENT-ANY WRITTEN REQUEST WILL BE COMPLIED WITH WITHIN 10 BUSINESS DAYS UPON RECEIPT OF REQUEST AT NO CHARGE FOR COPYING, PROCESSING OR MAILING RESPONSE.

FORM 990, PART VII - ADDITIONAL INFORMATION

NO COMPENSATION PAID TO ANY BOARD, STAFF OR VOLUNTARY POSITION.

Form **851**(Rev. December 2010)
Department of the Treasury
Internal Revenue Service**Affiliations Schedule**► **File with each consolidated income tax return.**

OMB No. 1545-0025

For tax year ending **December 31, 2011**

Name of common parent corporation

Florida Cattleman's County Association, Inc. Group Return

Employer identification number

45-3805166

Number, street, and room or suite no. If a P.O. box, see instructions.

800 Shakerag Road

City or town, state, and ZIP code

Kissimmee, FL 34744-4445**Part I Overpayment Credits, Estimated Tax Payments, and Tax Deposits (see instructions)**

Corp. No.	Name and address of corporation	Employer identification number	Portion of overpayment credits and estimated tax payments	Portion of tax deposited with Form 7004
1	Common parent corporation		0.00	0.00
	Subsidiary corporations:			
2				
3	SEE ATTACHED SUBSIDIARY CORPORATIONS LIST			
4				
5				
6				
7				
8				
9				
10				
Totals (Must equal amounts shown on the consolidated tax return.)				

Part II Principal Business Activity, Voting Stock Information, Etc. (see instructions)

Corp No	Principal business activity (PBA)	PBA Code No.	Did the subsidiary make any nondividend distributions?		Stock holdings at beginning of year			
			Yes	No	Number of shares	Percent of voting power	Percent of value	Owned by corporation no.
1	Common parent corporation	EXEMPT						
	Subsidiary corporations:							
2						%	%	
3	SEE ATTACHED SUBSIDIARY CORPORATIONS LIST					%	%	
4						%	%	
5						%	%	
6						%	%	
7						%	%	
8						%	%	
9						%	%	
10						%	%	

For Paperwork Reduction Act Notice, see instructions.

Cat No. 16880G

Form **851** (Rev 12-2010)

Part III Changes in Stock Holdings During the Tax Year

Corp. No.	Name of corporation	Share- holder of Corpora- tion No.	Date of transaction	(a) Changes		(b) Shares held after changes described in column (a)	
				Number of shares acquired	Number of shares disposed of	Percent of voting power	Percent of value
						%	%
						%	%
	NOT APPLICABLE					%	%
						%	%
						%	%
						%	%
						%	%
						%	%
						%	%

(c) If any transaction listed above caused a transfer of a share of subsidiary stock (defined to include dispositions and deconsolidations), did the share's basis exceed its value at the time of the transfer? See instructions ☐ Yes ☐ No

(d) Did any share of subsidiary stock become worthless within the meaning of section 165 (taking into account the provisions of Regulations section 1.1502-80(c)) during the taxable year? See instructions ☐ Yes ☐ No

(e) If the equitable owners of any capital stock shown above were other than the holders of record, provide details of the changes.

NOT APPLICABLE

(f) If additional stock was issued, or if any stock was retired during the year, list the dates and amounts of these transactions.

NOT APPLICABLE

Part IV Additional Stock Information (see instructions)

- 1** During the tax year, did the corporation have more than one class of stock outstanding? ☐ Yes ☒ No
 If "Yes," enter the name of the corporation and list and describe each class of stock.

Corp. No.	Name of corporation	Class of stock

- 2** During the tax year, was there any member of the consolidated group that reaffiliated within 60 months of disaffiliation? ☐ Yes ☒ No
 If "Yes," enter the name of the corporation(s) and explain the circumstances.

Corp. No.	Name of corporation	Explanation

- 3** During the tax year, was there any arrangement in existence by which one or more persons that were not members of the affiliated group could acquire any stock, or acquire any voting power without acquiring stock, in the corporation, other than a de minimis amount, from the corporation or another member of the affiliated group? ☐ Yes ☒ No
 If "Yes," enter the name of the corporation and see the instructions for the percentages to enter in columns (a), (b), and (c).

Corp. No.	Name of corporation	(a) Percent of value	(b) Percent of outstanding voting stock	(c) Percent of voting power
		%	%	%
		%	%	%
		%	%	%
		%	%	%

Corp. No.	(d) Provide a description of any arrangement.

Florida Cattlemen's County Association, Inc.

EIN: 27-2003408

Form 851 Affiliations Schedule

Tax Year 2011

Part I & II- SUBSIDIARY ORGANIZATIONS

	NAME OF SUBSIDIARY ORGANIZATION	EIN	ADDRESS	PBA CODE	OVERPAYMENT CREDITS/		TAX DEPOSITS
					ESTIMATED TAX PYMTS	WIFORM 7004	
1	Alachua County Cattlemen's Association, Inc	22-3874004	1322 SW 12th Ave Gainesville, FL 32608	EXEMPT	\$0	\$0	Added in 2011
2	Charlotte County Cattlemen's Association, Inc	27-2427834	2771 Lippizan Trail Punta Gorda, FL 33950	EXEMPT	\$0	\$0	
3	Citrus County Cattlemen's Educational Foundation, Inc	27-1918551	5045 E Anna Jo Drive Inverness, FL 34452	EXEMPT	\$0	\$0	
4	Clay County Cattlemen's Corporation	27-1659009	1590 Island Lane Ste 28 Fleming Island, FL 32003	EXEMPT	\$0	\$0	
5	Collier County Cattlemen's Association, Inc	27-1570680	2005 28th Ave SE Naples, FL 34117	EXEMPT	\$0	\$0	
6	Columbia County Cattlemen's Association, Inc	27-2003702	415 SE Richards Glen Lake City, FL 32025	EXEMPT	\$0	\$0	
7	Dade County Cattlemen's Association, Inc	27-3033873	11100 SW 36th Street Miami, FL 33165	EXEMPT	\$0	\$0	
8	Desoto County Cattlemen's Association	27-2425726	2150 NE Roan Street Arcadia, FL 34266	EXEMPT	\$0	\$0	
9	Flagler County Cattlemen's Association	35-2379415	7255 County Rd 304 Bunnell, FL 32110	EXEMPT	\$0	\$0	
10	Gadsden County Cattlemen's Association	27-1728150	3750 Fairbanks Ferry Rd Havana, FL 32333	EXEMPT	\$0	\$0	
11	Gilchrist County Cattlemen's Association, Inc	27-2018617	128 East Wade St Trenton, FL 32693	EXEMPT	\$0	\$0	
12	Glades county Cattlemen's Association, Inc	38-3808898	16881 US Hwy 27 Moore Haven, FL 33471	EXEMPT	\$0	\$0	
13	Hendry County Cattlemen's Association, Inc	59-2367727	PO Box 68 Label, FL 33975	EXEMPT	\$0	\$0	
14	Hernando County Cattlemen's Association, inc	59-2366198	7341 High Corner Road Brooksville, FL 34602	EXEMPT	\$0	\$0	
15	Highlands County Cattlemen's Organization	27-2018119	4825 US Hwy 27 Sebring, FL 33870	EXEMPT	\$0	\$0	
16	Indian River county Cattlemen's Association, Inc	27-1814504	7880 37th St Vero Beach, FL 32966	EXEMPT	\$0	\$0	
17	Jackson County Cattlemen's Association, Inc.	27-1849218	2741 Pennsylvania Ave Marianna, FL 32448	EXEMPT	\$0	\$0	
18	Lake County Cattlemen's Association, Inc	32-0074719	7701 CR 561 Clermont, FL 34714	EXEMPT	\$0	\$0	
19	Orange County Cattlemen's Association, Inc	27-1865740	28 E Washington St Orlando, FL 32801	EXEMPT	\$0	\$0	
20	Osceola County Cattlemen's Association	27-1674980	4850 Thompson Rd St. Cloud, FL 34772	EXEMPT	\$0	\$0	
21	Pasco County Cattlemen's Association, Inc.	23-7191551	9638 Ehren Cutoff Land O'Lakes, FL 34639	EXEMPT	\$0	\$0	
22	Sarasota County Cattlemen's Association, Inc.	38-3810427	7289 Palmer Blvd Sarasota, FL 34240	EXEMPT	\$0	\$0	
23	Seminole County Cattlemen's Association, Inc	27-3108012	395 W Osceola Road Geneva, FL 32732	EXEMPT	\$0	\$0	
24	St Lucie County Cattlemen's Association, Inc.	27-4441504	2402 Blossom Ct Ft Pierce, FL 34982	EXEMPT	\$0	\$0	
25	Sumter County Cattlemen's Association, Inc.	27-1577751	8400 County Rd 614A Bushnell, FL 33513	EXEMPT	\$0	\$0	Added in 2011
26	Suwannee County Cattlemen's Association, Inc.	27-2447330	14719 40th Street Live Oak, FL 31060	EXEMPT	\$0	\$0	
27	Volusia County Cattlemen's Association, Inc	27-1278667	3100 East New York Ave Deland, FL 32724	EXEMPT	\$0	\$0	
28	Washington County Cattlemen's Association, Inc	27-1863579	1424 Jackson Ave Suite A Chipley, FL 32428	EXEMPT	\$0	\$0	

Florida Cattlemen's County Association, Inc. Group Return
Attachment to 2011 990 Part VII - Compensation of Officer, Directors, Trustees, Key Employees....

(A) NAME BY COUNTY		(B) AVERAGE HOURS PER WEEK	(C) POSITION	(D) REPORTABLE W-2, 1099-MISC COMPENSATION	(E) REPORTABLE COMPENSATION FROM RELATED ORG.	(F) ESTIMATED OTHER COMPENSATION
<u>Parent Organization</u>						
Ned Waters	2	Chairman	\$	-	-	\$
Thomas J Bryant	2	Chairman Elect	\$	-	-	\$
Doug Walker	2	Director	\$	-	-	\$
Cliff Doddington	2	Director	\$	-	-	\$
Eric Jacobsen	2	Director	\$	-	-	\$
Arnie Sarlo	2	Director	\$	-	-	\$
Jim Connell	2	Director	\$	-	-	\$
Steve Austad	2	Director	\$	-	-	\$
Christian Schook	2	Director	\$	-	-	\$
George Fisher	2	Director	\$	-	-	\$
Bill Sellers	2	President	\$	-	-	\$
Pat Connell	2	Secr/Treasurer	\$	-	-	\$
<u>Alachua County</u>						
Jerry Wasdin	2	President	\$	-	-	\$
Ross Woodward	2	Vice President	\$	-	-	\$
Chris P. Kelley	2	Secretary/Treas.	\$	-	-	\$
Ashby Green	2	State Director	\$	-	-	\$
<u>Charlotte County</u>						
John Flowers	2	President	\$	-	-	\$
Eric Stover	2	Vice President	\$	-	-	\$
Martha McKenzie	2	Secretary	\$	-	-	\$
Cindy Webb	2	Treasurer	\$	-	-	\$
Joel Beverly	2	County Director	\$	-	-	\$
<u>Citrus County</u>						
Kieth Barco	2	President	\$	-	-	\$
Cody Hensley	2	Director	\$	-	-	\$
Doug Naylor	2	Director	\$	-	-	\$
Wilbur Langley	2	Director	\$	-	-	\$
Bob Rosier	2	Director	\$	-	-	\$
James Marsh	2	Director	\$	-	-	\$
Pat Henson	2	Director	\$	-	-	\$
Mike VanNess	2	Director	\$	-	-	\$
Larry Rooks	2	Director	\$	-	-	\$

(A) NAME BY COUNTY	(B) AVERAGE HOURS PER WEEK	(C) POSITION	(D) REPORTABLE W-2, 1099-MISC COMPENSATION	(E) REPORTABLE COMPENSATION FROM RELATED ORG.	(F) ESTIMATED OTHER COMPENSATION
<u>Clay County</u>					
Fred Moulton	2	President	\$	\$	\$
Craig Van Gundy	2	Vice President	\$	\$	\$
John O'Connor	2	Sec/Treas	\$	\$	\$
Jim Farley	2	State Director	\$	\$	\$
<u>Collier County</u>					
Charles Campbell	2	President	\$	\$	\$
Buzz Stoner	2	Vice President/Director	\$	\$	\$
Lieza Priddy	2	Secretary	\$	\$	\$
Mary Stoner	2	Treasurer	\$	\$	\$
<u>Columbia County</u>					
Todd Harvey	2	President	\$	\$	\$
Jason Matthew	2	Vice President	\$	\$	\$
Ruth Kennedy	2	secretary	\$	\$	\$
Kim Veleta	2	Treasurer	\$	\$	\$
Charlie Crawford	2	Director	\$	\$	\$
<u>Dade County</u>					
Kelvin Moreno	2	President	\$	\$	\$
Adriel Santos	2	Vice President	\$	\$	\$
Melvin Moreno	2	Treasurer	\$	\$	\$
<u>Desota County</u>					
Dick Harvin	2	President	\$	\$	\$
Jim Selph	2	secretary	\$	\$	\$
Dan Ryals	2	Treasurer	\$	\$	\$
Carl McKetric	2	Director	\$	\$	\$
John Lipe	2	Director	\$	\$	\$
John Turner	2	Director	\$	\$	\$
Ken Harrison	2	Director	\$	\$	\$
Pete Charlton	2	Director	\$	\$	\$
<u>Flagler County</u>					
Michael Boyd	2	President	\$	\$	\$
Walton Cawart	2	Vice President	\$	\$	\$
Pat Cody	2	Secretary	\$	\$	\$

(A) NAME BY COUNTY	(B) AVERAGE HOURS PER WEEK	(C) POSITION	(D) REPORTABLE W-2, 1099-MISC COMPENSATION	(E) REPORTABLE COMPENSATION FROM RELATED ORG.	(F) ESTIMATED OTHER COMPENSATION
<u>Gadsden County</u>					
Ed Poppell	2	President	\$	-	\$
Josh Clark	2	Vice President	\$	-	\$
Patnick Durden	2	Sec./Treasurer	\$	-	\$
Russell Vanlandingham	2	Director	\$	-	\$
Jerry Osteen	2	Director	\$	-	\$
Robbie Maxwell	2	Director	\$	-	\$
Desmond Dodd	2	Director	\$	-	\$
<u>Gilchrist County</u>					
James Jones	2	President	\$	-	\$
N/A	2	Vice President	\$	-	\$
Kay Corbin	2	Secretary	\$	-	\$
Ben Colson	2	Treasurer	\$	-	\$
Johnny Taylor	2	Director	\$	-	\$
John Thomas	2	Director	\$	-	\$
Charles Bryant	2	Director	\$	-	\$
Earl Jones	2	Director	\$	-	\$
<u>Glades County</u>					
Janet Storey	2	President	\$	-	\$
Weston Pryor	2	vice President	\$	-	\$
Brad Oxer	2	Secretary	\$	-	\$
Brad Moss	2	Treasurer	\$	-	\$
Preston Stokes	2	Director	\$	-	\$
Darryl Crum	2	Director	\$	-	\$
Jeffery Patterson	2	Director	\$	-	\$
<u>Hendry County</u>					
Ray Hull	2	President/Director	\$	-	\$
Greg Jones	2	vice President/Director	\$	-	\$
Gene McAvoy	2	Secretary/Director	\$	-	\$
Jack Willis	2	Treasurer/Director	\$	-	\$
Raymond Crawford	2	Director	\$	-	\$
Buck Lee	2	Director	\$	-	\$
Tim Mudge	2	Director	\$	-	\$
Lindsey Wiggins	2	Director	\$	-	\$
Johnny Summeralls	2	Director	\$	-	\$
Donnie Crawford	2	Director	\$	-	\$

(A) NAME BY COUNTY	(B) AVERAGE HOURS PER WEEK	(C) POSITION	(D) REPORTABLE W-2, 1099-MISC COMPENSATION	(E) REPORTABLE COMPENSATION FROM RELATED ORG.	(F) ESTIMATED OTHER COMPENSATION
<u>Hernando County</u>					
Sam Sikes	2	President	\$	-	\$
Brian Volberg	2	Vice President	\$	-	\$
Mary Viber	2	Secretary	\$	-	\$
Leisha Thompson	2	Treasurer	\$	-	\$
Tommy Clark	2	Director	\$	-	\$
Joan Casey	2	Director	\$	-	\$
Gail Brooks	2	Director	\$	-	\$
Dan Wolthuie	2	Director	\$	-	\$
Chuck Schmidt	2	Director	\$	-	\$
Adam Cannon	2	Director	\$	-	\$
DJ McGlothlen	2	Director	\$	-	\$
Stacy Strickland	2	Director	\$	-	\$
Billy Sellers	2	Director	\$	-	\$
<u>Highlands County</u>					
Stanley Perry	2	President/Director	\$	-	\$
Sam Bronson	2	vice President/Director	\$	-	\$
Charlie Cullens	2	Treasurer/Director	\$	-	\$
Craig Cannady	2	Director	\$	-	\$
Jim Johnson	2	Director	\$	-	\$
Dr. John Causey	2	Director	\$	-	\$
Edgar Stokes	2	Director	\$	-	\$
Andrew Fells	2	Secretary/Director	\$	-	\$
Justin Hart	2	Director	\$	-	\$
Doug Deen	2	Director	\$	-	\$
<u>Indian River County</u>					
Robert Tripson	2	President	\$	-	\$
Sean Sexton	2	Director	\$	-	\$
Sam Tripson	2	Director	\$	-	\$
Gary Pressley	2	Director	\$	-	\$
Tom Hearndon	2	Director	\$	-	\$
Cliffor Tyson	2	Director	\$	-	\$
David Pittman	2	Director	\$	-	\$
Ray Smith	2	Director	\$	-	\$
Cody Platt	2	Director	\$	-	\$

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<u>Jackson County</u>					
Jeffery Pittman	2	President	\$	\$	\$
N/A	2	Vice President	\$	-	-
Larry Warden	2	Secretary	\$	-	-
Hank Floyd	2	Treasurer	\$	-	-
Mack Glass	2	Director	\$	-	-
Albert Milton	2	Director	\$	-	-
Dan Gorbet	2	Director	\$	-	-
Davod Tip,as	2	Director	\$	-	-
Zane Walden	2	Director	\$	-	-
Matt Dryden	2	Director	\$	-	-
Cliff Lamb	2	Director	\$	-	-
Mike Thompson	2	Director	\$	-	-
Larry Ford	2	Director	\$	-	-
Ken Godfrey	2	Director	\$	-	-
<u>Lake County</u>					
Bret Rutzebeck	2	President	\$	-	-
Matt Godwin	2	Vice President	\$	-	-
Linda Bradley	2	Treasurer	\$	-	-
Jimmy Cravey	2	Secretary	\$	-	-
Stephen Strickland	2	Director	\$	-	-
Travis Ward	2	Director	\$	-	-
Jimmy Nussbaumer	2	Director	\$	-	-
Ralph Rodgers	2	Director	\$	-	-
<u>Orange County</u>					
David Ward	2	President	\$	-	-
Cliff Drinkwater	2	Vice President	\$	-	-
Dennis Mudge	2	Secretary	\$	-	-
Fred Dietrich	2	Director	\$	-	-
Paul Linder	2	Director	\$	-	-
Joe Walter	2	Director	\$	-	-
Wade Redditt	2	Director	\$	-	-
Scott Kaylor	2	Director	\$	-	-
Rick Stotler	2	Director	\$	-	-
Doug Simmons	2	Director	\$	-	-
Pat Hughes	2	Director	\$	-	-
Chuck Mack	2	Director	\$	-	-
Timothy Brooks	2	Director	\$	-	-
Gerald Simmons	2	Director	\$	-	-
Mike Patterson	2	Treasurer	\$	-	-
Cecil Tucker	2	Director	\$	-	-
Marty Gray	2	Director	\$	-	-

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<u>Osceola County</u>					
Alan Kelley	2	President	\$	\$	-
JJ White	2	Vice President	\$	-	-
Scott Ramsey	2	Secretary	\$	-	-
Tater Porter	2	Treasurer	\$	-	-
Herb Harbin	2	Director	\$	-	-
Ricky Booth	2	Director	\$	-	-
Doc Platt	2	Director	\$	-	-
Waylon Overstreet	2	Director	\$	-	-
Justin Heberlin	2	Director	\$	-	-
Jeremy Rohde	2	Director	\$	-	-
Steve Whaley	2	Director	\$	-	-
Davod Genho	2	Director	\$	-	-
Chris Fluke	2	Director	\$	-	-
Gibbs Chapmen	2	Director	\$	-	-
<u>Pasco County</u>					
Joey Holloway	2	President	\$	\$	-
John McCarthy	2	Vice President	\$	-	-
Ed Dillard	2	Secretary	\$	-	-
Brian Dillard	2	Treasurer	\$	-	-
Bill Barthle	2	Director	\$	-	-
Stella Barthle	2	Director	\$	-	-
Randy Barthle	2	Director	\$	-	-
Larry Bartle	2	Director	\$	-	-
Ben Barthle	2	Director	\$	-	-
Earl Singletary	2	Director	\$	-	-
Clay Mickler	2	Director	\$	-	-
Kattie Carris	2	Director	\$	-	-
Roger McKendree	2	Director	\$	-	-
Chris Barthle	2	Director	\$	-	-
Brett Meyers	2	Director	\$	-	-
Seth Mann	2	Director	\$	-	-
<u>Sarasota County</u>					
Paul Taylor Jr.	2	President	\$	-	-
Bryan Bartell	2	Vice President	\$	-	-
Steve Rogers	2	2nd Vice President	\$	-	-
Pat Horton	2	Secretary	\$	-	-
Christna Schook	2	Treasurer	\$	-	-

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<u>Seminole County</u>					
Bock Dalrymple	2	President	\$	\$	\$
Greg Corson	2	Vice President	\$	\$	\$
Carol Lightner	2	Secretary	\$	\$	\$
Janet Corson	2	Treasurer	\$	\$	\$
Al Johnson	2	Director	\$	\$	\$
JW Yarbrough	2	Director	\$	\$	\$
Lisa Urban	2	Director	\$	\$	\$
Kevin Albritton	2	Director	\$	\$	\$
<u>St. Lucie County</u>					
Wes Carlton	2	President	\$	\$	\$
Charles Cruse	2	Vice President	\$	\$	\$
Mark Berggren	2	Secretary	\$	\$	\$
Bryan Beaty	2	Treasurer	\$	\$	\$
<u>Sumter County</u>					
Bob Hunt	2	President	\$	\$	\$
Cody Hensley	2	Vice President	\$	\$	\$
Delilah Gwaltney	2	Secretary	\$	\$	\$
Ann Shepherd	2	Treasurer	\$	\$	\$
David Caruthers	2	Director	\$	\$	\$
Mike Revels	2	Director	\$	\$	\$
William Caruthers	2	Director	\$	\$	\$
Jerl Merritt	2	Director	\$	\$	\$
Clay Newcomb	2	Director	\$	\$	\$
Jeanne Young	2	Director	\$	\$	\$
<u>Suwannee County</u>					
Kin Weaver	2	President	\$	\$	\$
Glen Horpht	2	Vice President	\$	\$	\$
Janet Simpson	2	Secretary	\$	\$	\$
Diane Cashmore	2	Treasurer	\$	\$	\$
John Willis	2	Director	\$	\$	\$
<u>Volusia County</u>					
Jeffrey LeFils	2	President	\$	\$	\$
James Evans	2	Vice President	\$	\$	\$
Yancey MacDonald	2	Secretary	\$	\$	\$
Mark Sutton	2	Treasurer	\$	\$	\$
James LeFils	2	Director	\$	\$	\$
David Daugharty	2	Director	\$	\$	\$

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<u>Washington County</u>					
George Fisher	2	President	\$	\$	\$
Clifford White	2	Vice President	\$	-	\$
Jennifer White	2	Secretary	\$	-	\$
Philip Adkison	2	Treasurer	\$	-	\$
Charles Chavers	2	Director	\$	-	\$
Hollis Savell	2	Director	\$	-	\$
Nick Dillard	2	Director	\$	-	\$
Jarod Adkison	2	Director	\$	-	\$
Larry Enfinger	2	Director	\$	-	\$
Allen Corbin	2	Director	\$	-	\$