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**Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

**2011****Open to Public Inspection**Department of the Treasury  
Internal Revenue Service

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.

**A For the 2011 calendar year, or tax year beginning** JULY 1, 2011, and ending JUNE 30, 2012

**B** Check if applicable:  
☐ Address change  
☐ Name change  
☐ Initial return  
☐ Terminated  
☐ Amended return  
☐ Application pending

**C** Name of organization PLANTATION COMMUNITY FOUNDATION  
 Doing Business As PLANTATION COMMUNITY FOUNDATION  
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite  
500 ROCKLEY BLVD. -  
 City or town, state or country, and ZIP + 4  
VENICE, FL 34293

**D** Employer identification number  
65-0056930

**E** Telephone number  
(941) 497-4826

**G** Gross receipts \$ 346,765

**F** Name and address of principal officer:  
LEE WILLIAMS - SAME AS C ABOVE

**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)  
**H(c)** Group exemption number ▶

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

**J** Website: ▶

**K** Form of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

**L** Year of formation 1988 **M** State of legal domicile FLORIDA

**Part I Summary**

**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** 9

**4** Number of independent voting members of the governing body (Part VI, line 1b) . . . . . **4** 9

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

**6** Total number of volunteers (estimate if necessary) . . . . . **6** 300

**7a** Total unrelated business revenue from Part VIII, column (C), line 12 . . . . . **7a** -0-

**b** Net unrelated business taxable income from Form 990-T, line 34 . . . . . **7b** -0-

		Prior Year	Current Year
<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h) . . . . .	<u>82,093</u>	<u>145,859</u>
	<b>9</b> Program service revenue (Part VIII, line 2g) . . . . .	<u>-0-</u>	<u>-0-</u>
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . . . .	<u>94,541</u>	<u>21,110</u>
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . . . .	<u>111,344</u>	<u>98,140</u>
	<b>12</b> Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) . . . . .	<u>287,978</u>	<u>242,889</u>
<b>Expenses</b>	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1–3) . . . . .	<u>100,000</u>	<u>119,080</u>
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4) . . . . .	<u>-0-</u>	<u>-0-</u>
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) . . . . .	<u>46,526</u>	<u>51,115</u>
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e) . . . . .	<u>-0-</u>	<u>-0-</u>
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶		
	<b>17</b> Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e) . . . . .	<u>11,326</u>	<u>14,975</u>
	<b>18</b> Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) . . . . .	<u>157,852</u>	<u>185,170</u>
	<b>19</b> Revenue less expenses. Subtract line 18 from line 12 . . . . .	<u>130,126</u>	<u>57,719</u>
<b>Net Assets or Fund Balances</b>	<b>20</b> Total assets (Part X, line 16) . . . . .	<u>584,713</u>	<u>687,431</u>
	<b>21</b> Total liabilities (Part X, line 26) . . . . .	<u>504</u>	<u>385</u>
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20 . . . . .	<u>584,209</u>	<u>687,046</u>

**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** Lee Williams October 17, 2012  
 Signature of officer Date  
LEE WILLIAMS, PRESIDENT  
 Type or print name and title

**Paid Preparer Use Only**

Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
Firm's name ▶	Firm's EIN ▶			
Firm's address ▶	Phone no			

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

For Paperwork Reduction Act Notice, see the separate instructions.

Cat. No. 11282Y

Form **990** (2011)

SCANNED NOV 08 2012

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**Part III** Statement of Program Service AccomplishmentsCheck if Schedule O contains a response to any question in this Part III ☒**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 ☒ No

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

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

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

**4** Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations 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 \$ )

SEE SCHEDULE O

**4b** (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )**4c** (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )**4d** Other program services (Describe in Schedule O.)  
(Expenses \$ including grants of \$ ) (Revenue \$ )**4e** Total program service expenses **▶** -0-

**Part IV Checklist of Required Schedules**

	Yes	No
<b>1</b> Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A . . . . .	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>2</b> Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? . . . . .	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>3</b> 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 . . . . .	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>4</b> <b>Section 501(c)(3) organizations.</b> 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 . . . . .	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>5</b> 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 . . . . .	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>6</b> 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 . . . . .	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>7</b> 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 . . . . .	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III . . . . .	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>9</b> 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 . . . . .	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>10</b> 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 . . . . .	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>11</b> 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.		
<b>a</b> Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI . . . . .	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>b</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 . . . . .	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>c</b> 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 . . . . .	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>d</b> 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 . . . . .	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X . . . . .	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>f</b> 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 . . . . .	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>12 a</b> Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII . . . . .	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>b</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 . . . . .	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E . . . . .	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>14 a</b> Did the organization maintain an office, employees, or agents outside of the United States? . . . . .	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>b</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 . . . . .	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>15</b> 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 . . . . .	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>16</b> 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 . . . . .	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>17</b> 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) . . . . .	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>18</b> 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 . . . . .	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>19</b> 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 . . . . .	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>20 a</b> Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . . . .	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>

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

	Yes	No
<b>21</b> 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? <i>If "Yes," complete Schedule I, Parts I and II . . . . .</i>		X
<b>22</b> Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III . . . . .</i>		X
<b>23</b> 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? <i>If "Yes," complete Schedule J . . . . .</i>		X
<b>24a</b> Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25 . . . . .</i>		X
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . . .		
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? . . . . .		
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . . . .		
<b>25a</b> <b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I . . . . .</i>		X
<b>b</b> Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I . . . . .</i>		X
<b>26</b> Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II . . . . .</i>		X
<b>27</b> 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? <i>If "Yes," complete Schedule L, Part III . . . . .</i>		X
<b>28</b> Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
<b>a</b> A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV . . . . .</i>		X
<b>b</b> A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV . . . . .</i>		X
<b>c</b> 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? <i>If "Yes," complete Schedule L, Part IV . . . . .</i>		X
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M . . . . .</i>	X	
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M . . . . .</i>		X
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I . . . . .</i>		X
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II . . . . .</i>		X
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I . . . . .</i>		X
<b>34</b> Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 . . . . .</i>		X
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)? . . . . .		X
<b>b</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)? <i>If "Yes," complete Schedule R, Part V, line 2 . . . . .</i>		X
<b>36</b> <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2 . . . . .</i>		X
<b>37</b> Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI . . . . .</i>		X
<b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O . . . . .	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
<b>1a</b>	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	<input type="text" value="0"/>	
<b>1b</b>	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	<input type="text" value="0"/>	
<b>c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	<input checked="" type="checkbox"/>	
<b>2a</b>	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	<input type="text" value="2"/>	
<b>b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	<input checked="" type="checkbox"/>	
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year?		<input checked="" type="checkbox"/>
<b>b</b>	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		N/A
<b>4a</b>	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		<input checked="" type="checkbox"/>
<b>b</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.		
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		<input checked="" type="checkbox"/>
<b>b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		<input checked="" type="checkbox"/>
<b>c</b>	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
<b>6a</b>	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	<input checked="" type="checkbox"/>	
<b>b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	<input checked="" type="checkbox"/>	
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
<b>a</b>	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	<input checked="" type="checkbox"/>	
<b>b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided?	<input checked="" type="checkbox"/>	
<b>c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		<input checked="" type="checkbox"/>
<b>d</b>	If "Yes," indicate the number of Forms 8282 filed during the year	<input type="text" value="7d"/>	
<b>e</b>	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		<input checked="" type="checkbox"/>
<b>f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		<input checked="" type="checkbox"/>
<b>g</b>	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		N/A
<b>h</b>	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		N/A
<b>8</b>	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		N/A
<b>9</b>	<b>Sponsoring organizations maintaining donor advised funds.</b>		
<b>a</b>	Did the organization make any taxable distributions under section 4966?		N/A
<b>b</b>	Did the organization make a distribution to a donor, donor advisor, or related person?		N/A
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter:		
<b>a</b>	Initiation fees and capital contributions included on Part VIII, line 12	<input type="text" value="10a"/>	
<b>b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	<input type="text" value="10b"/>	
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter:		N/A
<b>a</b>	Gross income from members or shareholders	<input type="text" value="11a"/>	
<b>b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	<input type="text" value="11b"/>	
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?		N/A
<b>b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	<input type="text" value="12b"/>	
<b>13</b>	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>		
<b>a</b>	Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O.		N/A
<b>b</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	<input type="text" value="13b"/>	
<b>c</b>	Enter the amount of reserves on hand	<input type="text" value="13c"/>	
<b>14a</b>	Did the organization receive any payments for indoor tanning services during the tax year?		<input checked="" type="checkbox"/>
<b>b</b>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		

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

**Section A. Governing Body and Management**

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

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

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

**Section C. Disclosure**

**17** List the states with which a copy of this Form 990 is required to be filed ► SEE SCHEDULE O

**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: ► MAUREEN HOUDE-ADDRESS AND PHONE NUMBER ON PAGE 1

**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 organization 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			
SEE SCHEDULE O										
(1) LEE WILLIAMS PRESIDENT	8	X		X				-0-	-0-	-0-
(2) NOAMAN HILL TREASURER	8	X		X				-0-	-0-	-0-
(3) CHERYL MCAVOY FIRST VICE PRESIDENT	8	X		X				-0-	-0-	-0-
(4) MARSHA AMBROSE VICE PRES.- SECRETARY	8	X		X				-0-	-0-	-0-
(5) LISA HARTUNG VICE PRESIDENT	8	X		X				-0-	-0-	-0-
(6) JOANNE KRASKA VICE PRESIDENT	8	X		X				-0-	-0-	-0-
(7) DONALD MACVICAR VICE PRESIDENT	8	X		X				-0-	-0-	-0-
(8) JUDY THUER VICE PRESIDENT	8	X		X				-0-	-0-	-0-
(9) TERRY WILLIAMSON VICE PRESIDENT	8	X		X				-0-	-0-	-0-
(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)										
<b>1b Sub-total</b>								-0-	-0-	-0-
<b>c Total from continuation sheets to Part VII, Section A</b>								N/A	N/A	N/A
<b>d Total (add lines 1b and 1c)</b>								-0-	-0-	-0-

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

**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

	Yes	No
<b>3</b>		X

**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

<b>4</b>		X
----------	--	---

**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

<b>5</b>		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
NONE		

**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 ▶ ZERO

**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
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1a</b>	Federated campaigns . . . . .	<b>1a</b> - 0 -				
	<b>b</b>	Membership dues . . . . .	<b>1b</b> 65,903				
	<b>c</b>	Fundraising events . . . . .	<b>1c</b> - 0 -				
	<b>d</b>	Related organizations . . . . .	<b>1d</b> - 0 -				
	<b>e</b>	Government grants (contributions)	<b>1e</b> - 0 -				
	<b>f</b>	All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b> 79,956				
	<b>g</b>	Noncash contributions included in lines 1a-1f: \$	69,120				
	<b>h</b>	<b>Total.</b> Add lines 1a-1f . . . . . ▶			145,859		
<b>Program Service Revenue</b>	<b>2a</b>	NONE	<b>Business Code</b>				
	<b>b</b>						
	<b>c</b>						
	<b>d</b>						
	<b>e</b>						
	<b>f</b>	All other program service revenue . . . . .					
	<b>g</b>	<b>Total.</b> Add lines 2a-2f . . . . . ▶					
<b>Other Revenue</b>	<b>3</b>	Investment income (including dividends, interest, and other similar amounts) . . . . . ▶		<1,110>			
	<b>4</b>	Income from investment of tax-exempt bond proceeds ▶					
	<b>5</b>	Royalties . . . . . ▶					
		(i) Real	(ii) Personal				
	<b>6a</b>	Gross rents . . . . .					
	<b>b</b>	Less: rental expenses . . . . .					
	<b>c</b>	Rental income or (loss) . . . . .					
	<b>d</b>	Net rental income or (loss) . . . . . ▶					
	<b>7a</b>	(i) Securities	(ii) Other				
		Gross amount from sales of assets other than inventory . . . . .					
	<b>b</b>	Less: cost or other basis and sales expenses . . . . .					
	<b>c</b>	Gain or (loss) . . . . .					
	<b>d</b>	Net gain or (loss) . . . . . ▶					
	<b>8a</b>	Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 . . . . . <b>a</b> 202,016		98,140			
	<b>b</b>	Less: direct expenses . . . . . <b>b</b> 103,876					
	<b>c</b>	Net income or (loss) from fundraising events . . . . . ▶					
	<b>9a</b>	Gross income from gaming activities. See Part IV, line 19 . . . . . <b>a</b>					
	<b>b</b>	Less: direct expenses . . . . . <b>b</b>					
	<b>c</b>	Net income or (loss) from gaming activities . . . . . ▶					
	<b>10a</b>	Gross sales of inventory, less returns and allowances . . . . . <b>a</b>					
<b>b</b>	Less: cost of goods sold . . . . . <b>b</b>						
<b>c</b>	Net income or (loss) from sales of inventory . . . . . ▶						
	Miscellaneous Revenue		<b>Business Code</b>				
<b>11a</b>	NONE						
<b>b</b>							
<b>c</b>							
<b>d</b>	All other revenue . . . . .						
<b>e</b>	<b>Total.</b> Add lines 11a-11d . . . . . ▶						
<b>12</b>	<b>Total revenue.</b> See instructions. . . . . ▶			242,889	- 0 -	- 0 -	- 0 -

**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
<b>1</b> Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	119,080			
<b>2</b> Grants and other assistance to individuals in the United States. See Part IV, line 22				
<b>3</b> Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
<b>4</b> Benefits paid to or for members				
<b>5</b> Compensation of current officers, directors, trustees, and key employees				
<b>6</b> Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
<b>7</b> Other salaries and wages	47,038		47,038	
<b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
<b>9</b> Other employee benefits				
<b>10</b> Payroll taxes	4,077		4,077	
<b>11</b> Fees for services (non-employees):				
<b>a</b> Management				
<b>b</b> Legal				
<b>c</b> Accounting				
<b>d</b> Lobbying				
<b>e</b> Professional fundraising services. See Part IV, line 17				
<b>f</b> Investment management fees				
<b>g</b> Other	200		200	
<b>12</b> Advertising and promotion	5,740		5,740	
<b>13</b> Office expenses	5,115		5,115	
<b>14</b> Information technology	369		369	
<b>15</b> Royalties				
<b>16</b> Occupancy	1,200		1,200	
<b>17</b> Travel				
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials				
<b>19</b> Conferences, conventions, and meetings				
<b>20</b> Interest				
<b>21</b> Payments to affiliates				
<b>22</b> Depreciation, depletion, and amortization	223		223	
<b>23</b> Insurance	836		836	
<b>24</b> 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.)				
<b>a</b> HUGGY BEAR MATERIALS	452		452	
<b>b</b> MISC. SUPPLIES	840		840	
<b>c</b>				
<b>d</b>				
<b>e</b> All other expenses				
<b>25</b> Total functional expenses. Add lines 1 through 24e	185,170	-0-	66,090	-0-
<b>26</b> Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

**Part X Balance Sheet**

		(A) Beginning of year		(B) End of year
<b>Assets</b>	1 Cash—non-interest-bearing . . . . .	72,551	1	38
	2 Savings and temporary cash investments . . . . .	6,608	2	69,299
	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 . . . . .	355	9	-0-
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D . . . . .	10a 10,803		
	b Less: accumulated depreciation . . . . .	10b 10,803	10c	-0-
	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 . . . . .	505,006	15	618,094
16 <b>Total assets.</b> Add lines 1 through 15 (must equal line 34) . . . . .	584,713	16	687,431	
<b>Liabilities</b>	17 Accounts payable and accrued expenses . . . . .	504	17	385
	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 <b>Total liabilities.</b> Add lines 17 through 25 . . . . .	504	26	385
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b>			
	27 Unrestricted net assets . . . . .		27	
	28 Temporarily restricted net assets . . . . .		28	
	29 Permanently restricted net assets . . . . .		29	
	<b>Organizations that do not follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 30 through 34.</b>			
	30 Capital stock or trust principal, or current funds . . . . .	-0-	30	-0-
	31 Paid-in or capital surplus, or land, building, or equipment fund . . . . .	-0-	31	-0-
	32 Retained earnings, endowment, accumulated income, or other funds . . . . .	-0-	32	-0-
	33 <b>Total net assets or fund balances . . . . .</b>	584,713	33	687,431
	34 <b>Total liabilities and net assets/fund balances . . . . .</b>	585,217	34	687,816

**Part XI Reconciliation of Net Assets**Check if Schedule O contains a response to any question in this Part XI ☒

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12) . . . . .	<b>1</b>	242,889
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25) . . . . .	<b>2</b>	185,170
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1 . . . . .	<b>3</b>	57,719
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . . . . .	<b>4</b>	584,713
<b>5</b>	Other changes in net assets or fund balances (explain in Schedule O) . . . . .	<b>5</b>	45,000
<b>6</b>	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B)) . . . . .	<b>6</b>	687,432

**Part XII Financial Statements and Reporting**Check if Schedule O contains a response to any question in this Part XII ☒

	Yes	No
<b>1</b> Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
<b>2a</b> Were the organization's financial statements compiled or reviewed by an independent accountant? . . . . .		X
<b>b</b> Were the organization's financial statements audited by an independent accountant? . . . . .		X
<b>c</b> 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.		
<b>d</b> 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 <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
<b>3a</b> As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? . . . . .		X
<b>b</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		

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

Department of the Treasury  
Internal Revenue Service

**Public Charity Status and Public Support**

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

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

**2011**

**Open to Public Inspection**

Name of the organization

PLANTATION COMMUNITY FOUNDATION

Employer identification number

65-0056930

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

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

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

(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?	Yes	No
(ii) A family member of a person described in (i) above?	11g(ii)	
(iii) A 35% controlled entity of a person described in (i) or (ii) above?	11g(iii)	
  - h Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
<b>Total</b>									

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

Cat. No 11285F

Schedule A (Form 990 or 990-EZ) 2011

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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . . . .						
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . .						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge . . . . .						
<b>4 Total.</b> Add lines 1 through 3 . . . . .						
<b>5</b> The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) . . . . .						
<b>6 Public support.</b> Subtract line 5 from line 4.						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
<b>7</b> Amounts from line 4 . . . . .						
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . . . .						
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on . . . . .						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) . . . . .						
<b>11 Total support.</b> Add lines 7 through 10						
<b>12</b> Gross receipts from related activities, etc. (see instructions) . . . . .					<b>12</b>	
<b>13 First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> . . . . .						<input type="checkbox"/>

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

<b>14</b> Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f)) . . . . .	<b>14</b>	%
<b>15</b> Public support percentage from 2010 Schedule A, Part II, line 14 . . . . .	<b>15</b>	%
<b>16a 33 1/3% support test—2011.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization . . . . .		<input type="checkbox"/>
<b>b 33 1/3% support test—2010.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization . . . . .		<input type="checkbox"/>
<b>17a 10%-facts-and-circumstances test—2011.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . .		<input type="checkbox"/>
<b>b 10%-facts-and-circumstances test—2010.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . .		<input type="checkbox"/>
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions . . . . .		<input type="checkbox"/>

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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	86,656	75,545	72,097	82,093	145,859	462,250
<b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose . . . . .	195,637	216,035	177,560	220,661	202,016	1,011,909
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513	-0-	-0-	-0-	-0-	-0-	-0-
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . .	-0-	-0-	-0-	-0-	-0-	-0-
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge . . . . .	-0-	-0-	-0-	-0-	-0-	-0-
<b>6 Total.</b> Add lines 1 through 5 . . . . .	282,293	291,580	249,657	302,754	347,875	1,474,159
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons . . . . .	-0-	-0-	-0-	-0-	-0-	-0-
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year . . . . .	-0-	-0-	-0-	-0-	-0-	-0-
<b>c</b> Add lines 7a and 7b . . . . .	-0-	-0-	-0-	-0-	-0-	-0-
<b>8 Public support</b> (Subtract line 7c from line 6.) . . . . .						1,474,159

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
<b>9</b> Amounts from line 6 . . . . .	282,293	291,580	249,657	302,754	347,875	1,474,159
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . . . .	10,930	5,443	4,838	8,055	7,504	36,770
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 . . . . .	-0-	-0-	-0-	-0-	-0-	-0-
<b>c</b> Add lines 10a and 10b . . . . .	10,930	5,443	4,838	8,055	7,504	36,770
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on . . . . .	-0-	-0-	-0-	-0-	-0-	-0-
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) . . . . .	-0-	-0-	-0-	-0-	-0-	-0-
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.) . . . . .	293,223	297,023	254,495	310,809	355,379	1,510,929
<b>14 First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> . . . . . <input type="checkbox"/>						

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

<b>15</b> Public support percentage for 2011 (line 8, column (f) divided by line 13, column (f)) . . . . .	<b>15</b>	97.57	%
<b>16</b> Public support percentage from 2010 Schedule A, Part III, line 15 . . . . .	<b>16</b>	96.96	%

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

<b>17</b> Investment income percentage for <b>2011</b> (line 10c, column (f) divided by line 13, column (f)) . . . . .	<b>17</b>	2.43	%
<b>18</b> Investment income percentage from <b>2010</b> Schedule A, Part III, line 17 . . . . .	<b>18</b>	3.04	%
<b>19a 33 1/3% support tests—2011.</b> If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization . . . . . <input checked="" type="checkbox"/>			
<b>b 33 1/3% support tests—2010.</b> If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization . . . . . <input type="checkbox"/>			
<b>20 Private foundation.</b> If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions . . . . . <input type="checkbox"/>			

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

This information relates to Part III of Schedule A.

The amount shown in Section A, Line 1(e) [\$145,859] comes from Form 990, Part VIII, Line 1h.

The amount shown in Section A, Line 2(e) [\$202,016] comes from Schedule G, Part II, Line 1.

The amount shown in Section B, Line 10a(e) [\$7,504] comes from the Annual Report (Report of the Treasurer), from Other Revenues and Income on the line labeled "Interest, Dividends & Other Income". A copy of the Annual Report is attached to this Form 990.

**SCHEDULE D**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Financial Statements**

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

OMB No. 1545-0047

**2011**

**Open to Public  
Inspection**

Name of the organization

PLANTATION COMMUNITY FOUNDATION

Employer identification number

65-0056930

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

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

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

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

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

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

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

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

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

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

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

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

9 In Part 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 . . . . . ► \$

b Assets included in Form 990, Part X . . . . . ► \$

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

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

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

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

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

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

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

**b** If "Yes," explain the arrangement in Part XIV and complete the following table:

	Amount
<b>c</b> Beginning balance	<b>1c</b>
<b>d</b> Additions during the year	<b>1d</b>
<b>e</b> Distributions during the year	<b>1e</b>
<b>f</b> Ending balance	<b>1f</b>

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

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

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

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

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

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

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

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

	Yes	No
(i) unrelated organizations	<b>3a(i)</b>	
(ii) related organizations	<b>3a(ii)</b>	
<b>b</b> If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	<b>3b</b>	

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

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
<b>1a</b> Land				
<b>b</b> Buildings				
<b>c</b> Leasehold improvements				
<b>d</b> Equipment	6,517	-0-	6,517	-0-
<b>e</b> Other	4,286	-0-	4,286	-0-
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				-0-

**Part VII Investments—Other Securities.** See Form 990, Part X, line 12.

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

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

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col (B) line 13.) ►		

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

(a) Description	(b) Book value
(1) LONG TERM RECEIVABLES - EQUITY DONATIONS	\$ 114,240
(2)	
(3) ENDOWMENT FUND BALANCE AT 6-30-2012	503,854
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col (B) line 15.) . . . . . ►	

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col (B) line 25.) ►	

**2. FIN 48 (ASC 740) Footnote.** In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

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

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

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

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

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

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

**Part XIV Supplemental Information**

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, 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.

*Explanation for Part VI.*

*These amounts come from the attached Trial Balance dated June 30, 2012.*

*These amounts are from Accounts 1640, 1645, 1745 and 1750. All of these assets at 6-30-2012 were fully depreciated.*

*Explanation for Part IX.*

*These two amounts come from the attached Trial Balance, Accounts 1500 and 1950. Accounts 1500 (Long Term*

**Part XIV Supplemental Information (continued)**

Receivables - Equity Donations) and 2450 (Deferred Equity Donations) were established in FY 2012 as a way to account for these equity donations from members for their equity in the Plantation Golf and Country Club, which is an unrelated organization.

This program was initiated in FY 2011 and the Form 990, Schedule B, Part 1 for FY 2011 showed one such donation for \$23,500. This Foundation is directed by unpaid volunteers and these people did not realize at that time that accounts should have been set up on the books to show this type of donation. This error was rectified during FY 2012. When setting up these accounts it was also realized that a second donation was also received in FY 2011 for an additional \$21,600. This donation was from:

Richard Waters  
767 Harrington Lake Drive N.  
Venice, FL 34293

When you add these two prior donations to the three amounts shown on the FY 2012 Schedule B, Part 1, all five donations equal \$114,220. The Trial Balance shows \$114,240, so a \$20 error was made by the volunteer who directed this Journal Entry.

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

Department of the Treasury  
Internal Revenue Service

**Supplemental Information Regarding  
Fundraising or Gaming Activities**

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.  
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No. 1545-0047

**2011**

Open to Public  
Inspection

Name of the organization

PLANTATION COMMUNITY FOUNDATION

Employer identification number

65-0056930

**Part I**

**Fundraising Activities.** Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

Form 990-EZ filers are not required to complete this part.

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

- |  |   |
|--|---|
| <b>a</b> <input checked="" type="checkbox"/> Mail solicitations      | <b>e</b> <input type="checkbox"/> Solicitation of non-government grants |
| <b>b</b> <input type="checkbox"/> Internet and email solicitations   | <b>f</b> <input type="checkbox"/> Solicitation of government grants     |
| <b>c</b> <input checked="" type="checkbox"/> Phone solicitations     | <b>g</b> <input checked="" type="checkbox"/> Special fundraising events |
| <b>d</b> <input checked="" type="checkbox"/> In-person solicitations |   |

**2a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ Yes ☒ No

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

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

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

FLORIDA

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

		(a) Event #1 CELEB, GOLF TOUR (event type)	(b) Event #2 ROYAL RIDE (event type)	(c) Other events THREE (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	1 Gross receipts . . . . .	94,342	56,766	50,908	202,016
	2 Less: Charitable contributions . . . . .	-0-	-0-	-0-	-0-
	3 Gross income (line 1 minus line 2) . . . . .	94,342	56,766	50,908	202,016
Direct Expenses	4 Cash prizes . . . . .	1,450	1,195	100	2,745
	5 Noncash prizes . . . . .	13,240	7,360	1,252	21,852
	6 Rent/facility costs . . . . .	4,100	2,801	1,350	8,251
	7 Food and beverages . . . . .	26,830	16,662	14,740	58,232
	8 Entertainment . . . . .	2,822	-0-	1,862	4,684
	9 Other direct expenses . . . . .	99	1,126	6,887	8,112
	10 Direct expense summary. Add lines 4 through 9 in column (d) . . . . .	45,801	27,622	24,717	(103,876)
	11 Net income summary. Combine line 3, column (d), and line 10 . . . . .				98,140
		NET INCOME			

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

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

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

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

b If "No," explain:

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

b If "Yes," explain:

- 11** Does the organization operate gaming activities with nonmembers? ☐ Yes ☐ No
- 12** Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No
- 13** Indicate the percentage of gaming activity operated in:
- |                                      |            |   |
|--------------------------------------|------------|---|
| <b>a</b> The organization's facility | <b>13a</b> | % |
| <b>b</b> An outside facility         | <b>13b</b> | % |
- 14** Enter the name and address of the person who prepares the organization's gaming/special events books and records.

Name ►

Address ►

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

Name ►

Address ►

**16** Gaming manager information:

Name ►

Gaming manager compensation ► \$

Description of services provided ►

☐ Director/officer☐ Employee☐ Independent contractor**17** Mandatory distributions.

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

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

SEE SCHEDULE 0

**SCHEDULE M  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

Name of the organization

**Noncash Contributions**

► Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.  
► Attach to Form 990.

OMB No 1545-0047

**2011**

Open To Public  
Inspection

**PLANTATION COMMUNITY FOUNDATION**

Employer identification number  
**65-0056930**

**Part I Types of Property**

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art . . . . .				
2 Art—Historical treasures . . . . .				
3 Art—Fractional interests . . . . .				
4 Books and publications . . . . .				
5 Clothing and household goods . . . . .				
6 Cars and other vehicles . . . . .				
7 Boats and planes . . . . .				
8 Intellectual property . . . . .				
9 Securities—Publicly traded . . . . .				
10 Securities—Closely held stock . . . . .				
11 Securities—Partnership, LLC, or trust interests . . . . .				
12 Securities—Miscellaneous . . . . .				
13 Qualified conservation contribution—Historic structures . . . . .				
14 Qualified conservation contribution—Other . . . . .				
15 Real estate—Residential . . . . .				
16 Real estate—Commercial . . . . .				
17 Real estate—Other . . . . .				
18 Collectibles . . . . .				
19 Food inventory . . . . .				
20 Drugs and medical supplies . . . . .				
21 Taxidermy . . . . .				
22 Historical artifacts . . . . .				
23 Scientific specimens . . . . .				
24 Archeological artifacts . . . . .				
25 Other ► (EQUITY DONATIONS) . . . . .	X	THREE	\$69,120	FMV-AMOUNT TO BE RECEIVED.
26 Other ► ( ) . . . . .				
27 Other ► ( ) . . . . .				
28 Other ► ( ) . . . . .				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . . . **29 THREE**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1–28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? . . . . .		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? . . . . .		X
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? . . . . .		X
b If "Yes," describe in Part II.		
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

**Part II Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

These Equity Donations are fully described in Schedules B and D which are part of this tax return. The Plantation Community Foundation will not accept any donations that are not expected to be used by the Foundation or redeemed in cash for their full face value in subsequent years.

Part IV of Form 8283 (Donee Acknowledgment) would have been executed if provided by the Donee.

All of the officers are volunteers and they turn over on a very regular basis. When the cash is received for one of these Equity Donations the current instructions will be reviewed and a decision will be made by the then current officers on filing the Form 8282. Per IRS Instructions for this Form, a Form 8282 does not have to be filed if the item is consumed or distributed for a charitable purpose.

The only reason that these donations were accepted was so that the cash received by the Plantation Community Foundation would be distributed as Grants to needy IRC Section 501(c)(3) organizations as approved by the Grant Committee.

**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.

OMB No 1545-0047

**2011**

**Open to Public  
Inspection**

Name of the organization

PLANTATION COMMUNITY FOUNDATION

Employer identification number

65-0056930

This Schedule O has two purposes. The first is to provide a complete explanation of every entry to any IRS personnel who may happen to review or audit this Form 990. The second reason is to provide a guide to the unpaid volunteer who gets to fill out and file this return next year. Every attempt has been made to "Fully Disclose" everything on this tax return.

This Form 990 was filled out by an unpaid volunteer who served as last year's Treasurer, filed last year's tax return and was asked to do this again by this year's Board. Since he is no longer an officer and no longer lives in the area, he is not authorized to sign it, even though he has full confidence that it has been correctly prepared.

**Form 990, Item G, Gross Receipts.**

The Form 990 instructions are now 90 pages long and this does not count the instructions for all of the Schedules which are also required. The entry for this item is described on Page 9 of these instructions. The \$346,765 comes, per the instructions, from adding together lines 8b and 12 from Part VIII of this Form 990.

**Form 990, Part I, Line 1.**

Attached is a copy of the Plantation Community Foundation's Annual Report for 2012. The Mission Statement can be found here and it states:

“The Foundation supports agencies engaged in social services, health, cultural enrichment, education and the environment. The Foundation accepts grant applications from agencies which serve South Sarasota County residents and which meet IRS Code Section 501(c)(3) requirements.”

All of the Foundation’s activities are clearly shown in the attached Annual Report.

**Form 990, Part III. Line1.**

Why the Internal Revenue Service is immediately asking us again to describe our Mission a second time is very hard to understand and seems quite dumb. Please refer to the above paragraph.

On Page 2 of the instructions for the Form 990 is a section entitled “Purpose of Form”. It specifically says “how the public perceives an organization...can be determined by information presented on its return.” Likewise, the public’s perception of the Internal Revenue Service can also be perceived by the idiotic rules that they apply to absolutely “plain vanilla” foundations such as ours. It makes no sense that the IRS has changed their rules and now require a foundation such as ours to file the exact returns and schedules as the largest foundations in the country are required to file.

**Form 990, Part III, Line 4a.**

A copy of the 2012 Annual Report is attached. It shows all 41 of the IRC Section 501(c)(3) organizations that received Grants from us during this fiscal year. As shown, on the Annual Report, the net amount of Grants distributed was \$119,080. The largest of these 41 Grants was for \$7,335 and the smallest was for \$500. The purpose of each Grant is also shown in the Annual Report. As noted, all recipients had been given IRC Section 501(c)(3) status by the Internal Revenue Service.

Before any Grants are approved a member of the Grants Committee personally visits the organization so that the Grants Committee is able to accurately judge the actual need.

Like the Directors, all Grants Committee personnel are retired unpaid volunteers who have absolutely no connection to any of the organizations that they review to judge the worthiness of their needs compared to all of the other areas of need in our community.

The Form 990 instructions on Page 10 are not completely clear. The money to pay these Grants is raised thru various fund raising events as well as annual membership donations of \$125. The three biggest fund raisers for FY 2012 were the Celebrity Gold Classic, the Royal Ride and Something Different. The total income for all of the events is shown in the attached Annual Report. This Annual

Report also lists all of the individuals who paid annual donations of \$125. The many volunteers for the various fund raising events usually come from this membership list.

The various fund raising activities earned \$203,348 of Gross Receipts which were offset by \$105,204 of expenses for a net fund raising income of \$98,144.

Other than two clerical positions which are part time, no salaries or any other kind of payments are given to anyone who is involved in the Foundation. The expenses that are incurred are all of a type that anyone would associate with these kinds of activities.

We have a small office which we rent for \$100 a month, out of which all Foundation functions are carried out. The entire concept of "Program Service Accomplishments" does not relate to a small Foundation such as the Plantation Community Foundation.

**Form 990, Part VI, Section A, Lines 1a, 6 and 7a.**

The members of the Foundation are those individuals and families who pay the \$125 annual membership donations. All "elected" positions have to put in a lot of time, so there are no real elections. We often have trouble finding volunteers to fill all of our positions, so the concept referred to in this Form is not valid for our organization.

**Form 990, Part VI, Section B, Line 11b.**

Like the current Treasurer, all of our volunteers are unpaid retirees with basically no background in exempt organization tax law. This return was passed around and all Directors had a chance to look at it and ask any questions they may have had to the volunteer Treasurer. No changes were required.

If the Foundation had paid someone thousands of dollars to make up and file this return we would have had to cut back on the Grants which we distributed in our community. We would rather help the needy in our community than pay large tax preparation fees to fill out bureaucratic forms that do not benefit anyone except those paid to process them.

**Form 990, Part VI, Section C, Lines 17 and 19.**

Every year the Foundation pays a fee and registers with the Florida Department of State, Division of Corporations. As far as we can determine, a copy of our Form 990 has never been requested by the State of Florida.

All Foundation documents are open for inspection in our office during normal office hours. We do not have our own website.

**Form 990, Part VII, Section A.**

The average hours per week is a quick guess. Since no one is being paid this statistic has no real meaning in the case of our Foundation.

**Form 990, Part VIII.**

Attached is a copy of the Foundation's June 30, 2012 Trial Balance, which is the basis for the amounts shown on this return.

So that there are no future questions concerning where the various amounts came from, they will all be reconciled to the Trial Balance.

Line 1b (\$65,903) comes from Trial Balance Account 5210.

Line 1f (\$79,956) comes from Trial Balance Accounts 4010, 4230, 5830, 5840 and the three amounts shown on Schedule B.

Line 1g (\$69,120) comes from the three amounts shown on Schedule B.

Line 3 (-\$1,110) comes from Trial Balance Accounts 5310, 5320 and 6820.

Line 8 amounts come from Schedule G.

**Form 990, Part IX.**

These amounts also come from the Trial Balance and line by line references will be given here.

Line 1 (\$119,080) comes from Account 3020.

Line 7 (\$47,038) comes from Account 7220.

Line 10 (\$4,077) comes from Account 7250.

Line 11g (\$200) comes from Account 7530.

Line 12 (\$5,740) comes from Account 8170.

Line 13 (\$5,115) comes from Accounts 8120, 8140, 8141, and 8515.

Line 14 (\$369) comes from Account 7520.

Line 16 (\$1,200) comes from Account 8210.

Line 22 (\$223) comes from Account 8410.

Line 23 (\$836) comes from Account 8520.

Line 24 (\$452 and \$840) come from Account 8110.

The “Huggy Bears” should be explained here. They are similar to small teddy bears and are made up by our volunteers who are given the raw materials (paid for by the

Foundation) and turn in finished “Huggy Bears”. These “Huggy Bears” are then given to our local Emergency Room and Ambulances so that if a small child is encountered they can be given something to embrace that is cuddly in their scary situation. These are distributed free - no money is accepted.

### **Form 990, Part X.**

The amounts in Column A (Beginning of year) all come from last year’s tax return. The amounts in Column B (End of year) are referenced below.

Line 1 (\$38) comes from Account 1090.

Line 2 (\$69,299) comes from Accounts 1010, 1020, 1030 and 1040.

Lines 10 a & b (\$10,803) come from Accounts 1640, 1645, 1745 and 1750.

Line 15 (\$618,094) comes from Schedule D, Part IX.

Line 17 (\$385) comes from Account 2021.

### **Form 990, Part XI.**

Line 5 (\$45,000) is a reference to the non cash contributions that were received last year and not properly booked until this year. This year’s contributions are shown on Schedule B. A full explanation is given in Schedule D,

Part XIV, Supplemental Information, which explains the amounts shown in Schedule D, Part IX, Other Assets. Additional information is also furnished in Schedule M, Part II.

### **Schedule A.**

In Schedule A, Part I we checked Line 9 since our Determination Letter says that we are a public charity under IRC Section 509(a)(2).

The source of the amounts shown on Schedule A, Part III in Column (e) are explained in Schedule A, Part IV, Supplemental Information. The prior year data came from this same schedule on last year's return.

### **Schedule D.**

The amounts shown in Part VI come from Trial Balance Accounts 1640, 1645, 1745 and 1750. The amounts shown in Part IX come from Trial Balance Accounts 1500 and 1950.

Account 1950 is our investments which are managed by the Gulf Coast Community Foundation. They are a very large IRC Section 501(c)(3) organization that manages hundreds of millions of dollars for themselves and other

smaller organizations such as ours. For our reporting purposes, their 50 basis point fee is netted with our investment results.

In Part XIV (Supplemental Information) our Deferred Equity Program is discussed in detail.

### **Schedule G, Part II.**

The amounts shown in Column (d) reconcile to the Trial Balance.

The amount on Line 1(d) (\$202,016) comes from Trial Balance Accounts 4020, 5810, 5812, 5813, 5814, 5816 and 5820.

The amount on Line 4(d) (\$2,745) comes from Trial Balance Account 8534.

The amount on Line 5(d) (\$21,852) comes from Trial Balance Accounts 8530 and 8538.

The amount on Line 6(d) (\$8,251) comes from Trial Balance Accounts 8260 and 8130.

The amount on Line 7(d) (\$58,232) comes from Trial Balance Account 8320.

The amount on Line 8(d) (\$4,684) comes from Trial Balance Accounts 7540 and 8540.

The amount on Line 9(d) (\$8,112) comes from Trial Balance Accounts 8310, 8537 and 8570.

The “Net Income” information added between Lines 9 and 10 comes from the Annual Report.

**Schedule M, Part II, Supplemental Information.**

Since Schedule M deals with the Equity Donations we have received, some final information is given on these donations.

3:28 PM

10/17/12

Accrual Basis

# Plantation Community Foundation

## Trial Balance

### As of June 30, 2012

	Jun 30, 12	
	Debit	Credit
1010 · BoA Checking (9146)	6,289.52	
1020 · BoA Savings (4371)	41,665.36	
1030 · BoA Savings - Honor/Mem (4030)	14,045.28	
1040 · BoA Savings - RR lottery (2787)	7,299.42	
1080 · Certificates of Deposit	0.00	
1090 · Petty Cash	37.95	
1201 · *Accounts Receivable	0.00	
1101 · Accounts Receivable	0.00	
1450 · Prepaid Insurance	0.00	
1455 · Prepaid Event Expense	0.00	
1499 · Undeposited Funds	0.00	
1640 · Furniture & Fixtures	6,517.33	
1645 · Vehicles	4,286.00	
1745 · Accum deprec- furn,fix,equip		6,517.33
1750 · Accum deprec - vehicles		4,286.00
1500 · Long-term Rec/Equity Donations	114,240.00	
1950 · Endowment Fund	503,854.20	
2010 · Accounts Payable	0.00	
Payroll Liabilities:FL Unemployment Tax	0.00	
2011 · Accounts Payable - Contra	0.00	
2021 · Payroll Taxes Payable		384.60
2150 · Accrued Expenses	0.00	
2160 · Honor & Memorial Fund	0.00	
2350 · Deferred Event Income	0.00	
2450 · Deferred Equity/Donations		114,240.00
3001 · Fund Balance BOY		591,108.29
3010 · Increase in Fund Balance	6,900.06	
3020 · Grants Distributed	119,080.00	
4010 · Contributions Honor/Memorial		7,330.00
4020 · Event Sponsors		50,280.00
4230 · Contributions Endowment Fund		1,156.50
5210 · Membership Donations		65,903.00
5310 · Interest Income - Savings		42.85
5320 · Dividends & Interest-Endowment		6,629.18
5810 · Admissions/F&B		34,760.00
5812 · Cash Raffles - Net		7,710.00
5813 · Other Raffles		30,785.00
5814 · Auction Revenues		28,650.01
5816 · Artwork Revenues		130.70
5820 · Entry Fees		49,700.00
5830 · Donations		2,322.50
5840 · Other Income		26.99
6810 · Unrealized Gains - Endowment	0.00	
6820 · Realized Gains - Endowment Fund	7,781.85	
7220 · Salaries & Wages	47,038.38	
7250 · FICA & Medicare	4,077.08	
7520 · Bank Fees	368.80	
7530 · Professional Fees	200.00	
7540 · Outside Services	3,384.01	
8110 · Supplies	1,260.19	
8120 · Office Supplies	1,652.28	
8130 · Facility Fees	714.45	
8140 · Postage	2,278.81	
8141 · Postal Services	806.49	
8170 · Stationery & Printing	5,739.75	
8210 · Office Rental	1,200.00	
8260 · Equipment Rental	7,536.73	
8310 · Travel & Lodging	5,731.50	
8320 · Food & Beverage	58,232.08	
8410 · Depr. Exp - Furniture & Fixture	222.86	
8515 · Licenses, Permits & Fees	410.00	
8520 · Insurance	835.65	
8530 · Raffle Prizes & Awards	10,327.38	
8534 · Auction Prizes	2,744.81	

3:28 PM  
10/17/12  
Accrual Basis

**Plantation Community Foundation**  
**Trial Balance**  
**As of June 30, 2012**

	Jun 30, 12	
	Debit	Credit
8537 · Decorations, Flowers, Etc.	217 68	
8538 · Shirts, Hats, Photos, etc.	11,524 77	
8540 · Entertainment	1,300.00	
8570 · Advertising & Public Relations	2,162.28	
<b>TOTAL</b>	<b><u>1,001,962.95</u></b>	<b><u>1,001,962.95</u></b>

M-N-O

Mackey, Donald & Joyce  
Magavern, Willard & Marcia  
Magennis, Joseph & Patricia  
Majerek, Ted & Marie  
Marsh, Al & Kathi  
Martin, George M.  
Martin, Paul & Roberta  
Mason, Michael & Kathy  
McAvoy, Michael & Cheryl  
McBride, Bert & Reena  
McCarthy, Arthur & Peggy  
McCreery, Mike & Karen  
McCutcheon, Daniel & Deb Wicks  
McGeehin, James & Mary  
McGrath, James & Lucille  
McGuinness, John  
McKiernan, John  
Meade, William & Marilyn  
Meier, Mary Jane  
Merrill, Charles & Suzanne  
Mesch, Michael & Annemarie  
Miller, Jack  
Miller, Joe & Marjorie  
Miller, K. Marion & Debby  
Mistaszek, Peter & Lyn  
Mittelstaedt, Hank & Linda  
Modica, Michael & Barbara  
Mollish, Tony & Carol  
Monahan, Jim & Kathy  
Mooney, Laurie  
Moore, Joe & Lu  
Moore, John & Nancy  
Moore, Richard & Twila  
Morehead, Bill & Judith  
Morgan, Donald & Peg  
Morison, Sandra  
Morse, Nell  
Mueller, Gerhard & Edith  
Murray, William A.  
Neal, James & Sally  
Nelson, Al & Madlyn  
Nelson, JoAnn  
Nestor, Vicky & Ken Bagge  
Noble, Ronald K. & Julie  
Noschese, Victor & Laura  
Nucero, Sally & Richard Laman  
O'Brien, Phil & Joan  
Odlund, Stig & Ingamari  
O'Donnell, James & Anne Marie  
Oliver, Bill & Pat  
O'Regan, Stephen & Suzanne

P-Q-R

Pachota, Mike & Donna  
Paxman, John & Diane  
Petersen, Jim & Pat  
Peterson, Ross & Joan  
Petrie, Pete & Barbara  
Phillips, Dave & Sharon  
Phillips, Fran & Beverly  
Phillips, Jim & Jane  
Piasecki, Larry & Joan  
Prickett, C. L.  
Prouty, John & Sue

Quinn, Harold & Maggie Bachner  
Radefeld, Larry & Golda  
Reid, Ralston & Shirley  
Reilly, Jack & Donna  
Reimers, Roger & Carol  
Rehman, Vince & Rhody  
Richards, Jack & Maureen  
Risley, Richard & Virginia  
Robinson, Naomi  
Romary, Joe & Kathy  
Roslansky, Ronald & Marlys  
Rowe, Richard & Beverly  
Ruud, James & Ruth  
Ryan, Brendan & Marjory  
Ryan, Marilyn

S-T-U

Sallander, Hakan & Lisa  
Sandoz, Phil & Barb  
Sargent, Jack & Jeanne  
Sawulski, John & Sue  
Sawyer, J. David & Chris  
Scaggs, Marion  
Schable, Ted & Dot  
Schell, John & Helen  
Schleiter, Richard & Carole  
Schramm, Mark & Mollie  
Schultz, Mike & Bobbie  
Sebesto, Esther  
Serdjonian, Mhrran & Betty  
Serdjenian, Richard & Beatrice  
Sexton, Don & Peggy  
Shannon, William & Claire Peterlin  
Shaw, Robert & Frances  
Shea, Bill & Sue  
Shea, Ted & Betty  
Sheehan, Edith  
Shine, Gerald & Eleanor  
Simpson, Peggy  
Sippel, Robert & Faith  
Sisson, Warren & Peg  
Slemmer, Don & JoAnn  
Smith, Bernard (Red) & Betty  
Smith, Carter & Phyllis  
Smith, Harry & Patricia  
Smith, Jane  
Smith, Kenneth & Deborah  
Snyder, George & Leah  
Spadaro, Thomas & Nancy  
Speidel, Tom & Sue Rectenwal  
Spence, Luther & Jean  
Stacey, Brian & Anita  
Stadter, Richard & Carol  
Stamper, Dick & Nancy  
Stegemiller, Ken & Jean  
Stickie, Bruce & Anna  
Stoner, Reid & Doris  
Stramiello, Daniel & Audrey  
Strano, John & Helen  
Strenk, Dorothy  
Strenk, James & Nancy  
Struble, Keith & Salli  
Suffredini, Paul & Sheila  
Suhadolnik, Joseph & Mary Ann  
Sullivan, Arthur & Virginia

Sunderland, Don & Mary Lou  
Suter, Claire  
Sutton, Barbara  
Swaim, Kent & Carolyn  
Tate, Jim & Kelley  
Tatiroasian, Jack & Linda  
Tedder, Dewey & Dora  
Teutenberg, Jay  
Thinnes, Robert L. & Pat  
Thompson, Ann  
Thuer, Jack & Judy  
Tillou, Debbie  
Torre, Nelson & Joyce  
Torrey, Richard F.  
Towe, Jerome & Sonja  
Townsend, Douglas & June  
Trembley, Cheryl  
Trent, Bill & Cathy  
Trofi, Sal & Ingrid  
Twigg, Kenneth & Bethanne  
Tyler, Thomas & Kaye  
Tyska, Dick & Jean

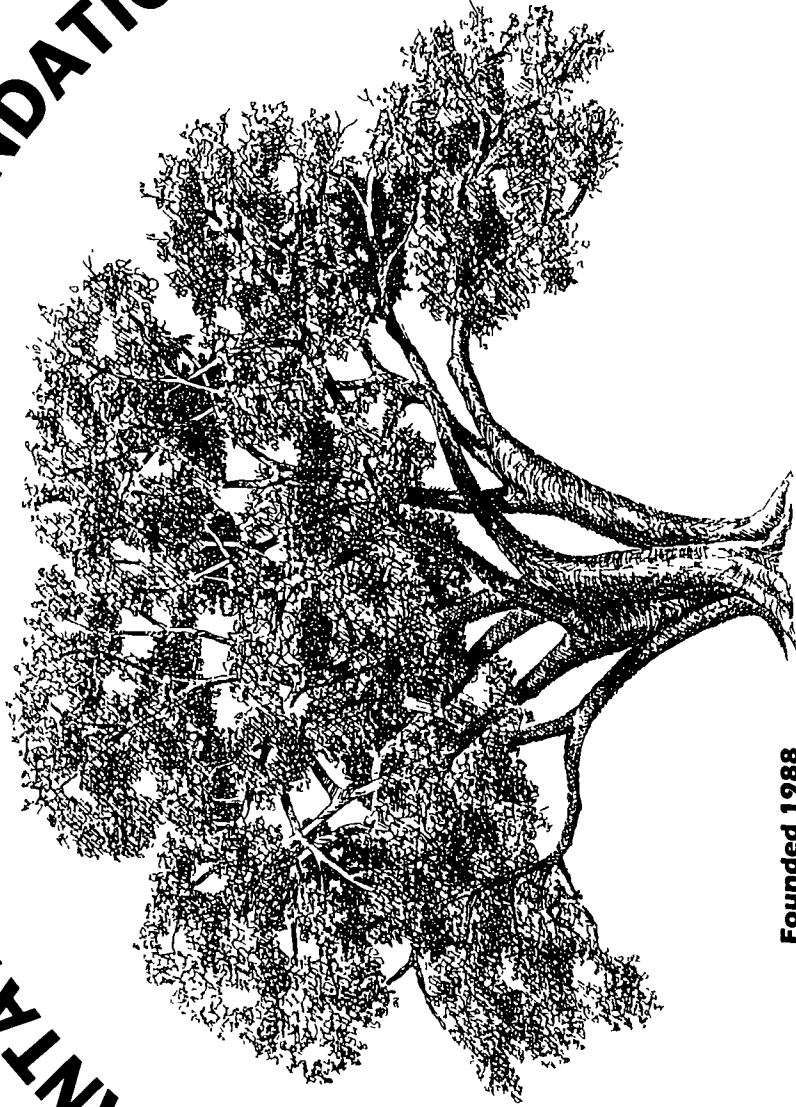
V-W-X-Y-Z

Valery, Louis & Anne  
VanBiervliet, George & Barbara  
Vanderlind, Edward & Maxine  
VanLier, Aileen  
Verkamp, Gilbert & Catherine  
Vives, Carl & Lorene  
Wakabayashi, May  
Wallace, Grant & Leila  
Walsh, Gerard & Andrea  
Watson, Al & Doris  
Welch, Bill & Maggie  
Welch, Sam & Judy  
Welham, Robert & Susan  
Weltman, David & Andrea  
Wendell, Coletta  
Whalen, Dan & Jean  
White, Gerald & Ellen  
White, Thomas  
Whitfield, Alan & Kathleen  
Williams, Helen  
Wilson, Don & Ann  
Wilson, Harold & Carol  
Wilson, Margie  
Winchester, Jim & Catherine  
Wing, Robert & Carolyn  
Wintter, Natalie  
Wioskowski, Jon & Joan  
Wolf, Richard & Gail  
Wood, Carolyn  
Woods, Allan & Paula  
Wrotniak, Michael & Carol  
Yannotti, Rita  
Zastrow, Ray & Mary  
Zawada, Hank & Marcia  
Zook, Dee & Ruth  
Zwetschke, Tom & Bev

Please Note: Membership donations in this report were received between July 1, 2011 and June 30, 2012. Every effort has been made to accurately report donations. If you discover an error or omission, please contact us, so we may correct our records.

Production & Printing by:  
Westcoast Printing of FL

PLANTATION COMMUNITY FOUNDATION



Founded 1988

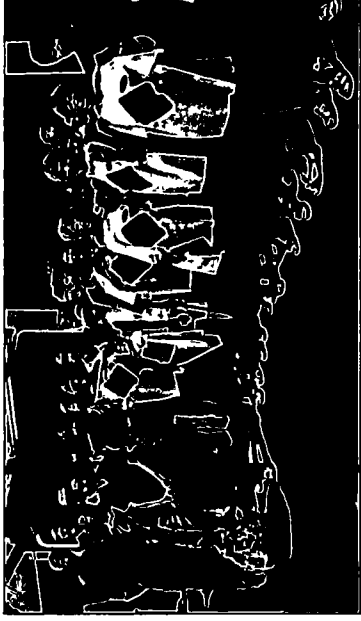
ANNUAL REPORT 2012

Making A Difference

THE PLANTATION COMMUNITY FOUNDATION, INC., 500 ROCKLEY BOULEVARD, VENICE, FL 34293

# FUNDRAISING EVENTS AND ACTIVITIES

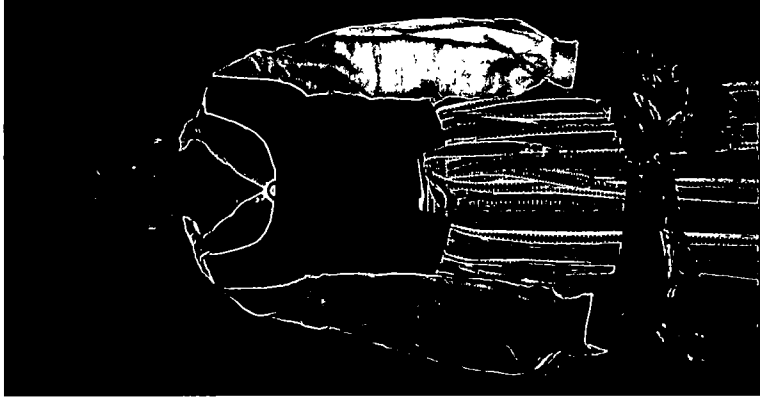
## Something Different 2012



Foundation members observed "Habitat for Humanity" in action with an educational tour followed by lunch

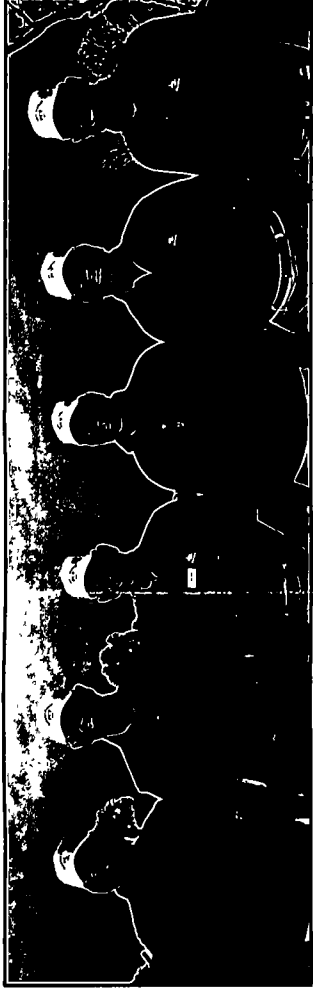


The "Big Break Plantation" was won by host Dick Ambrose pictured with runner-up Linda Decker, Chair Deb Long, and Co-Chair Nancee Duffy.

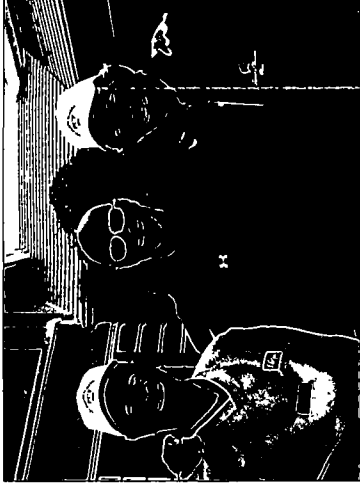


Gunmar and Kerstin Linden hosted a "Swedish Smorgasbord" for ten guests at their home. Kerstin is pictured in native costume.

## Celebrity Golf Classic



Six alumni from the Boston Red Sox participated in this year's Celebrity Classic. Pictured are Rico Petrocchi, Andy Kosco, Gary Peters, George Thomas, Don Schwall and Garry Roggenburk.

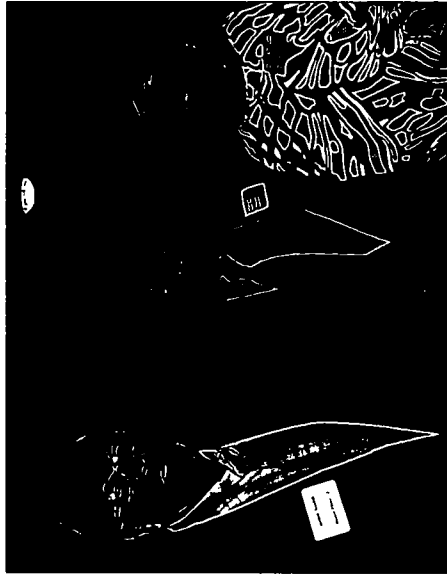


Additional participants included Johnny Orr (National Basketball Coach of the Year), Paul Krause (NFL HOF, Minnesota Vikings), and Pat Richter (College Football HOF, Washington Redskins)



Joining us for the Classic's Wednesday evening Cocktail Reception are Don Guercio (Sports Talk Show Host), Joe Pignatano (New York Mets), Jacques Lemaire (NHL HOF, Montreal Canadiens), Ed Chadwick (Toronto Maple Leafs), Ron Noble (Celebrity Classic Co-Chair), and Al Weis (NY Mets)

## Royal Ride/Fall Frolic

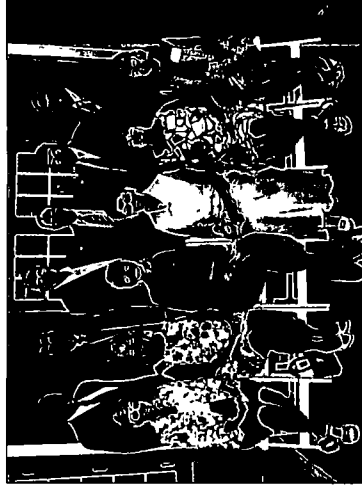


The Royal Ride/Fall Frolic raised over \$25,000 towards grant awards. Pictured are Chairperson Dick Wolf (center) flanked by members Carter Smith and Marcia Zawada.



Royal Ride Chairperson Gail Wolf and Co-chair Helene Johnston working on the raffle.

## Grant Committee



Front row: Elaine Holley, Eileen Kruzynski, Chairperson Judy Thuer, Sheila Breidenbaugh, Marcia Zawada, Ellen Camp

Back row: Dick Wolf, Pete Mistaszek, Pete Petrie, Bob Hayden, Ron Ives, John Lauer

## Grant Recipients



At the Grant Awards Luncheon, 41 not-for-profit South Sarasota County agencies received \$120,000 in grants.

BOD Member Marsha Ambrose joins grant recipients Doris Berkey, Judith Wilcox, Joy F. Mahler and Dan Dunn

## Fashion Show: "You Ought to be in Pictures"



Foundation President Lee Williams and Fashion Show Chair Judy Morehead



Fashion Show Mannequin Model Janna Gaughan



Runway Model Judy Thuer coordinated the models and store selection.

## Board of Directors and Officers



Front row Lisa Hartung, Cheryl McAvoy, Mary Juday, Joanne Kraska  
Back row: President Lee Williams, Terry Williamson, Don MacVicar, Judy Thuer, Marsha Ambrose, Norm Hill



## Office Staff

Maureen Houde and Jaye Favata.

REPORT OF THE TREASURER

The financial condition of the Foundation remains strong in spite of the volatile market conditions which presently exist. A complete financial report is available in the Foundation Office.

Balance Sheet as of June 30,	2012	2011
<b>ASSETS</b>		
Cash & Accounts Receivable	\$47,993	\$72,551
Prepaid Expenses	-	355
Property & Equipment (Net of Depr.)	-	193
Honor/Memorial Fund	14,045	6,608
Royal Ride Savings Account	7,300	
Long-term Equity Donations	114,240	
*Endowment Fund	503,854	505,006
<b>Total Assets</b>	<b>\$687,432</b>	<b>\$684,713</b>
<b>LIABILITIES AND CAPITAL</b>		
<b>Total Liabilities</b>	<b>\$385</b>	<b>\$504</b>
<b>Capital</b>		
Balance Beginning of Year	\$584,208	\$454,083
Grants Distributed	(119,080)	(100,000)
Deferred Equity Donations	114,240	
Net Income for the year ended June 30	107,679	230,126
<b>Total Capital</b>	<b>\$687,047</b>	<b>\$684,209</b>
<b>Total Liabilities &amp; Capital</b>	<b>\$687,432</b>	<b>\$684,713</b>

<b>Summary of Operations</b>			
<b>Twelve Months ended June 30,</b>	<b>2012</b>	<b>2011</b>	
<b>GROSS FUND-RAISING REVENUES</b>	<b>\$203,348</b>	<b>\$220,661</b>	
Less Direct Cost of Events	105,204	109,317	
<b>**Net Fund Raising Income</b>	<b>\$98,144</b>	<b>\$111,344</b>	
<b>OTHER REVENUES AND Income</b>			
Membership Contributions	\$65,905	\$57,625	
Endowment & Other Contributions	1,342	15,263	
Honor/Memorial Fund Gifts	7,330	9,205	
Endowment Fund Gains/(Losses)	(7,784)	86,486	
Interest, Dividends & Other Income	7,504	8,055	
<b>Total Net Revenues</b>	<b>\$172,441</b>	<b>\$287,978</b>	

<b>EXPENSES</b>			
Salaries, Benefits & Services	\$54,300	\$46,526	
Supplies, Printing and Mailing	4,932	6,027	
Huggy Bear Materials	452	590	
Office Rental Paid to PG&CC	1,200	1,200	
Depreciation & Maintenance	223	223	
Insurance, Licenses & Permits	1,935	1,243	
Food, Beverage & Miscellaneous	1,720	2,043	
<b>Total Expenses</b>	<b>\$64,762</b>	<b>\$57,852</b>	
<b>NET INCOME</b>	<b>\$107,679</b>	<b>\$230,126</b>	

<b>*Endowment Fund Summary</b>	<b>2012</b>	<b>2011</b>	
Fund Balance - Beginning of Year	\$505,006	\$403,752	
Contributions	-	7,520	
Grant Disbursements	-	-	
Net Investment Income	6,632	7,248	
Net Realized & Unrealized Gains/(Losses)	(7,784)	86,486	
<b>Fund Balance - End of Year</b>	<b>\$503,854</b>	<b>\$505,006</b>	

<b>**Net Income from Fund Raising Events</b>			
Celebrity Golf Classic	\$45,801	\$44,144	
Royal Ride	27,622	25,076	
Tour of Homes	-	22,844	
Fashion Show Luncheon	10,822	10,372	
Something Different	13,136	7,945	
Other	763	963	
<b>Total Event Income</b>	<b>\$98,144</b>	<b>\$111,344</b>	

2012 GRANTS – TOTAL DISTRIBUTION: \$120,000

(2011 Grant Recipient, Rotary Futures, returned \$920 making Total Distribution balance \$119,080.)

Grants were distributed among the following areas: Social Services, Education, Cultural Enrichment, Health and Youth Activities.

SPECIAL RECOGNITION MEMORIAL GRANT

To Honor Judy Rich: Cancer Support Community – Therapy Group Counseling \$4,800

GRANTS FUNDED BY THE HONOR MEMORIAL FUND:

Child Protection Center – Therapy for Child Sex Abuse Victims \$6,000

GRANTS FUNDED BY MEMBER CONTRIBUTIONS AND FUNDRAISERS:

All Faiths Food Bank – Thanksgiving Turkey Fund \$5,000  
Asolo Theatre, Inc. – In-School Performances \$1,500  
Big Brothers/Big Sisters – Fingerprinting Machine \$7,335  
Children First – School Program for Child Care \$5,000

Christ United Methodist Church – Food Assistance for Families in Need \$6,000  
Community Haven for Adults & Children – Summer Camp for 15 Children \$5,000  
Community Pharmacy of Sarasota County – Purchase Prescription Medicine for Under- and Non-Insured \$5,800

Epilepsy Services of SW Florida – TV and DVR \$500  
Family Network on Disabilities - In-home Respite Care \$4,000  
Florida Diabetes Camp – Summer Camp \$2,000

Friends of Elsie Quirk Public Library – Presentation Materials \$1,610  
Friends of Jacaranda Library – Study Carrels \$3,910

Habitat for Humanity Venice – Renovation Gap Funds \$4,000  
Heart of Mercy Ministries, Inc. – Canopy Replacements \$1,500

Historic Spanish Point – Costumes \$1,110

Lakeside Lutheran Preschool – Literacy Program \$670  
Literacy Volunteers of South Sarasota County – Tutoring Kits \$2,300

Loveland Center – Computers and iPads \$3,690

Manasota SOLVE Maternity Homes – Life Skill Packets \$864  
Mental Health Community Centers/Beacon House – Van Repair \$2,750

North Port Area Art Guild –Art Therapy Instruction for Elderly \$1,200  
North Port Chorale, Inc. – Sheet Music \$1,000  
North Port Orchestra – Music \$1,000

Our Mother's House/Catholic Charities – Financial Instruction Packet \$2,500  
Rotary Futures College Resource Center – Funding SAT Prep Class \$1,610  
(returned \$920 from 2011)

Safe Place and Rape Crisis Center, Inc. (SPARCC) – Furniture \$2,500  
Senior Friendship Center – Commercial Stove \$4,740

Special Athlete Boosters – Copier \$4,747

St. Francis Animal Rescue of Venice – Pet Medications \$500  
Suncoast Chorale, Inc. – Sheet Music \$1,500

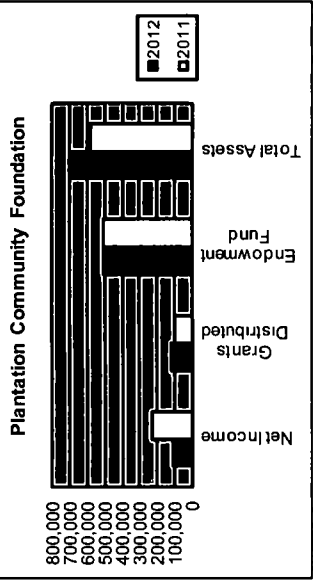
Teen Court of Sarasota, Inc. – Camp X-R A Y D Supplies \$4,175  
Trinity Presbyterian Church – Stainless Steel Workplace and Food \$5,296

Venice Area Audubon Society – Educational Materials \$1,800  
Venice Area Pregnancy Care Center – Infant Car Seats \$4000

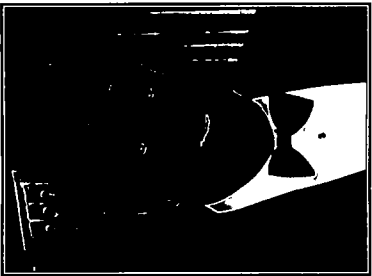
Venice Nokomis United Methodist Child Care Center – Day Care Scholarships \$2,000  
Venice Symphony – Sheet Music \$1,500  
Venice Theatre – Sewing Machine \$1,539

Warehouse of Venice – Volunteer Background Checks \$634

Women's Resource Center of Sarasota County, Inc. – Laptops and Printers \$2,420



PCF PRESIDENT’S ANNUAL REPORT



October 2012

Dear Friend,

On April 12, 2012, your Foundation granted \$120,000.00 to 41 qualified South County non-profit agencies and organizations as you will see detailed in this Annual Report. Our grants helped to provide food and shelter for the hungry and homeless; health-related services for needy infants, children and adults; remedial and support services for disabled children, teens and adults; educational services for children, teens and adults; and cultural enrichment support that contributes to the quality of life throughout our community.

On behalf of the Foundation board, and our grantees, we sincerely thank each one of you for your generous support. Together, we do truly “Make a Difference” here in this community that we all love! And in 2013, we will celebrate the 25th Anniversary of the Foundation, another remarkable milestone!

A new entry in this year’s Treasurer’s Report reflects the donation of club equity to the Foundation by five families: the Storyks, Waters, Goldsmiths, Robersons and Boultons. The donors receive a charitable tax deduction in the year the gift is made, and the Foundation receives the funds when the club retires the equity. We are so appreciative of the generosity of these thoughtful families. If you are interested in considering such a donation, please contact the Foundation office.

This edition of the Annual Report is dedicated to Roy W. Walters, Jr. who passed away last spring. Roy was among the early visionaries inspired to create the Foundation in 1988, and he was also instrumental in transforming Plantation Golf & Country Club into an equity member-owned organization. He served as the first club president and was the originator of many of the Foundation’s initial fund-raising events. As requested by his family, many gifts were gratefully accepted by the Foundation in Roy’s memory.

Finally, I’ll look forward to seeing each of you as we enjoy the variety of fund-raising events that are planned for the upcoming season ... the Royal Ride/Fall Frolic in November; the Celebrity Golf Classic in February; and the Spring Fashion Show in March ... all leading us toward our next, heartwarming Grant Award ceremony in April 2013. Please encourage your friends and neighbors to become members of the Foundation and to participate in any and all of our events!

Thanks again to each of you and best regards,

Lee Williams

Lee Williams, President

P.S. To learn more about the Foundation and to keep up with Foundation news, please go to [plantationgcc.com](http://plantationgcc.com) and click on Plantation Community Foundation at the bottom right of the homepage or sign in as a club member and click Community Foundation on the member homepage.

THE PLANTATION COMMUNITY FOUNDATION ANNUAL REPORT - 2012

ABOUT THE FOUNDATION

The Plantation Community Foundation, incorporated in Florida on June 1, 1988, is an organization composed of property owners, residents of the Plantation Community, and members and employees of the Plantation Golf & Country Club, who, are dedicated to improving the quality of life in South Sarasota County.

Operating in accordance with the provisions of Section 501(c) (3) of the IRS Code, gifts to the Foundation are tax deductible to the extent provided under current tax laws. 100% of all contributions are retained by The Plantation Community Foundation, Florida Registration # SC-01039.

PLANTATION COMMUNITY FOUNDATION LEADERSHIP 2011-2012

Directors/Officers

- Lee Williams, President
- Norman Hill, Treasurer
- Cheryl McAvoy, 1st Vice President
- Marsha Ambrose, Vice President/Secy
- Lisa Hartung, Vice President
- Joanne Kraska, Vice President
- Donald MacVicar, Vice President
- Judy Thuer, Vice President
- Terry Williamson, Vice President

Presidents Emeriti

Mary Judyay, Mary Helfrick, Robert Thnnes, Henry Dallam, Michael Casey (deceased), George Horan, Charles (Bob) Ellis, Clifford Reich (deceased), James Seamon (deceased), Richard Torrey

Finance

Norman Hill, Treasurer

Grant Committee

Judy Thuer, Chairperson, Sheila Breidenbaugh, Ellen Camp, Bob Hayden, Elaine Holley, Ron Ives, Eileen Kruzynski, John Lauer, Pete Miasazsek, Pete Petrie, Dick Wolf, Marcia Zawada

Membership

Marsha Ambrose

Honor/Memorial Fund

Marsha Ambrose

Endowment Fund

Donald MacVicar

ABOUT OUR GRANT POLICY

The Foundation supports agencies engaged in social services, health, cultural enrichment, education and the environment. The Foundation accepts grant applications from agencies which serve South Sarasota County residents and which meet IRS Code Section 501(c) (3) requirements.

Applications must be submitted by November 30th of each year to:

The Plantation Community Foundation, Inc.  
500 Rockley Boulevard  
Venice, FL 34293

An informational brochure may be obtained by calling the Foundation Office at (941) 497-4826.

Community Service

Gail Fusco, Huggy Bears

Publicity

Joanne Kraska

Fund Raising Events – 2011-2012

- Royal Ride/Fall Frolic 11/7/11
- Celebrity Golf Classic 2/8 & 2/9/12
- Fashion Show 3/7/12
- Something Different 2012 Jan-Apr 2012
- Bingo Night Held monthly

Fund Raising Events – 2012-2013

- Royal Ride/Fall Frolic 11/5/12
- Celebrity Golf Classic 2/20 & 2/21/13
- Fashion Show 3/6/13

Office Administration

Maureen Houde and Jaye Favata

About the Cover:

The tree logo, by the late, local artist Thomas Fern, depicts the Elephant Ear Tree. With its sturdy trunk, deep roots and horizontally-spreading branches, it symbolizes the Foundation's effort to reach out with financial support to area not-for-profit agencies.

Plantation Community Foundation Members as of June 30, 2012

PLATINUM MEMBERS

- Berner, Guy & Marilyn
- Roberson, Joe & Carolyn
- Seamon, Shirley
- Storyk, Leslie & Ruth
- Vogt, Peter
- Waters, Richard

PATRON MEMBERS (\$251+)

- Ambrose, Dick & Marsha
- Bailey, Don & Betty
- Ellis, Bob & Shirley
- Glover, June Blackmore
- Hartung, Ken & Lisa
- Howard, Ellis & Bonnie
- Juday, Floyd & Mary
- Kinney, Ralph & June
- Kubik, Thomas & Donna
- Lyon, Peter & Jan
- Miller, Jerry & Tommie
- Murphy, Florence
- Reddy, Venkat & Lakshmi
- Reich, June
- Rich, Steve
- Straub, Erik & Judith
- Vaught, Michael & Jackie
- Velemirovich, Roy & Anne
- Williams, Lee & Cindy

PROGRESSIVE MEMBERS (\$126-\$250)

- Allen, Bud & Nancy
- Andrus, Robert & Veda
- Armstrong, Jerry & Ruth
- Battin, John & Parmie
- Buehler, Richard & Mary Kay
- Cushman, Jeri
- Dallam, Henry & Wynne
- Fanning, Bill & Terry
- Garro, Joseph & Gail
- Ginn, Bill & Karen
- Healon, Michael & Marilyn
- Heaton, Bruce & Sharon
- Henning, Fred & Ann
- Henry, Chuck & Diane
- Hertel, Paul & Vicky
- Hess, Darrell & Betty
- Hicks, Ruth
- Hinton, Bob & Peggy
- Howard, William J. & Mary Jane
- Kampman, Donald & Sherry
- Kasko, William & Shirley
- Krum, Gordon & Opal
- Lang, Paul & Patty Hildebrandt
- Lepore, Donald & Angela
- MacDonald, Robert & Dottie
- MacVicar, Donald & Kathryn
- Major, Steven & Marcia
- Mangan, James & Caryl
- Poyer, Tom & Marion
- Reed, David & Eleanor
- Reifel, Richard & Carolyn
- Robinson, Betty
- Sarsfield, Leonard & Frances
- Schlegel, Donald M. & Helen
- Schliesmann, John & Bern
- Schumacher, Paul & Kay
- Sundahl, Jim & Mary Kat

- Vandy, David & Sandra
- Warstler, Dean & Gerry
- Wheelock, John & Judy
- Williamson, Terry & Carol
- Winkler, Patricia
- Worobey, William & Carol

SUSTAINING MEMBERS (\$125)

- A-B-C
- Adams, Gale & Anne
- Addona, Alexander & Carol
- Albertini, James & Patricia
- Almeida, Jr., George & Beverly
- Arnold, Barbara
- Atkins, Earl & Donna
- Authier, Martin & Adele
- Ayers, George
- Baldinger, Roger & Marilyn
- Baran, Michael T. & Marilyn
- Barcus, Mary
- Baudanza, Anthony & Helen
- Bauer, Gerry & Betty
- Belcuore, Bob & Francine
- Bell, Arthur & Carol
- Bene', H. Michael & Barbara
- Bernhardt, Rich & Lucy
- Berryman, John & Bessie
- Berube, Paul & Arolyn
- Bischof, Nick & Marie
- Blackburn, Robert & Doris
- Blank, Denis A. & MaryLou
- Bontrager, Glenn & Clara
- Borfitz, Jack & Carol Dykhouse
- Breary, Lynda
- Breidenbaugh, Arnold (Bud) & Sheila
- Brent, Robert & Dassie
- Brisch, Joseph
- Britto, Carl & Jane
- Britton, Sid & JoAnn
- Bromman, Donald & Jean
- Bronson, James & Nancy
- Brooks, John & Carrie
- Brown, Bernie & Mary Jane
- Brown, Gordon & Vicky
- Brundage, Roy & Justine
- Buckley, Bill & Rena
- Buerhaus, Richard & Myrna Bianco
- Burch, Les & Karen
- Burt, Donald & Marilyn
- Bussiere, Bob & Rosemary
- Butler, Dick & Marie
- Butler, James & Maureen
- Caeti, Philip & Joanne
- Caldwell, Carol & Alan
- Camp, William & Ellen
- Campbell, David & Pat
- Campbell, Fred & Jane
- Campbell, Patti
- Carr, Ed & Marianne
- Carruthers, Keith & Maggie
- Carscallen, Charlie & Lou
- Carswell, Larry & Carol
- Cary, John & Pat
- Casey, Jack & Joan
- Castle, William
- Cellura, Kathleen
- Christman, Russell & Deidre
- Clasgens, Dennis & Helen
- Clauss, Geraldine

- Clements, Bob & Nina
- Coffin, Bob & Kay
- Colby, Lynn & Karen
- Cole, Jacqueline
- Cook, Ralph
- Coppola, Gene & Ginnyann
- Corsilia, George & Sue
- Coval, Dulane & Joy
- Cowtan, Patricia
- Cross, John & Terry
- Cross, Robert
- D-E-F
- Daley, Marvin & Carole
- Davis, Donald
- Dawson, Dick & Paula
- Decker, Patrick & Linda
- Deckman, Joel & Dolores
- DeFrancesco, Joseph & Phyllis
- Desmond, James & Anita
- Dettmore, Carol
- DeVirgilis, Ted & Mary Alice
- DiClemente, Tony & Theresa
- d'Oliveira, Barbara
- Duffy, Patrick & Nancee
- Dwyer, Tom & Elsie
- Eckard, Douglas
- Elmer, Bernard & Ruth
- Fairman, Robert & Rudean
- Fales, Dennis & Mary
- Fearen, William & Diane
- Feldhusen, Herman & Judith
- Feorino, Jim & Lorraine
- Fern, Bette
- Fitzgerald, William & Patricia
- Flickinger, Louise
- Foeller, Maureen
- Fortsch, Tom & Ruth
- Francavilla, Frances
- Franks, John & Margie
- Freeman, Jack & Vivian
- Frey, Carl & Rose
- Frost, Diane
- Fryday, Don & Joan

J-K-L

- Jaggard, Robert & Jan
- Jennings, Brenda (Bunny)
- Johnson, Neil & Linda
- Johnston, James
- Johnston, Scott & Helene
- Jones, Robert M. & Lili
- Jones, Stewart & Dianne
- Kammerer, Donald & Helen Douthit
- Kelly, Thomas J. & Phyllis B.
- Kendall, Robert & Sallie
- King, Truman & Dee
- Kirk, Jack & Peggy
- Kleberg, John & Nancy
- Klinger, Chuck & Jo
- Koenig, Hanni
- Koplien, Doug & JoAnne
- Kopple, Laura B.
- Korpi, Leonard F.
- Kostrinsky, Doris & Deb Carbone
- Kovalcik, John & Carol
- Kraska, Allen & Joanne
- Kritz, John & Dorothy
- Kruecke, Marilyn
- Kruzynski, George & Eileen
- Lactedo, James P. & Ann
- Lanci, Carl & Jean
- Langmaid, Douglas
- Lapinski, John F. & Frances
- Larson, Tom & Jean
- Lauder, James
- Lauer, John & Patti
- Leslie, Leroy & Jean
- Linke, Jim & Betty
- Lins, Howard & Betty
- Lois, Joe & Jackie
- Long, Kerry & Debra
- Lubanski, Robert & Sherry
- Lutz, David & Betty
- Lutz, Donald & Janice
- Lyons, Jack & Julia
- Lutz, David & Betty
- Lutz, Donald & Janice
- Lyon, Peter & Jan
- Lyons, Jack & Julia

- Guzzi, Angelo
- Hagerstrom, Kenneth & Marilyn
- Halkyard, Bob & Susan
- Hall, Robert & Brenda