



**TELEPHONIC AUDIT COMMITTEE MEETING – 811-18-11  
MINUTES/RECORD OF ACTION/APPROVAL ATTACHED**

**Action Items**

- 1) Approval of Audit Report Ending 6-30-11 and Form 990, **page 3**

**WORKFORCE CONNECTION  
TELEPHONIC AUDIT COMMITTEE MEETING**

**MINUTES**

DATE: November 18, 2011  
PLACE: Enterprise Center, Ocala, FL  
TIME: 10:00 am

**MEMBERS PRESENT**

Fred Morgan, IBEW 222  
Jack Reynolds, Brannen Bank  
Theresa Flick, Key Training Center (came in after roll call)

**OTHER ATTENDEES**

Rusty Skinner, Workforce  
Kathleen Woodring, Workforce  
Val Hinson, Workforce  
Susan Heller, Workforce  
Steve Kattell, (Kattell and Company, P.L.)

**CALL TO ORDER**

The meeting was called to order by Fred Morgan, Chair

**ROLL CALL**

The roll was called by Val Hinson and a quorum declared present.

**APPROVAL OF MINUTES**

**Jack Reynolds made a motion to approve the minutes from the 8-10-11 meeting. Seconded by Fred Morgan. Motion Carried.**

**ACTION ITEMS**

The action sheets that are attached represent the presentations by Rusty Skinner and Steve Kattell (Kattell and Company, P.L.) and the action taken by the Committee.

**MATTERS FROM THE FLOOR**

None.

**Audit Committee Meeting  
November 18, 2011**

**ADJOURNMENT**

There being no further business, the meeting was adjourned.

**APPROVED:**

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**RECORD OF ACTION/APPROVAL**

**Audit Committee – 11-18-11**

**TOPIC/ISSUE:**

Audit Report Ending June 30, 2011 & Form 990

**BACKGROUND:**

Kattell and Company, P.L. have audited the Financial Statements of CLMRWDB, Inc. for fiscal year ending June 30, 2011 along with completing form 990.

**POINTS OF CONSIDERATION:**

See Audit Report and Form 990 attached for details.

There were no findings and no suggested improvements.

**STAFF RECOMMENDATIONS:**

**COMMITTEE ACTION:**

Jack Reynolds made a motion to accept the audit report ending June 30, 2011 and forward to the full board for ratification. Seconded by Theresa Flick. Motion Carried.

Jack Reynolds made a motion to accept execution of Form 990. Seconded by Theresa Flick. Motion Carried.

Citrus, Levy, Marion Regional Workforce  
Development Board, Inc.

D/B/A Workforce Connection  
Citrus Levy Marion

Financial Statements, Supplemental Information  
and Independent Auditors' Reports

June 30, 2011

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# Kattell and Company, P.L.

*Serving the Nonprofit Community*

808-B NW 16<sup>th</sup> Avenue Gainesville, Florida 32601 TEL: 352-395-6565 FAX: 352-395-6636 [www.kattell.com](http://www.kattell.com)

## INDEPENDENT AUDITORS' REPORT

To the Board of Directors  
Citrus, Levy, Marion Regional Workforce Development Board, Inc.  
Ocala, Florida

We have audited the accompanying financial statements of the governmental activities and the major fund of Citrus, Levy, Marion Regional Workforce Development Board, Inc. d/b/a Workforce Connection Citrus Levy Marion (the Corporation) as of and for the year ended June 30, 2011, which collectively comprise the Corporation's basic financial statements, as listed in the table of contents. These financial statements are the responsibility of the Corporation's management. Our responsibility is to express an opinion on these financial statements based on our audit.

We conducted our audit in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audit provides a reasonable basis for our opinion.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of the Corporation as of June 30, 2011, and the respective changes in financial position for the year then ended in conformity with accounting principles generally accepted in the United States of America.

In accordance with *Government Auditing Standards*, we have also issued our report dated **November XX, 2011** on our consideration of the Corporation's internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements and other matters. The purpose of that report is to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on the internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* and should be considered in assessing the results of our audit.

The management's discussion and analysis and the budgetary comparison schedule are not a required part of the basic financial statements but are supplementary information required by accounting principles generally accepted in the United States of America. We have applied certain limited procedures, which consisted principally of inquiries of management regarding the methods of measurement and presentation of the required supplementary information. However, we did not audit the information and express no opinion on it.

Our audit was conducted for the purpose of forming opinions on the financial statements of the Corporation, taken as a whole. The accompanying schedule of expenditures of federal awards is presented for purposes of additional analysis as required by U.S. Office of Management and Budget Circular A-133, *Audits of States, Local Governments, and Non-Profit Organizations*, and is not a required part of the basic financial statements. Such information has been subjected to the auditing procedures applied in our audit of the financial statements and, in our opinion, is fairly stated in all material respects when considered in relation to the basic financial statements taken as a whole.

**November XX, 2011**  
Gainesville, Florida

*Kattell and Company, P.L.*

*"Not everything that counts can be counted, and not everything that can be counted counts."*

-Albert Einstein

**Management's Discussion and Analysis**  
**June 30, 2011**  
**Citrus, Levy, Marion Regional Workforce Development Board, Inc.**

This discussion and analysis of the financial performance of Citrus, Levy, Marion Regional Workforce Development Board, Inc. (the Corporation) provides an overview of financial activities for the fiscal year ended June 30, 2011. Please read it in conjunction with the financial statements which follow this section.

**FINANCIAL HIGHLIGHTS**

The following are various financial highlights:

- Overall net assets increased by approximately \$8,000 which is about 6%.
- Unrestricted net assets at June 30, 2011 were \$41,430.
- The Corporation incurred total expenses for the year of about \$11,731,000, compared to revenues of approximately \$11,739,000.

**OVERVIEW OF THE BASIC FINANCIAL STATEMENTS**

This discussion and analysis is intended to serve as an introduction to the Corporation's basic financial statements. These basic statements consist of combined fund financial statements and government-wide financial statements and notes to the financial statements.

**Combined Fund and Government-Wide Financial Statements.** All of the activities of the Corporation are considered to be governmental activities. The Corporation has no business-type activities, which are generally financed in whole or in part by fees charged to external parties for goods or services.

The combined fund and government-wide financial statements provide both long-term and short-term information about the overall financial status of the Corporation. These statements use a format similar to a private sector business. They include a statement of net assets and a statement of activities.

The first financial statement is the Statement of Net Assets and Governmental Fund Balance Sheet. This statement includes all of the assets and liabilities of the Corporation.

- The fund financial statement (left column) focuses on events that produce near-term inflows and outflows of spendable resources as well as on the balances of spendable resources available at the end of the year. The amounts in this column are accounted for using modified accrual accounting. Modified accrual accounting focuses on available cash and other financial assets that can readily be converted to cash. This provides a shorter-term view of the governmental fund's financial position.
- The government-wide financial statement (right column) includes long-term information such as capital assets and long-term liabilities, if any. The amounts in this column are accounted for using the accrual basis of accounting. Accrual accounting is similar to the accounting used by most private-sector companies. All of the current year revenues and expenses are recorded, regardless of when cash is received or paid. Net Assets – the difference between these assets and liabilities – is a useful way to measure the financial health of the Corporation.

The second financial statement is the Statement of Activities and Governmental Fund Revenues, Expenditures and Changes in Fund Balance. This statement includes all of the revenues and expenditures/expenses of the Corporation and reconciles beginning and ending fund balance/net assets.

- The fund financial statement (left column) focuses on events that produce near-term inflows and outflows of spendable resources, as well as on the balances of spendable resources available at the end of the year. The amounts in this column are accounted for using modified accrual accounting, as discussed above.
- The government-wide financial statement (right column) includes all of the current year revenues and expenses, regardless of when cash is received or paid. The amounts in this column are accounted for using the accrual basis of accounting as discussed above. Over time, the increases or decreases in net assets are useful indicators of whether the financial health of the Corporation is improving or deteriorating. However, other non-financial factors, such as changes in population and in federal funding, must also be considered when assessing the overall health of the Corporation.

**Management's Discussion and Analysis**  
**June 30, 2011**  
**Citrus, Levy, Marion Regional Workforce Development Board, Inc.**

**CONDENSED FINANCIAL INFORMATION**

The following table presents condensed, government-wide current year and prior year data about net assets and changes in net assets.

	<b>2011 Governmental Activities</b>	<b>2010 Governmental Activities</b>
<b>Net Assets</b>		
Assets:		
Non-capital Assets	\$ 422,925	\$ 675,247
Capital Assets, Net	108,692	133,465
Total Assets	<u>531,617</u>	<u>808,712</u>
Liabilities:		
Current Liabilities	331,693	611,470
Non-current Liabilities	49,802	55,172
Total Liabilities	<u>381,495</u>	<u>666,642</u>
Net Assets:		
Invested in Capital Assets, Net of Related Debt	108,692	133,465
Unrestricted	41,430	8,605
Total Net Assets	<u>\$ 150,122</u>	<u>\$ 142,070</u>
<b>Change in Net Assets</b>		
General Revenues:		
Government Grants	\$ 11,624,838	\$ 11,402,355
Other Revenues	114,549	7,914
Total Revenues	<u>11,739,387</u>	<u>11,410,269</u>
Program Expenses:		
Administration	421,735	411,917
Direct Client Services	3,443,042	2,978,454
Depreciation	54,895	87,679
Client Services – Contract Providers	7,811,663	8,015,219
Total Expenses	<u>11,731,335</u>	<u>11,493,269</u>
Change in Net Assets	8,052	(83,000)
Beginning Net Assets	142,070	225,070
Ending Net Assets	<u>\$ 150,122</u>	<u>\$ 142,070</u>

# Management's Discussion and Analysis

June 30, 2011

## Citrus, Levy, Marion Regional Workforce Development Board, Inc.

### OVERALL FINANCIAL POSITION AND RESULTS OF OPERATIONS

#### Governmental Activities

The governmental activities generated no program revenues, \$11,739,387 of general revenues, and incurred \$11,731,335 of program expenses. This resulted in an increase in net assets of \$8,052. This does not represent a significant change in net assets. This is expected since the Corporation is funded almost exclusively from cost reimbursement government grants.

#### General Fund

The fund balance of the General Fund has increased by \$27,455, from \$63,777 to \$91,232. This change is due primarily to the fact that compensated absences are funded currently by grantors, but are not included as a liability in governmental funds. There are no restrictions, commitments or other limitations that significantly affect the availability of fund resources for future use.

### BUDGETARY HIGHLIGHTS

**General Fund.** The original budget was based on funding projections and included all funds expected to be available. During the year the budget is amended as funding commitments are received. Finally, the final budgets are adjusted for estimates of amounts to be carried forward to subsequent years. There were no significant differences between the final budget and actual amounts.

### CAPITAL ASSETS AND DEBT ADMINISTRATION

#### Capital Assets

The Corporation had no significant capital asset activity. Please refer to a note to the accompanying financial statements entitled *Capital Assets and Depreciation* for more detailed information about the Corporation's capital asset activity.

#### Debt Administration

The Corporation's only long-term debt is its accrual for compensated absences. Please refer to a note to the accompanying financial statements entitled *Long Term Liabilities* for more detailed information about long-term debt activity.

### ECONOMIC FACTORS

The Corporation currently is not aware of any conditions that are expected to have a significant effect on the Corporation's financial position or results of operations.

### CONTACTING FINANCIAL MANAGEMENT

This financial report is designed to provide a general overview of the finances of the Corporation and to show accountability for the money it receives. If you have any questions about this report or need additional financial information, contact Susan Heller, Vice President of Finance, Citrus, Levy, Marion Regional Workforce Development Board, 2703 NE 14<sup>th</sup> Street, Ocala, Florida 34470.

**Statement of Net Assets and Governmental Fund Balance Sheet**  
**June 30, 2011**  
**Citrus, Levy, Marion Regional Workforce Development Board Inc.**

	<u>General Fund</u>	<u>Adjustments</u> <u>(Note 2)</u>	<u>Statement of</u> <u>Net Assets</u>
<b>Assets</b>			
Cash	\$ 153,820	\$ --	\$ 153,820
Grants Receivable	255,207	--	255,207
Deposits	9,755	--	9,755
Prepaid Expenditures/Expenses	4,143	--	4,143
Property and Equipment	--	407,703	407,703
Less: Accumulated Depreciation	--	(299,011)	(299,011)
<b>Total Assets</b>	<b>\$ 422,925</b>	<b>\$ 108,692</b>	<b>\$ 531,617</b>
<b>Liabilities</b>			
Liabilities:			
Accounts Payable and Accrued Expenses	\$ 183,643	\$ --	\$ 183,643
Due to Subcontractors	148,050	--	148,050
Accrued Compensated Absences	--	49,802	49,802
<b>Total Liabilities</b>	<b>331,693</b>	<b>49,802</b>	<b>381,495</b>
<b>Fund Balance/Net Assets</b>			
Fund Balances:			
Non-spendable – Deposits and Prepaids	13,898	(13,898)	--
Restricted – Compensated Absences	49,802	(49,802)	--
Unassigned	27,532	(27,532)	--
<b>Total Fund Balance</b>	<b>91,232</b>	<b>(91,232)</b>	<b>--</b>
<b>Total Liabilities and Fund Balance</b>	<b>\$ 422,925</b>		
Net Assets:			
Invested in Capital Assets		108,692	108,692
Unrestricted		41,430	41,430
<b>Total Net Assets</b>		<b>\$ 58,890</b>	<b>\$ 150,122</b>

**See accompanying notes.**

**Statement of Activities and  
Governmental Fund Revenues, Expenditures and Changes in Fund Balance  
For the Year Ended June 30, 2011  
Citrus, Levy, Marion Regional Workforce Development Board Inc.**

	<u>General Fund</u>	<u>Adjustments (Note 2)</u>	<u>Statement of Activities</u>
Revenues:			
Federal Grants	\$ 11,624,498	\$ --	\$ 11,624,498
State Grants	340	--	340
Other Non - Governmental Grants	77,825	--	77,825
Program Income	35,927	--	35,927
Interest Income	797	--	797
<b>Total Revenues</b>	<b><u>11,739,387</u></b>	<b><u>--</u></b>	<b><u>11,739,387</u></b>
Expenses/Expenditures:			
Administrative	457,227	(35,492 )	421,735
Direct Client Services	3,318,625	--	3,318,625
Depreciation	--	54,895	54,895
Contracted Service Providers: Direct Client Services	<u>7,936,080</u>	<u>--</u>	<u>7,936,080</u>
<b>Total Expenditures/Expenses</b>	<b><u>11,711,932</u></b>	<b><u>19,403</u></b>	<b><u>11,731,335</u></b>
<b>Total Change in Fund Balance</b>	<b>27,455</b>	<b>(19,403)</b>	<b>8,052</b>
<b>Fund Balance/Net Assets, July 1, 2010</b>	<b><u>63,777</u></b>	<b><u>78,293</u></b>	<b><u>142,070</u></b>
<b>Fund Balance/Net Assets, June 30, 2011</b>	<b><u>\$ 91,232</u></b>	<b><u>\$ 58,890</u></b>	<b><u>\$ 150,122</u></b>

**See accompanying notes.**

**Notes to Financial Statements**  
**June 30, 2011**  
**Citrus, Levy, Marion Regional Workforce Development Board, Inc.**

**NOTE 1 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES**

**Financial Reporting Entity**

Citrus, Levy, Marion Regional Workforce Development Board, Inc. d/b/a Workforce Connection Citrus Levy Marion (the Corporation) was incorporated as a nonprofit corporation on June 17, 1996 under the provisions of the Florida Not-For-Profit Corporation Act set forth in Chapter 617, Florida Statutes. The Corporation exists as a result of the passage of the Workforce Florida Act of 1996, as subsequently amended, and the Interlocal Agreement establishing the Citrus, Levy, Marion Workforce Development Consortium. The Corporation has been determined to be a special district within the meaning of the Uniform Special District Accountability Act of the laws of the State of Florida. The Corporation is a special-purpose government.

The purpose of the Corporation is to fulfill those duties and responsibilities provided for by the Workforce Investment Act of 1998, the Personal Responsibility and Work Opportunity Reconciliation Act of 1996, the Balanced Budget Act of 1997, and the Workforce Florida Act of 1996, as amended, consistent with the provisions of job training, job placement and benefit services to the citizens of Citrus, Levy and Marion Counties, Florida.

The governing board of the Corporation is the Board of Directors. As required by generally accepted accounting principles, the financial statements of the reporting entity include those of the Corporation (the primary government unit) and its component units. There were no entities that required inclusion as a component unit within the Corporation's financial statements.

**Basis of Presentation**

The basic financial statements have been prepared in conformity with the accounting principles and reporting guidelines established by the Governmental Accounting Standards Board (GASB). Special-purpose governments engaged in a single governmental program may combine the fund financial statements and the government-wide statements using a columnar format that reconciles individual line items of fund financial data to government-wide data in a separate column on the face of the financial statements rather than at the bottom of the statements or in an accompanying schedule.

**Basis of Accounting and Measurement Focus**

The government-wide financial statements are reported using the economic resources measurement focus and the accrual basis of accounting. Revenues are recorded when earned and expenditures are recorded when a liability is incurred, regardless of the timing of related cash flows.

Governmental fund financial statements are reported using the current financial resources measurement focus and the modified accrual basis of accounting. Revenues are recognized as soon as they are both measurable and available. Revenues are considered to be available when they are collectible within the current period or soon enough thereafter to pay liabilities of the current period. For this purpose, the Corporation considers revenues to be available if they are collected within 60 days of the end of the current fiscal period. Expenditures generally are recorded when a liability is incurred, as under accrual accounting. However, expenditures related to compensated absences are recorded only when payment is due.

The Corporation uses the following fund type -the General Fund. This fund is the Corporation's primary operating fund. It is used to account for all revenues and expenditures applicable to the general operations of the Corporation. The fund is additionally charged with all costs of operations for which a separate fund has not been established.

**Notes to Financial Statements**  
**June 30, 2011**  
**Citrus, Levy, Marion Regional Workforce Development Board, Inc.**

**NOTE 1 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (continued)**

**Budgets and Budgetary Process**

The Board of Directors adopts an annual operating budget, which can be amended by the Corporation throughout the year. The budget is adopted using the same basis of accounting that is used to reflect actual revenues and expenditures.

**Functional Allocation of Expenses**

The costs of providing the various programs and other activities have been summarized on a functional basis in the Statement of Activities. Accordingly, certain costs have been allocated among the programs and supporting services benefited.

**Receivables**

All receivables are reported at their gross value and, where appropriate, are reduced by the estimated portion that is expected to be uncollectible. No portion of receivables has been estimated as uncollectible by the Corporation. All receivables are considered fully collectible.

**Fund Balance**

Governmental funds report separate classifications of fund balance.

**Non-Spendable.** The non-spendable fund balance classification includes amounts that cannot be spent because they are either (a) not in spendable form or (b) legally or contractually required to be maintained intact.

**Restricted.** The restricted fund balance is defined as having restrictions (a) externally imposed by creditors (such as through debt covenants), grantors, contributors, or laws or regulations of other governments, or (b) imposed by law through constitutional provisions or enabling legislation.

**Committed.** Committed fund balance is defined as amounts that can only be used for specific purposes pursuant to constraints imposed by formal action of the Corporation's Board of Directors.

**Assigned.** Assigned fund balance is defined as amounts that are constrained by the Corporation's Board of Directors intent to be used for specific purposes, but are neither restricted nor committed. The Corporation has given the authority to assign fund balance to the Executive Director. Assigned fund balance includes spendable fund balance amounts established by the Executive Director that are intended to be used for specific purposes that are neither considered restricted or committed. Assignment of fund balance may be (a) made for a specific purpose that is narrower than the general purposes of the government itself; and/or (b) used to reflect the appropriation of a portion of existing unassigned fund balance to eliminate a projected deficit in the subsequent year's budget in an amount no greater than the projected excess of expected expenditures over expected revenues. Assigned fund balance shall reflect management's intended use of resources as set forth each year by the Executive Director. Assigned fund balance may or may not be appropriated for expenditure in the subsequent year depending on the timing of the project/reserve for which it was assigned.

**Unassigned.** Unassigned fund balance is the residual classification for the general fund.

It is the policy of the Corporation that they will use restricted resources to the extent which they are available, then committed resources, followed by assigned resources. Once these are consumed, the Corporation will then use unassigned resources. The Corporation does not have a formal policy requiring a minimum fund balance.

**Notes to Financial Statements**  
**June 30, 2011**  
**Citrus, Levy, Marion Regional Workforce Development Board, Inc.**

**NOTE 1 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (concluded)**

**Accounting Estimates**

The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenditures/expenses during that reported period. Actual results could differ from those estimates.

**Property and Equipment**

Property and equipment acquired is recorded as an expenditure in governmental funds and is stated at cost. Property and equipment are defined by the Corporation as assets with an initial, individual cost of \$5,000 or more and an estimated useful life of more than one year. Depreciation has been recorded using the straight-line method over estimated useful lives of 3 to 20 years as follows:

<u>Assets</u>	<u>Years</u>
Office Equipment	7
Miscellaneous Equipment	20
Data Processing Equipment	3-15

**Pension Plan**

The provision for pension cost is recorded on an annual basis. The Corporation's policy is to fund pension costs as they accrue. See Note 5.

**Cash**

The Corporation pools cash resources of its various funds and programs to facilitate the management of cash. Cash applicable to a particular program is readily identifiable. The balance in the pooled cash accounts is held at a bank that is a member of the State of Florida pool for pledging securities against fund deposits, and is available to meet current operating requirements. As a result, the Corporation has no need for a policy regarding deposit custodial credit risk.

**Prepaid Items**

Certain payments to vendors reflect costs applicable to future accounting periods and are recorded as prepaid items in both government-wide and fund financial statements. Prepaid assets are reported as "non-spendable" in the fund financial statements to indicate that prepaids do not represent available expendable resources.

**Vacation, Sick Leave, and Other Compensated Absences**

The Corporation's employees are entitled to certain compensated absences based on length of employment and other factors. With minor exceptions, compensated absences either vest or accumulate and are accrued when they are earned. Compensated absences are accrued at June 30, 2011 in the amount of \$49,802. See Note 4.

**Post Employment Healthcare Benefits**

The Corporation does not provide post employment healthcare benefits except those mandated by the Consolidated Omnibus Budget Reconciliation Act (COBRA). The requirements established by COBRA are fully funded by employees who elect coverage under the Act, and no direct costs are incurred by the Corporation.

**Notes to Financial Statements**  
**June 30, 2011**  
**Citrus, Levy, Marion Regional Workforce Development Board, Inc.**

**NOTE 2 – GOVERNMENT-WIDE VS. FUND FINANCIAL STATEMENTS**

**Governmental Fund Balance Sheet to Statement of Net Assets.** Amounts reported for Governmental activities in the statement of net assets are different because:

**Capital Assets.** Capital assets used in governmental activities are not reported in the governmental funds.

Cost of Capital Assets	\$407,703
Accumulated Depreciation	<u>(299,011)</u>
Net Capital Assets	<u>\$108,692</u>

**Long-term Liabilities.** Long-term liabilities are not reported in the governmental funds.

Compensated Absences	<u>\$ 49,802</u>
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**Governmental Fund Revenues, Expenditures and Changes in Fund Balance to Statement of Activities.** Amounts reported for governmental activities in the statement of activities are different because:

Governmental funds report capital outlays as expenditures. However, in the statement of activities, the cost of those assets is depreciated over their estimated useful lives.

Current Year Expenditures for Capital Assets	<u>\$ 30,122</u>
Current Year Depreciation Expense	<u>\$ (54,895)</u>

An increase in compensated absences liability decreases net assets, but has no effect on fund balance.

Current Year Net Decrease in Compensated Absences	<u>\$ 5,370</u>
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**NOTE 3 – CAPITAL ASSETS AND DEPRECIATION**

Capital asset activity for the year ended June 30, 2011 was as follows:

	Balance July 1, 2010	Additions	Deletions	Balance June 30, 2011
<b>Capital Assets Being Depreciated:</b>				
Office Equipment	\$ 47,163	\$ --	\$ --	\$ 47,163
Miscellaneous Equipment	199,320	--	64,950	134,370
Data Processing Equipment	196,047	30,122	--	226,170
<b>Total Capital Assets Being Depreciated</b>	<b>\$ 442,530</b>	<b>\$ 30,122</b>	<b>\$ 64,950</b>	<b>\$ 407,703</b>
<b>Accumulated Depreciation:</b>				
Office Equipment	\$ 32,092	\$ 4,943	\$ --	\$ 37,035
Miscellaneous Equipment	117,113	32,478	64,950	84,642
Data Processing Equipment	159,860	17,474	--	177,334
<b>Total Accumulated Depreciation</b>	<b>309,065</b>	<b>54,895</b>	<b>64,950</b>	<b>299,011</b>
<b>Net Capital Assets</b>	<b>\$ 133,465</b>	<b>\$ (24,773)</b>	<b>\$ --</b>	<b>\$108,692</b>

**Notes to Financial Statements**  
**June 30, 2011**  
**Citrus, Levy, Marion Regional Workforce Development Board, Inc.**

**NOTE 4 – LONG-TERM LIABILITIES**

Long-term liabilities consist of compensated absences.

	Balance July 1, <u>2010</u>	<u>Additions</u>	<u>Deletions</u>	Balance June 30, <u>2011</u>	Amount Due <u>In 1 Year</u>
Compensated Absences	\$ 55,172	\$ 89,859	\$ 95,229	\$ 49,802	\$ 49,802

**NOTE 5 – PENSION PLAN**

The Corporation authorized the establishment of a defined contribution benefit plan as governed by Section 403(b) of the Internal Revenue Code. All employees 18 years or older are eligible to participate. Employees may contribute to the plan by entering into a salary reduction agreement with the Corporation. The Corporation shall determine on an annual basis, in its sole discretion, the amount of employer contributions to be made to the plan for each plan year. Employee participants shall at all times have a fully vested and nonforfeitable interest in their account. For the year ended June 30, 2011, the Corporation contributed \$84,867 to the plan and employees contributed \$50,600.

**NOTE 6 – OBLIGATION UNDER OPERATING LEASES**

The Corporation leases office space under contracts accounted for as operating leases. Total lease payments made during the period ended June 30, 2011 were \$263,884. Minimum future lease payments under these operating leases are as follows:

<u>For the Year Ended June 30</u>	
2012	\$ 41,921
2013	16,830
Total	<u>\$ 58,751</u>

**NOTE 7 – OSMIS RECONCILIATION**

Reconciliations of the Corporation's financial records to the expenditures reported in the One Stop Management Information System (OSMIS) are required to be completed monthly by the Corporation for all awards from the Agency for Workforce Innovation (AWI). These reconciliations were completed as required, and the Corporation's financial records agree to the reported expenditures in OSMIS for the year ended June 30, 2011.

**NOTE 8 – COMMITMENTS, CONTINGENCIES, AND CLAIMS**

The Corporation receives substantially all of its support through federal and state funding. A significant reduction in the level of this support, if this were to occur, would have an effect on the Corporation's programs and activities.

Grants require the fulfillment of certain conditions set forth in the instrument of the grant. Failure to fulfill the conditions could result in the return of the funds to grantors. Although this is a possibility, the Board and Management deems the contingency remote, since by accepting the grants and their terms, it has accommodated the objectives of the Corporation to the provisions of the grants.

## Notes to Financial Statements

June 30, 2011

### Citrus, Levy, Marion Regional Workforce Development Board, Inc.

#### **NOTE 9 – RISK MANAGEMENT**

The Corporation is exposed to various risks of loss, including general liability, personal injury, workers compensation, and errors and omissions. To manage its risks, the Corporation has purchased commercial insurance. Settled claims resulting from these risks have not exceeded commercial coverage in the last three years.

DRAFT

**Budgetary Comparison Schedule – General Fund**  
**For the Year Ended June 30, 2011**  
**Citrus, Levy, Marion Regional Workforce Development Board Inc.**

	<u>Original Budget</u>	<u>Final Budget</u>	<u>Actual</u>	<u>Variance Positive (Negative)</u>
<b>Revenues</b>				
Federal Grants	\$ 15,728,004	\$ 11,624,498	\$ 11,624,498	\$ --
State Grants	--	340	340	--
Other Non - Governmental Grants	--	77,825	77,825	--
Program Income	--	--	35,927	35,927
Interest Income	--	--	797	797
<b>Total Revenues</b>	<u>\$ 15,728,004</u>	<u>\$ 11,702,663</u>	<u>\$ 11,739,387</u>	<u>\$ 36,724</u>
<b>Expenditures</b>				
Administrative	\$ 450,783	\$ 451,857	457,227	\$ (5,370)
Direct Client Services	7,476,512	3,439,143	3,443,042	(3,899)
Contracted Service Providers:				
Direct Client Services	<u>7,800,709</u>	<u>7,811,663</u>	<u>7,811,663</u>	<u>--</u>
<b>Total Expenditures</b>	<u>15,728,004</u>	<u>11,702,663</u>	<u>11,711,932</u>	<u>(9,269)</u>
<b>Excess of Revenues over Expenditures</b>	<u>\$ --</u>	<u>\$ --</u>	27,455	<u>\$ 27,455</u>
<b>Fund Balance, July 1, 2010</b>			<u>63,777</u>	
<b>Fund Balance, June 30, 2011</b>			<u>\$ 91,232</u>	

Note to Schedule:

An annual Budget is adopted on the modified accrual basis of accounting, consistent with generally accepted accounting principles. Amendments to the budget can only be made with the approval of the Board of Directors. The fund is the legal level of control.

**Schedule of Expenditures of Federal Awards**  
**For the Year Ended June 30, 2011**  
**Citrus, Levy, Marion Regional Workforce Development Board Inc.**

Federal/State Grantor/Pass Through Grantor/Program Title	Pass Through Agency	CFDA/CSFA Number	Amounts Paid to Subrecipients	Expenditures
<u>US Department of Labor:</u>				
ARRA Pathways Out of Poverty	--	17.275	\$ 863,748	\$ 1,077,969
National Emergency Grant	--	17.277	918,251	1,113,858
WIA Adult	AWI	17.258	614,875	821,949
ARRA WIA Adult	AWI	17.258	52,532	71,475
WIA Youth	AWI	17.259	904,476	1,135,685
ARRA WIA Youth	AWI	17.259	31,942	31,942
WIA Dislocated Worker	AWI	17.278	1,435,400	1,748,083
ARRA WIA Dislocated Worker	AWI	17.278	326,655	397,525
ARRA WIA Dislocated Worker NEG OJT	AWI	17.277	102,572	124,186
Total WIA Cluster			4,386,703	5,444,702
Wagner Peyser	AWI	17.207	108,068	374,451
ARRA Wagner Peyser	AWI	17.207	31,188	35,732
Disabled Veterans' Outreach Program	AWI	17.801	11,972	31,599
Local Veterans' Employment Representative	AWI	17.804	36,944	78,283
Total Employment Services Cluster			188,172	520,065
Unemployment	AWI	17.225	94,733	119,088
Reemployment and Assessments	AWI	17.225	493,150	613,511
Total Unemployment Insurance			587,883	732,599
Trade Adjustment Assistance	AWI	17.245	43,500	53,134
Disability Navigator	AWI	17.266	29,228	30,766
<u>US Department of Agriculture:</u>				
Food Stamp and Employment Training	AWI	10.551	228,910	280,000
<u>US Department of Health and Human Services:</u>				
Welfare Transition	DCF/AWI	93.558	1,578,574	2,019,187
ARRA Welfare Transition	AWI	93.714	--	1,466,076
Total TANF Cluster			1,578,574	3,485,263
<b>Total Federal Expenditures</b>			<b>7,906,718</b>	<b>11,624,498</b>
<u>Florida Department of Education:</u>				
Ready to Work	AWI	48.106	--	340
<b>Total State Expenditures</b>			<b>--</b>	<b>340</b>
<b>Total State and Federal Expenditures</b>			<b>\$ 7,906,718</b>	<b>\$ 11,624,838</b>

**NOTE 1 – Basis of Presentation**

Expenditures included in this schedule are presented on the modified accrual basis of accounting in accordance with accounting principles generally accepted for governmental organizations.

**NOTE 2 – Explanation of Abbreviations for Pass-Through Entities**

AWI – Agency for Workforce Innovation

DCF/AWI – Florida Department of Children and Family Services through Agency for Workforce Innovation

# Kattell and Company, P.L.

*Serving the Nonprofit Community*

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## MANAGEMENT LETTER

Board of Directors  
Citrus, Levy, Marion Regional Workforce Development Board, Inc.  
Ocala, Florida.

We have audited the financial statements of Citrus, Levy, Marion Regional Workforce Development Board, Inc. (the Corporation) as of and for the fiscal year ended June 30, 2011, and have issued our report thereon dated **November XX, 2011**.

We conducted our audit in accordance with auditing standards generally accepted in the United States of America; the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States; and OMB Circular A-133, *Audits of States, Local Governments, and Non-Profits Organizations*. We have issued our Independent Auditor's Report on Internal Control over Financial Reporting and Compliance and Other Matters, Independent Auditor's Report on Compliance with Requirements Applicable to each Major Federal Program and on Internal Control over Compliance, and Schedule of Findings and Questioned Costs. Disclosures in those reports and schedule, which are dated **November XX, 2011**, should be considered in conjunction with this management letter.

Additionally, our audit was conducted in accordance with:

- Chapter 10.550, Rules of the Auditor General, which governs the conduct of local governmental entity audits performed in the State of Florida.
- Special audit guidance provided by the Agency for Workforce Innovation (AWI).

This letter includes the following information, which is not included in the aforementioned auditor's reports or schedule.

- Section 10.554(1)(i)1., Rules of the Auditor General, requires that we determine whether or not corrective actions have been taken to address findings and recommendations made in the preceding annual financial audit report. The Corporation has satisfactorily addressed prior year audit findings.
- Section 10.554(1)(i)2., Rules of the Auditor General, requires our audit to include a review of the provisions of Section 218.415, Florida Statutes, regarding the investment of public funds. In connection with our audit, we determined that the Corporation complied with Section 218.415, Florida Statutes.
- Section 10.554(1)(i)3., Rules of the Auditor General, requires that we address in the management letter any recommendations to improve financial management. The special audit guidance provided by AWI requires disclosure in this management letter for those findings and observations not otherwise included in the aforementioned auditor's reports or schedule. In connection with our audit, we did not have any such findings, observations, or recommendations
- Section 10.554(1)(i)4., Rules of the Auditor General, requires that we address violations of provisions of contracts or grant agreements, or abuse, that have an effect on the financial statements that is less than material but more than inconsequential. In connection with our audit, we did not have any such findings.

November XX, 2011

Board of Directors

Citrus, Levy, Marion Regional Workforce Development Board, Inc.

- Section 10.554(1)(i)5., Rules of the Auditor General, provides that the auditor may, based on professional judgment, report the following matters that have an inconsequential effect on financial statements, considering both quantitative and qualitative factors: (1) violations of provisions of contracts or grant agreements, fraud, illegal acts, or abuse, and (2) control deficiencies that are not significant deficiencies. In connection with our audit, we did not choose to report any such findings.
- Section 10.554(1)(i) 6., Rules of the Auditor General, requires that the name or official title and legal authority for the primary government and each component unity of the reporting entity be disclosed in this management letter, unless disclosed in the notes to the financial statements. See Financial Reporting Entity under Note 1 to the financial statements. The Corporation does not have any component units.
- Section 10.554(1)(i)7.a., Rules of the Auditor General, requires a statement be included as to whether or not the local governmental entity has met one or more of the conditions described in Section 218.503(1), Florida Statutes, and identification of the specific condition(s) met. In connection with our audit, we determined that the Corporation did not meet any of the conditions described in Section 218.503(1), Florida Statutes.
- Section 10.554(1)(i)7.b., Rules of the Auditor General, requires that we determine whether the annual financial report for the Corporation for the fiscal year ended June 30, 2011 filed with the Florida Department of Financial Services pursuant to Section 218.32(1)(a), Florida Statutes, is in agreement with the annual financial audit report for the fiscal year ended June 30, 2011. In connection with our audit, we determined that these two reports were in substantial agreement.
- Pursuant to Sections 10.554(1)(i)7.c. and 10.556(7), Rules of the Auditor General, we applied financial condition assessment procedures. It is management's responsibility to monitor the financial condition, and our financial condition assessment was based in part on representations made by management and the review of financial information provided by same.

Pursuant to Chapter 119, Florida Statutes, this management letter is a public record and its distribution is not limited. Auditing standards generally accepted in the United States of America require us to indicate that this letter is intended solely for the information and use of management and the Board of Directors of the Corporation, and the Florida Auditor General, and is not intended to be and should not be used by anyone other than these specified parties.

*Kattell and Company, P.L.*

Gainesville, FL

November XX, 2011

# Kattell and Company, P.L.

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## **REPORT ON INTERNAL CONTROL OVER FINANCIAL REPORTING AND ON COMPLIANCE AND OTHER MATTERS**

Board of Directors  
Citrus, Levy, Marion Regional Workforce Development Board, Inc.  
Ocala, Florida

We have audited the financial statements of Citrus, Levy, Marion Regional Workforce Development Board, Inc. (the Corporation) as of and for the year ended June 30, 2011, and have issued our report thereon dated February 4, 2011. We conducted our audit in accordance with auditing standards generally accepted in the United States of America; the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States; and the special audit guidance provided by the Agency for Workforce Innovation.

### **Internal Control Over Financial Reporting**

Management of the Corporation is responsible for establishing and maintaining effective internal control over financial reporting (internal control). In planning and performing our audit, we considered the Corporation's internal control as a basis for designing our auditing procedures for the purpose of expressing our opinion on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of the Corporation's internal control. Accordingly, we do not express an opinion on the effectiveness of the Corporation's internal control.

A deficiency in internal control exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct misstatements on a timely basis. A material weakness is a deficiency, or a combination of deficiencies, in internal control such that there is a reasonable possibility that a material misstatement of the entity's financial statements will not be prevented, or detected and corrected on a timely basis.

Our consideration of the internal control was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control that might be deficiencies, significant deficiencies, or material weaknesses. We did not identify any deficiencies in internal control over financial reporting that we consider to be material weaknesses, as defined above.

### **Compliance and Other Matters**

As part of obtaining reasonable assurance about whether the Corporation's financial statements are free of material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements, noncompliance with which could have a direct and material effect on the determination of financial statement amounts. However, providing an opinion on compliance with those provisions was not an objective of our audit, and accordingly, we do not express such an opinion. The results of our tests disclosed no instances of noncompliance or other matters that are required to be reported under *Government Auditing Standards*.

### **Concluding Matters**

This report is intended solely for the information and use of the Board of Directors, management, and federal awarding agencies and pass-through entities, and is not intended to be and should not be used by anyone other than these specified parties.

*Kattell and Company, P.L.*

February 4, 2011  
Gainesville, Florida

# Kattell and Company, P.L.

*Serving the Nonprofit Community*

808-B NW 16<sup>th</sup> Avenue Gainesville, Florida 32601 TEL: 352-395-6565 FAX: 352-395-6636 www.kattell.com

## **Report on Compliance with Requirements Applicable to Each Major Program and on Internal Control over Compliance in Accordance with OMB Circular A-133**

Board of Directors  
Citrus, Levy, Marion Regional Workforce Development Board, Inc.  
Ocala, Florida

### **Compliance**

We have audited the compliance of Citrus, Levy, Marion Regional Workforce Development Board, Inc. (the Corporation) with the types of compliance requirements described in the U.S. Office of Management and Budget (OMB) *Circular A-133 Compliance Supplement* that could have a direct and material effect on each of its major federal programs for the year ended June 30, 2011. The Corporation's major federal programs are identified in the summary of auditor's results section of the accompanying schedule of findings and questioned costs. Compliance with the requirements of laws, regulations, contracts, and grants applicable to each of its major federal programs is the responsibility of the Corporation's management. Our responsibility is to express an opinion on the Corporation's compliance based on our audit.

We conducted our audit of compliance in accordance with auditing standards generally accepted in the United States of America; the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States; OMB Circular A-133, *Audits of States, Local Governments, and Non-Profit Organizations*, and the special audit guidance provided by the State's Agency for Workforce Innovation. Those standards, OMB Circular A-133, and the special audit guidance require that we plan and perform the audit to obtain reasonable assurance about whether noncompliance with the types of compliance requirements referred to above that could have a direct and material effect on a major federal program occurred. An audit includes examining, on a test basis, evidence about the Corporation's compliance with those requirements and performing such other procedures as we considered necessary in the circumstances. We believe that our audit provides a reasonable basis for our opinion. Our audit does not provide a legal determination of the Corporation's compliance with those requirements.

In our opinion, the Corporation complied, in all material respects, with the requirements referred to above that have a direct and material effect on each of its major federal programs for the year ended June 30, 2011.

### **Internal Control over Compliance**

Management of the Corporation is responsible for establishing and maintaining effective internal control over compliance with the requirements of laws, regulations, contracts, and grants applicable to federal programs. In planning and performing our audit, we considered the Corporation's internal control over compliance with the requirements that could have a direct and material effect on a major federal program to determine our auditing procedures for the purpose of expressing our opinion on compliance and to test and report on internal control over compliance in accordance with OMB Circular A-133, but not for the purpose of expressing an opinion on the effectiveness of internal control over compliance. Accordingly, we do not express an opinion on the effectiveness of the Corporation's internal control over compliance.

A deficiency in internal control over compliance exists when the design or operation of a control over compliance does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, noncompliance with a type of compliance requirement of a federal program on a timely basis. A material weakness in internal control over compliance is a deficiency, or combination of deficiencies, in internal control over compliance, such that there is a reasonable possibility that material noncompliance with a type of compliance requirement of a federal program will not be prevented, or detected and corrected, on a timely basis.

Our consideration of internal control over compliance was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control over compliance that might be deficiencies, significant deficiencies, or material weaknesses. We did not identify any deficiencies in internal control over compliance that we consider to be material weaknesses, as defined above.

**Concluding Matters**

This report is intended solely for the information and use of the Board of Directors, management, and applicable Federal and State agencies, and is not intended to be and should not be used by anyone other than these specified parties.

*Kattell and Company, P.L.*

November XX, 2011  
Gainesville, Florida

**Schedule of Findings and Questioned Costs**  
**Year Ended June 30, 2011**  
**Citrus, Levy, Marion Regional Workforce Development Board, Inc.**

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Section I – Summary of Auditors’ Results

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**Financial Statements**

Type of auditors’ report issued:	Unqualified
Internal control over financial reporting:	
• Material weaknesses identified?	NO
• Significant deficiencies identified?	NO
Noncompliance material to financial statements?	NO

**Federal Awards**

Internal control over major programs:	
• Material weaknesses identified?	NO
• Significant deficiencies identified?	NO
Type of auditors’ report issued on compliance for major programs:	Unqualified.
Any audit findings disclosed that are required to be reported in accordance with section 510(a) of OMB Circular A-133?	NO

**Identification of Major Federal Programs**

<u>CFDA Number</u>	<u>Name of Federal Program</u>
17.258, 17.259, 17.277, and 17.278	Workforce Investment Act Cluster
17.207, 17.801 and 17.804	Employment Service Cluster
17.225	Unemployment Insurance
93.558, 93.714	TANF Cluster
17.275	Pathways Out of Poverty

**Other Disclosures**

Dollar threshold used to distinguish between type A and type B programs:	\$348,735
Auditee qualified as low-risk?	YES

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Section II – Financial Statement Findings

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No matters are reportable.

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Section III – Federal Award Findings and Questioned Costs

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No matters are reportable.

Form **990**  
Department of the Treasury  
Internal Revenue Service**Return of Organization Exempt From Income Tax**  
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)  
▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No. 1545-0047

**2010****Open to Public Inspection****A For the 2010 calendar year, or tax year beginning 07/01/10, and ending 06/30/11**

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization <b>Citrus Levy Marion Regional Workforce Development Board, Inc.</b>		<b>D</b> Employer identification number <b>59-3409057</b>
	Doing Business As <b>See Schedule O</b>		<b>E</b> Telephone number <b>352-873-7939</b>
	Number and street (or P.O. box if mail is not delivered to street address) <b>3003 SW College Road</b>	Room/suite <b>205</b>	
	City or town, state or country, and ZIP + 4 <b>Ocala FL 34474</b>		<b>G</b> Gross receipts\$ <b>11,775,314</b>
	<b>F</b> Name and address of principal officer: <b>Thomas E. Skinner, Jr., CEO</b> <b>3003 SW College Road</b> <b>Ocala FL 34474</b>		<b>H(a)</b> Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)

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

**J** Website: ▶ **www.clmworkforce.com** **H(c)** Group exemption number ▶

**K** Form of organization:  Corporation  Trust  Association  Other ▶ **L** Year of formation: **1996** **M** State of legal domicile: **FL**

**Part I Summary**

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities: <b>The Organization brings together citizens, employers and educational providers to develop programs to support high-quality education/training and employment services to meet regional workforce needs.</b>		
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	<b>23</b>
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	<b>23</b>
	<b>5</b> Total number of individuals employed in calendar year 2010 (Part V, line 2a)	<b>5</b>	<b>24</b>
	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	<b>23</b>
	<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	
<b>b</b> Net unrelated business taxable income from Form 990-T, line 34	<b>7b</b>	<b>0</b>	
<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	<b>9</b> Program service revenue (Part VIII, line 2g)	<b>11,408,820</b>	<b>11,774,517</b>
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<b>1,449</b>	<b>797</b>
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		
	<b>12</b> Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<b>11,410,269</b>	<b>11,775,314</b>
<b>Expenses</b>	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1–3)	<b>8,580,630</b>	<b>8,608,598</b>
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)		
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	<b>1,238,763</b>	<b>1,282,612</b>
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)		
	<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–24f)	<b>1,673,876</b>	<b>1,840,125</b>
	<b>18</b> Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	<b>11,493,269</b>	<b>11,731,335</b>
<b>19</b> Revenue less expenses. Subtract line 18 from line 12	<b>-83,000</b>	<b>43,979</b>	
<b>Net Assets or Fund Balances</b>	<b>20</b> Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	<b>21</b> Total liabilities (Part X, line 26)	<b>752,520</b>	<b>531,617</b>
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20	<b>610,450</b>	<b>381,495</b>
		<b>142,070</b>	<b>150,122</b>

**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.

<b>Sign Here</b>	Signature of officer <b>Thomas E. Skinner, Jr.</b>		Date <b>Executive Director</b>	
	Type or print name and title			
<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if PTIN self-employed
	Firm's name ▶ <b>Kattell &amp; Company, P.L.</b>	Firm's EIN ▶	<b>11/08/11</b>	
	Firm's address ▶ <b>808B NW 16th Ave</b> <b>Gainesville, FL 32601</b>	Phone no.	<b>352-395-6565</b>	

May the IRS discuss this return with the preparer shown above? (see instructions)  Yes  No**For Paperwork Reduction Act Notice, see the separate instructions.**Form **990** (2010)

**Part III Statement of Program Service Accomplishments**

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

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

**The Organization brings together citizens, employers and educational providers to develop programs to support high-quality education/training and employment services to meet regional workforce needs.**

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

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

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

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

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

**4a** (Code: ) (Expenses \$ **10,384,179** including grants of \$ **7,843,294** ) (Revenue \$ )

**To provide case management and other services to monitor and aid in the job placement and job maintenance of the economically disadvantaged and dislocated workers. To include referrals to training that will assist in employability.**

Draft

**4b** (Code: ) (Expenses \$ **160,117** including grants of \$ ) (Revenue \$ )

**Outreach activities including the collection, publication and dissemination of information on program services directed toward economically disadvantaged, hard-to-serve, dislocated and other eligible individuals.**

**4c** (Code: ) (Expenses \$ **765,304** including grants of \$ **765,304** ) (Revenue \$ )

**To provide a variety of placement-related services without charge to job seekers and to employers seeking qualified individuals to fill job openings, provide jobs and job training to disabled and other veterans.**

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

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

**4e Total program service expenses ► 11,309,600**

**Part IV Checklist of Required Schedules**

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		X
4	<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		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	X	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII		X
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX		X
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		X
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H		X
b	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? <b>Note.</b> Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)		

**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 governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	<input checked="" type="checkbox"/>	
<b>22</b> Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	<input checked="" type="checkbox"/>	
<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? If "Yes," complete Schedule J		<input checked="" type="checkbox"/>
<b>24a</b> Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25		<input checked="" type="checkbox"/>
<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 Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		<input checked="" type="checkbox"/>
<b>b</b> Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		<input checked="" type="checkbox"/>
<b>26</b> Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II		<input checked="" type="checkbox"/>
<b>27</b> Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III		<input checked="" type="checkbox"/>
<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? If "Yes," complete Schedule L, Part IV		<input checked="" type="checkbox"/>
<b>b</b> A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		<input checked="" type="checkbox"/>
<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? If "Yes," complete Schedule L, Part IV		<input checked="" type="checkbox"/>
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		<input checked="" type="checkbox"/>
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		<input checked="" type="checkbox"/>
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		<input checked="" type="checkbox"/>
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		<input checked="" type="checkbox"/>
<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? If "Yes," complete Schedule R, Part I		<input checked="" type="checkbox"/>
<b>34</b> Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1		<input checked="" type="checkbox"/>
<b>35</b> Is any related organization a controlled entity within the meaning of section 512(b)(13)?		<input checked="" type="checkbox"/>
<b>a</b> Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
<b>36 Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		<input checked="" type="checkbox"/>
<b>37</b> Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		<input checked="" type="checkbox"/>
<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	<input checked="" type="checkbox"/>	

**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		
<b>1b</b>	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
<b>1c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		
<b>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		
<b>2b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)	X	
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
<b>3b</b>	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		
<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)?		X
<b>4b</b>	If "Yes," enter the name of the foreign country: <input type="checkbox"/> 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?		X
<b>5b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
<b>5c</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?		X
<b>6b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
<b>7a</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?		X
<b>7b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided?		X
<b>7c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
<b>7d</b>	If "Yes," indicate the number of Forms 8282 filed during the year		0
<b>7e</b>	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
<b>7f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
<b>7g</b>	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		X
<b>7h</b>	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		X
<b>8</b>	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
<b>9</b>	<b>Sponsoring organizations maintaining donor advised funds.</b>		
<b>9a</b>	Did the organization make any taxable distributions under section 4966?		
<b>9b</b>	Did the organization make a distribution to a donor, donor advisor, or related person?		
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter:		
<b>10a</b>	Initiation fees and capital contributions included on Part VIII, line 12		
<b>10b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter:		
<b>11a</b>	Gross income from members or shareholders		
<b>11b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?		
<b>12b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		
<b>13</b>	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>		
<b>13a</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.		
<b>13b</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		
<b>13c</b>	Enter the amount of reserves on hand		
<b>14a</b>	Did the organization receive any payments for indoor tanning services during the tax year?		X
<b>14b</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>1b</b>	Enter the number of voting members included in line 1a, above, who are independent		
<b>2</b>	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		<b>X</b>
<b>3</b>	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		<b>X</b>
<b>4</b>	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		<b>X</b>
<b>5</b>	Did the organization become aware during the year of a significant diversion of the organization's assets?		<b>X</b>
<b>6</b>	Does the organization have members or stockholders?		<b>X</b>
<b>7a</b>	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		<b>X</b>
<b>7b</b>	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		<b>X</b>
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>8a</b>	The governing body?	<b>X</b>	
<b>8b</b>	Each committee with authority to act on behalf of the governing body?	<b>X</b>	
<b>9</b>	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		<b>X</b>

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

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

**Section C. Disclosure**

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

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

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

**20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ► **Susan Heller** **2703 NE 14th Street**

**Ocala****FL 34470****352-873-7939**

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

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) Michael Biske Member	1.00	X					0	0	0	
(2) Theresa Flick Member	1.00	X					0	0	0	
(3) Rob Adamiak Member	1.00	X					0	0	0	
(4) Pat Redish Past Chair	1.00	X		X			0	0	0	
(5) Paula Anspach Member	1.00	X					0	0	0	
(6) William D'Aiuto Member	1.00	X					0	0	0	
(7) Robert Goldberg Member	1.00	X					0	0	0	
(8) Desmond Knight Member	1.00	X					0	0	0	
(9) Darlene Goddard Vice Chair	1.00	X		X			0	0	0	
(10) Richard Martinez Member	1.00	X					0	0	0	
(11) Mike Melfi Member	1.00	X					0	0	0	
(12) Suzanne Mills Chair	1.00	X		X			0	0	0	
(13) Ted Purser Member	1.00	X					0	0	0	
(14) Fred Morgan Secretary-Treasurer	1.00	X		X			0	0	0	
(15) Jack Reynolds Member	1.00	X					0	0	0	
(16) Judy Houlios Member	1.00	X					0	0	0	

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(17) <b>Steven Jacobs</b> Member	1.00	X						0	0	0
(18) <b>Brad Nimmo</b> Member	1.00	X						0	0	0
(19) <b>Sarah Stroh</b> Member	1.00	X						0	0	0
(20) <b>Gina Tovine</b> Member	1.00	X						0	0	0
(21) <b>Kevin Cunningham</b> Board Member	1.00	X						0	0	0
(22) <b>Mark Paugh</b> Board Member	1.00	X						0	0	0
(23) <b>John Siefert</b> Board Member	1.00	X						0	0	0
(24) <b>Thomas E Skinner, Jr</b> CEO	40.00			X				108,886	0	19,967
(25) .....										
(26) .....										
(27) .....										
(28) .....										
<b>1b Sub-total</b> .....								<b>108,886</b>		<b>19,967</b>
<b>c Total from continuation sheets to Part VII, Section A</b> .....										
<b>d Total (add lines 1b and 1c)</b> .....								<b>108,886</b>		<b>19,967</b>

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2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **▶ 1**

	Yes	No
3 Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual .....		<b>X</b>
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>X</b>
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>X</b>

**Section B. Independent Contractors**

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization.

(A) Name and business address	(B) Description of services	(C) Compensation
<b>Henkels &amp; McCoy</b> <b>Chicago</b>	<b>2268 Collections Center Dr</b> <b>Youth Services</b>	<b>634,537</b>

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **▶ 1**

1

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**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>1b</b> Membership dues					
	<b>1c</b> Fundraising events					
	<b>1d</b> Related organizations					
	<b>1e</b> Government grants (contributions)	11,660,765				
	<b>1f</b> All other contributions, gifts, grants, and similar amounts not included above	113,752				
	<b>g</b> Noncash contributions included in lines 1a-1f: \$					
	<b>h Total.</b> Add lines 1a-1f	▶ 11,774,517				
<b>Program Service Revenue</b>	<b>2a</b> .....					
	<b>b</b> .....					
	<b>c</b> .....					
	<b>d</b> .....					
	<b>e</b> .....					
	<b>f</b> All other program service revenue					
	<b>g Total.</b> Add lines 2a-2f	▶				
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts)		797		797	
	<b>4</b> Income from investment of tax-exempt bond proceeds					
	<b>5</b> Royalties					
	<b>6a</b> Gross Rents	(i) Real				
		(ii) Personal				
	<b>b</b> Less: rental exps.					
	<b>c</b> Rental inc. or (loss)					
	<b>d</b> Net rental income or (loss)	▶				
	<b>7a</b> Gross amount from sales of assets other than inventory	(i) Securities				
		(ii) Other				
	<b>b</b> Less: cost or other basis & sales exps.					
	<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>				
	<b>b</b> Less: direct expenses	<b>b</b>				
<b>c</b> Net income or (loss) from fundraising events	▶					
<b>9a</b> Gross income from gaming activities. See Part IV, line 19	<b>a</b>					
<b>b</b> Less: direct expenses	<b>b</b>					
<b>c</b> Net income or (loss) from gaming activities	▶					
<b>10a</b> Gross sales of inventory, less returns and allowances	<b>a</b>					
<b>b</b> Less: cost of goods sold	<b>b</b>					
<b>c</b> Net income or (loss) from sales of inventory	▶					
Miscellaneous Revenue	<b>Busn. Code</b>					
<b>11a</b> .....						
<b>b</b> .....						
<b>c</b> .....						
<b>d</b> All other revenue						
<b>e Total.</b> Add lines 11a-11d	▶					
<b>12 Total revenue.</b> See instructions.	▶	11,775,314	0	0	797	

**Part IX Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.  
All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	7,303,764	7,303,764		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22	1,304,834	1,304,834		
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	139,682	100,250	39,432	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	820,158	599,810	220,348	
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	73,979	58,150	15,829	
9 Other employee benefits	173,030	144,182	28,848	
10 Payroll taxes	75,763	62,846	12,917	
11 Fees for services (non-employees):				
a Management				
b Legal	4,837		4,837	
c Accounting	17,038		17,038	
d Lobbying				
e Professional fundraising services. See Part IV, line 7				
f Investment management fees				
g Other	211,544	211,544		
12 Advertising and promotion	50,511	50,414	97	
13 Office expenses	59,495	49,289	10,206	
14 Information technology	140,209	110,627	29,582	
15 Royalties				
16 Occupancy	274,083	274,083		
17 Travel	83,181	54,245	28,936	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	41,507	37,301	4,206	
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	54,895	54,895		
23 Insurance	6,243	2,567	3,676	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.)				
a <b>Subcontractors-Programs</b>	676,066	676,066		
b <b>Non-consumable Supplies</b>	195,731	195,731		
c <b>Dues &amp; Memberships</b>	19,720	14,153	5,567	
d <b>Payroll Service Charges</b>	4,300	4,300		
e <b>Bank Charges</b>	765	549	216	
f All other expenses				
<b>25 Total functional expenses.</b> Add lines 1 through 24f	<b>11,731,335</b>	<b>11,309,600</b>	<b>421,735</b>	<b>0</b>
<b>26 Joint costs.</b> Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

**Part X Balance Sheet**

		(A)		(B)
		Beginning of year		End of year
<b>Assets</b>	1	Cash—non-interest bearing		1
	2	Savings and temporary cash investments	270,627	2 153,820
	3	Pledges and grants receivable, net	311,151	3 255,207
	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	37,277	9 13,898
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 407,703	
	b	Less: accumulated depreciation	10b 299,011	10c 108,692
	11	Investments—publicly traded securities		11
	12	Investments—other securities. See Part IV, line 11		12
	13	Investments—program-related. See Part IV, line 11		13
	14	Intangible assets		14
	15	Other assets. See Part IV, line 11		15
16	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34)	752,520	16 531,617	
<b>Liabilities</b>	17	Accounts payable and accrued expenses	610,450	17 381,495
	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. Complete Part X of Schedule D		25
	26	<b>Total liabilities.</b> Add lines 17 through 25	610,450	26 381,495
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b>			
	27	Unrestricted net assets	142,070	27 150,122
	28	Temporarily restricted net assets		28
	29	Permanently restricted net assets		29
	<b>Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.</b>			
	30	Capital stock or trust principal, or current funds		30
	31	Paid-in or capital surplus, or land, building, or equipment fund		31
	32	Retained earnings, endowment, accumulated income, or other funds		32
33	<b>Total net assets or fund balances</b>	142,070	33 150,122	
34	<b>Total liabilities and net assets/fund balances</b>	752,520	34 531,617	

Form **990** (2010)

**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>	<b>11,775,314</b>
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	<b>11,731,335</b>
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	<b>43,979</b>
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	<b>4</b>	<b>142,070</b>
<b>5</b>	Other changes in net assets or fund balances (explain in Schedule O)	<b>5</b>	
<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>	<b>186,049</b>

**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?		<b>X</b>
<b>b</b> Were the organization's financial statements audited by an independent accountant?	<b>X</b>	
<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>X</b>	
<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 checked="" 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?	<b>X</b>	
<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.	<b>X</b>	

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SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047 2010 Open to Public Inspection

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

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

Department of the Treasury Internal Revenue Service

Name of the organization Citrus Levy Marion Regional Workforce Development Board, Inc. Employer identification number 59-3409057

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 X 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?

Table with 2 columns: Yes, No. Rows for 11g(i), 11g(ii), 11g(iii).

h Provide the following information about the supported organization(s).

Table with 7 columns: (i) Name of supported organization, (ii) EIN, (iii) Type of organization, (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. Rows (A) through (E) and Total.

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

Schedule A (Form 990 or 990-EZ) 2010

**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) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	5,765,548	4,852,890	6,312,566	11,405,355	11,774,517	40,110,876
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 <b>Total.</b> Add lines 1 through 3	5,765,548	4,852,890	6,312,566	11,405,355	11,774,517	40,110,876
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 <b>Public support.</b> Subtract line 5 from line 4						40,110,876

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4	5,765,548	4,852,890	6,312,566	11,405,355	11,774,517	40,110,876
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	12,780	5,174	611	1,449	797	20,811
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 <b>Total support.</b> Add lines 7 through 10						40,131,687
12 Gross receipts from related activities, etc. (see instructions)					12	2,500

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

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

14 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f))	14	99.95%
15 Public support percentage from 2009 Schedule A, Part II, line 14	15	99.91%

16a **33 1/3% support test—2010.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

b **33 1/3% support test—2009.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

17a **10%-facts-and-circumstances test—2010.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

b **10%-facts-and-circumstances test—2009.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

**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) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
<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						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>6 Total.</b> Add lines 1 through 5						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
<b>c</b> Add lines 7a and 7b						
<b>8 Public support</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
<b>9</b> Amounts from line 6						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
<b>c</b> Add lines 10a and 10b						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)						

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

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

<b>15</b> Public support percentage for 2010 (line 8, column (f) divided by line 13, column (f))	<b>15</b>	%
<b>16</b> Public support percentage from 2009 Schedule A, Part III, line 15	<b>16</b>	%

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

<b>17</b> Investment income percentage for 2010 (line 10c, column (f) divided by line 13, column (f))	<b>17</b>	%
<b>18</b> Investment income percentage from 2009 Schedule A, Part III, line 17	<b>18</b>	%

**19a 33 1/3% support tests—2010.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

**b 33 1/3% support tests—2009.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

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



**Schedule B**  
 (Form 990, 990-EZ,  
 or 990-PF)  
 Department of the Treasury  
 Internal Revenue Service

**Schedule of Contributors**

OMB No. 1545-0047

▶ Attach to Form 990, 990-EZ, or 990-PF.

**2010**

<b>Name of the organization</b> Citrus Levy Marion Regional Workforce Development Board, Inc.	<b>Employer identification number</b> 59-3409057
---	---

Organization type (check one):

- |  |   |
|--|---|
| <b>Filers of:</b><br><br>Form 990 or 990-EZ<br><br><br><br>Form 990-PF | <b>Section:</b><br><input checked="" type="checkbox"/> 501(c)( 3 ) (enter number) organization<br><input type="checkbox"/> 4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation<br><input type="checkbox"/> 527 political organization<br><input type="checkbox"/> 501(c)(3) exempt private foundation<br><input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation<br><input type="checkbox"/> 501(c)(3) taxable private foundation |
|--|---|

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

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

**General Rule**

- For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

**Special Rules**

- For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year ..... ▶ \$ .....

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

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

<b>Name of organization</b> <b>Citrus Levy Marion Regional</b>	<b>Employer identification number</b> <b>59-3409057</b>
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**Part I Contributors** (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	Agency for Workforce Innovation 107 E Madison Street Suite 100 Tallahassee FL 32399	\$ 9,468,938	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
2	US Department of Labor 200 Constitution Avenue Washington DC 20210	\$ 2,191,827	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
.....	.....	\$ .....	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
.....	.....	\$ .....	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
.....	.....	\$ .....	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
.....	.....	\$ .....	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990. See separate instructions.

OMB No. 1545-0047

2010

Open to Public Inspection

Name of the organization: Citrus Levy Marion Regional Workforce Development Board, Inc. Employer identification number: 59-3409057

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.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Includes questions 1-6 regarding donor advised funds.

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

Form for Part II Conservation Easements, including questions 1-9 and a table for 'Held at the End of the Tax Year' with rows 2a, 2b, 2c, 2d.

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.

Form for Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets, including questions 1a, 1b, 2, and 2a, 2b.

**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 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 year end balance held as:

- a** Board designated or quasi-endowment ▶ ..... %
- b** Permanent endowment ▶ ..... %
- c** Term endowment ▶ ..... %

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

	Yes	No
<b>(i)</b> unrelated organizations .....	<b>3a(i)</b>	
<b>(ii)</b> 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 investment	(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 .....		<b>407,703</b>	<b>299,011</b>	<b>108,692</b>
<b>e</b> Other .....				
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) ▶				<b>108,692</b>

**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)	
(2)	
(3)	
(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) Amount	
(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 XIV** Supplemental Information (continued)

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**SCHEDULE I  
(Form 990)**

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

OMB No. 1545-0047

**2010**

**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

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

▶ Attach to Form 990.

Name of the organization **Citrus Levy Marion Regional  
Workforce Development Board, Inc.** Employer identification number  
**59-3409057**

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

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	<b>Withlacoochee Workforce Development 2703 NE 14 Street Ocala FL 34470</b>	<b>59-2871179</b>	<b>3</b>	<b>7,102,273</b>				<b>Workforce Services</b>
(2)	<b>Xtreme Solutions 3233 Maricamp Road Ocala FL 34471</b>	<b>30-0293324</b>	<b>3</b>	<b>66,000</b>				<b>Workforce Services</b>
(3)	<b>Marion County Children's 3482 NW 10th Street Ocala FL 34475</b>	<b>06-1712493</b>	<b>3</b>	<b>13,910</b>				<b>Workforce Services</b>
(4)	<b>Marion County Literacy 2677 NW 10th Street, Suite 2A Ocala FL 34475</b>	<b>60-0000676</b>	<b>3</b>	<b>9,070</b>				<b>Workforce Services</b>
(5)	<b>College of Central Florida 3003 SW College Road Ocala FL 34474</b>		<b>GOV</b>	<b>36,011</b>				<b>Workforce Services</b>
(6)	<b>School Board of Marion County 1014 SW 7th Road Ocala FL 34471</b>		<b>GOV</b>	<b>76,500</b>				<b>Workforce Services</b>
(7)								
(8)								
(9)								

- 2 Enter total number of section 501(c)(3) and government organizations **6**
- 3 Enter total number of other organizations **6**

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

Schedule I (Form 990) (2010)

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
<b>1 FBTW Salary Contracts</b>	<b>220</b>	<b>1,292,635</b>			
<b>2 Support Services</b>	<b>50</b>	<b>12,199</b>			
<b>3</b>					
<b>4</b>					
<b>5</b>					
<b>6</b>					
<b>7</b>					

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

**Part I, Line 2 - Procedures for Monitoring the Use of Grant Funds**

Withlacoochie Workforce Development Authority (WWDA), Xtreme Solutions, Marion County Children's Alliance, College of Central Florida, School Board of Marion County/CTAE, and Marion County Literacy Council are considered subrecipients of federal awards and their use of grant funds is monitored in accordance with OMB Circular A-133. The Organization completes an on-site programmatic and financial monitorings of its subrecipients. Participant files are checked for eligibility and compliance, and financial records are checked for allowability, reasonableness, and allocability. The Florida Back to Work Program (FBTW) is a subsidized employment program

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

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

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

that was developed to assist companies to hire and obtain new employees.  
 These employees must be low income TANF eligible to meet the requirements.  
 The program subsidizes most of the costs for each company who hires someone  
 in this program. Through this program, the Organization was able to assist  
 26 businesses with employees that they could not otherwise afford. Each  
 contract is on a cost reimbursement basis. Due to the nature of the  
 contracts, it is not necessary to complete and on-site monitoring. The  
 organization completes a thorough desk review of all reimbursement requests  
 and tracks expenditures to ensure the contract amount is not exceeded.

**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

**2010**

Open to Public  
Inspection

Name of the organization **Citrus Levy Marion Regional  
Workforce Development Board, Inc.**

Employer identification number  
**59-3409057**

**Doing Business As - Additional Names**

**Workforce Connection Citrus Levy Marion**

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

The Organization's management staff will review and approve the Form 990.  
The Board of Directors will receive and review the Form 990 prior to its  
submission to the IRS.

**Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy**

Board members are required to sign an annual conflict of interest  
disclosure. Based on those disclosures, staff ensures board members  
abstain from voting on items related to the conflict.

Draft

**Form 990, Part VI, Line 15a - Compensation Process for Top Official**

A special review committee of independent board members reviews the  
performance of the CEO contract and determines annual compensation. The  
committee uses a salary survey study of Florida workforce boards to assist  
in the determination of salary. The CEO completes an annual review and  
determines annual compensation for all other employees. These processes  
are documented.

**Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation**

All governing documents are made available to the public upon request.