

Alyxander Accounting and Tax Serv
PO Box 3431
Riverview, FL 33568
(813)843-6274

April 29, 2010

Keep Hillsborough County Beautiful
P.O. Box 273248
Tampa FL 33688-3248

Dear Tim,

Enclosed is your 2009 federal return, Form 990. The return should be signed and dated by an officer before filing. Please review the return and retain a copy for your records.

The federal Form 990 does not show a refund or balance due. Your tax obligation is exactly met. Mail the return on or before May 15 2010 to:

Internal Revenue Service Center
Ogden, UT 84201-0027

Your business is appreciated. Please call if you have any questions.

Sincerely,

Colette A. Giordano, E.A.

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)

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Header section A-M containing organization details, tax status, and identification numbers.

Part I Summary table with columns for Revenue, Expenses, and Assets/Liabilities.

Part II Signature Block containing officer signature, preparer information, and declaration.

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

Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission:

To prevent litter, promote recycling and conservation, cleanup and beautify our community through action, education, awareness and by fostering stewardship.

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 \$ 131,312 including grants of \$) (Revenue \$ 196,970)

See attachment #2

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

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

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

4e Total program service expenses ► \$ 131,312

Part IV Checklist of Required Schedules

Table with 20 rows of questions and 3 columns: Question, Yes, No. Includes questions 1 through 20 regarding organizational requirements and schedules.

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question ID, Question Text, Yes, No. Rows 21-38. Includes questions about grants, tax-exempt bonds, excess benefit transactions, and related organizations.

Note: All Form 990 filers are required to complete Schedule O

Part V Statements Regarding Other IRS Filings and Tax Compliance

Table with columns for question number, question text, and Yes/No checkboxes. Includes sections for backup withholding, employee reporting, prohibited tax shelter transactions, and charitable trusts.

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.

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body (20); 1b Enter the number of voting members that are independent (20); 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? (X); 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? (X); 4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? (X); 5 Did the organization become aware during the year of a material diversion of the organization's assets? (X); 6 Does the organization have members or stockholders? (X); 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? (X); 7b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? (X); 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? (X); b Each committee with authority to act on behalf of the governing body? (X); 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O. (X)

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

Table with 3 columns: Question, Yes, No. Rows include: 10a Does the organization have local chapters, branches, or affiliates? (X); 10b 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? (N/A); 11 Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? (X); 11a Describe in Schedule O the process, if any, used by the organization to review this Form 990.; 12a Does the organization have a written conflict of interest policy? If "No," go to line 13. (X); 12b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? (N/A); 12c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done (N/A); 13 Does the organization have a written whistleblower policy? (X); 14 Does the organization have a written document retention and destruction policy? (X); 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision: a The organization's CEO, Executive Director, or top management official? (X); b Other officers or key employees of the organization? (X); 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? (X); 16b 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? (N/A)

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed ► NONE
18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
[X] 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: ► See attachment #3

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, 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 the organization did not compensate any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)							(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		INDIVIDUAL	DIRECTOR	INSTITUTIONAL	OFFICER	KEY EMPLOYEE	HIGHEST COMPENSATED EMPLOYEE	FORMER			
Paul Hays President					X			0	0	0	
Randy Canal Vice President					X			0	0	0	
Bryant Johnson Treasurer					X			0	0	0	
Jim Iglar Secretary					X			0	0	0	
Christine Commerce Executive Director	32.00	X					X	26,002	0	0	
Jan Platt		X						0	0	0	
Alan Donn		X						0	0	0	
Mark Sharpe		X						0	0	0	
Lorraine Hanlon		X						0	0	0	
Joe Gross		X						0	0	0	
Michael Brown		X						0	0	0	
Tim Eckert		X						0	0	0	
Linda Scott		X						0	0	0	
Richard Mims		X						0	0	0	
Chuck Coleman		X						0	0	0	
Spencer Faircloth		X						0	0	0	
Phil Steadham								0	0	0	
Cam Oberting		X						0	0	0	
Mike Globenfelt		X						0	0	0	
Doretha Edgecomb		X						0	0	0	
Rick Diden		X						0	0	0	

Part VIII		Statement of Revenue		(A)	(B)	(C)	(D)
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
OTHER CONTRIBUTIONS SIMILAR AMOUNTS	1a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c	2,417				
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, & similar amounts not included above	1f					
	g Noncash contributions included in lines 1a-1f:		\$				
	h Total. Add lines 1a-1f			2,417			
PROGRAM SERVICE REVENUE	2a Litter Reduction	Business Code					
		900099		196,970	196,970		
	b						
	c						
	d						
	e						
	f All other program service revenue						
g Total. Add lines 2a-2f			196,970				
OTHER REVENUE	3 Investment income (including dividends, interest, and other similar amounts)			405	405		
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6a Gross Rents	(i) Real	(ii) Personal				
		b Less: rental expenses					
		c Rental income or (loss)					
	d Net rental income or (loss)						
	7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		b Less: cost or other basis and sales expenses					
		c Gain or (loss)					
	d Net gain or (loss)						
	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18.	a					
		b Less: direct expenses					
		c Net income or (loss) from fundraising events					
	9a Gross income from gaming activities. See Part IV, line 19	a					
b Less: direct expenses							
c Net income or (loss) from gaming activities							
10a Gross sales of inventory, less returns and allowances	a						
	b Less: cost of goods sold						
	c Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Business Code					
11a							
b							
c							
d All other revenue							
e Total. Add lines 11a-11d							
12 Total revenue. See instructions			199,792	197,375			

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				
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	26,003	18,202	7,801	
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	40,827	20,414	20,413	
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits	4,022	2,324	1,698	
10 Payroll taxes	5,015	2,850	2,165	
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	5,890	3,400	2,490	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other				
12 Advertising and promotion	14,663	14,663		
13 Office expenses	12,086	7,024	5,062	
14 Information technology				
15 Royalties				
16 Occupancy	7,173	4,140	3,033	
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	8,919	5,148	3,771	
23 Insurance	1,483	856	627	
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a <u>Cleanups & Plants</u>	25,863	25,863		
b <u>Printing</u>	7,852	7,852		
c <u>Public Outreach</u>	7,708	7,708		
d <u>Adopt A Road Supplies</u>	7,495	7,495		
e <u>Recycling</u>	1,940	1,940		
f All other expenses #4.	1,432	1,427	5	
25 Total functional expenses. Add lines 1 through 24f	178,371	131,306	47,065	
26 Joint costs. Check here <input type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X		Balance Sheet		(A)		(B)	
				Beginning of year		End of year	
A S S E T S	1 Cash -- non-interest bearing			41,826	1	76,163	
	2 Savings and temporary cash investments				2		
	3 Pledges and grants receivable, net			42,713	3	38,716	
	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)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L				6		
	7 Notes and loans receivable, net				7		
	8 Inventories for sale or use				8		
	9 Prepaid expenses and deferred charges				9		
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D.	10a	75,295				
	b Less: accumulated depreciation	10b	54,632		29,582	10c	20,663
	11 Investments -- publicly traded securities					11	
	12 Investments -- other securities. See Part IV, line 11					12	
	13 Investments -- program-related. See Part IV, line 11					13	
	14 Intangible assets					14	
	15 Other assets. See Part IV, line 11					15	
16 Total assets. Add lines 1 through 15 (must equal line 34)				114,121	16	135,542	
L I A B I L I T I E S	17 Accounts payable and accrued expenses				17		
	18 Grants payable				18		
	19 Deferred revenue				19		
	20 Tax-exempt bond liabilities				20		
	21 Escrow or custodial account liability. Complete Part IV of Schedule D.				21		
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L					22	
	23 Secured mortgages and notes payable to unrelated third parties					23	
	24 Unsecured notes and loans payable to unrelated third parties					24	
	25 Other liabilities. Complete Part X of Schedule D.					25	
	26 Total liabilities. Add lines 17 through 25					26	
F U N D A S S E T S O R S	Organizations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.						
	27 Unrestricted net assets				27		
	28 Temporarily restricted net assets				28		
	29 Permanently restricted net assets				29		
	Organizations that do not follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 30 through 34.						
	30 Capital stock or trust principal, or current funds				30		
	31 Paid-in or capital surplus, or land, building, or equipment fund				31		
	32 Retained earnings, endowment, accumulated income, or other funds			114,121	32	135,542	
	33 Total net assets or fund balances			114,121	33	135,542	
	34 Total liabilities and net assets/fund balances			114,121	34	135,542	

Part XI Financial Statements and Reporting

	Yes	No
1 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.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant?		X
2b Were the organization's financial statements audited by an independent accountant?		X
2c If "Yes" to lines 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? N/A If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.		X
d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
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 N/A		

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

OMB No. 1545-0047

2009

Open to Public Inspection

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

Name of the organization Keep Hillsborough County Beautiful **Employer identification number** 59-3138161

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

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

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E.)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 An organization that normally receives: (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions--subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h.
 - a Type I
 - b Type II
 - c Type III-Functionally integrated
 - d Type III-Other
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 - (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
 - (ii) A family member of a person described in (i) above?
 - (iii) A 35% controlled entity of a person described in (i) or (ii) above?

	Yes	No
11g(i)		X
11g(ii)		X
11g(iii)		X

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

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	150,481	177,255	215,407	275,003	199,387	1,017,533
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5	150,481	177,255	215,407	275,003	199,387	1,017,533
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
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						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						1,017,533

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6	150,481	177,255	215,407	275,003	199,387	1,017,533
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	49	120	100	165	405	839
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	49	120	100	165	405	839
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)	150,530	177,375	215,507	275,168	199,792	1,018,372

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

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	15	99.92 %
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	99.95 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	17	0 %
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	0 %

19a 33 1/3 % support tests -- 2009. 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 -- 2008. 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 O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

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

▶ Attach to Form 990.

OMB No. 1545-0047

2009

Open to Public
Inspection

Name of the organization

Keep Hillsborough County Beautiful

Employer identification number

59-3138161

Pg 6 Question 15a - The Executive Committee makes the recommendation for the Exec Dir salary. The recommendation is presented and discussed by the Board of Directors and comments/concerns are sent to the Executive Committee. Executive Committee reconvenes to make final vote.

Pg 6 Question 19 - We are not required to publicly provide the documents
Pg 6 Question 11a-The draft of the 990 is circulated to the Executive Committee for approval prior to filing.

PRINCIPAL OFFICER NAME AND ADDRESS

Attachment 1: Form 990 Page 1, Line F

Open to Public Inspection	For calendar year 2009, or tax period beginning	01-01-2009, and ending	09-30-2009.
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Name of Organization Keep Hillsborough County Beautiful	Employer Identification Number 59-3138161
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990, Page 1, Line F

Principal officer name Paul Hays
or
Business Name:

Street Address 1715 N Westshore Blvd

U.S. Address:

Zip code 33607-3920 City Tampa State FL

or

Foreign Address

City

Province or State

Country

Postal code

PART III - STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENT

Attachment 2: Form 990 Page 2, Part III

Open to Public Inspection	For calendar year 2009, or tax period beginning 01-01-2009, and ending 09-30-2009.
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Name of Organization Keep Hillsborough County Beautiful	Employer Identification Number 59-3138161
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Part III - Statement of Program Service Accomplishments

Code:	Expenses: 131,312	including Grants of:	Revenue: 196,970
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Exempt Purpose Achievements

To prevent litter, promote recycling and conservation, clean-up and beautify our community through action, education, awareness and by fostering stewardship. Public participation in actual clean-up aids in awareness of the need for litter reduction.

BOOKS ARE IN CARE OF

Attachment 3: Form 990 Page 6, Part VI, Section C, Line 20

Open to Public Inspection **For calendar year 2009 or tax period beginning** 01-01 **, and ending** 09-30-2009.

Name of Organization Keep Hillsborough County Beautiful **Employer Identification Number** 59-3138161

Part VI - Line 91a

Individual Name Colette A Giordano

or

Business Name:

Street Address 138 N Moon Ave Suite A

U.S. Address:

Zip code 33510 City Brandon State FL

or

Foreign Address

City

Province or State

Country

Postal code

Phone Number (813) 843-6274

Fax Number (813) 200-3534

SCHEDULE OF OTHER EXPENSES

Attachment 4: Form 990 Page 10, Line 24 - Other Expenses

Open to Public
Inspection

For calendar year 2009 or tax period beginning 01-01-2009, and ending 09-30-2009.

Name of Organization

Keep Hillsborough County Beautiful

Employer Identification Number

59-3138161

Other Expenses	(A) Total	(B) Program Services	(C) Management and General	(D) Fundraising
Miscellaneous	1,427	1,427		
Bank Service Charges	5		5	
Total	1,432	1,427	5	

Depreciation and Amortization (Including Information on Listed Property)

2009

Department of the Treasury
Internal Revenue Service (99)

▶ See separate instructions. ▶ Attach to your tax return.

Attachment
Sequence No. **67**

Name(s) shown on return Keep Hillsborough County Beaut	Business or activity to which this form relates FOR FORM 990	Identifying number 59-3138161
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Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1 Maximum amount. See the instructions for a higher limit for certain businesses	1	\$250,000
2 Total cost of section 179 property placed in service (see instructions)	2	
3 Threshold cost of section 179 property before reduction in limitation (see instructions)	3	\$800,000
4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	250,000
6 (a) Description of property	(b) Cost (busn. use only)	(c) Elected cost
7 Listed property. Enter the amount from line 29	7	
8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9 Tentative deduction. Enter the smaller of line 5 or line 8	9	
10 Carryover of disallowed deduction from line 13 of your 2008 Form 4562	10	
11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	250,000
12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13 Carryover of disallowed deduction to 2010. Add lines 9 and 10, less line 12 ... ▶	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.)

14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15 Property subject to section 168(f)(1) election	15	
16 Other depreciation (including ACRS)	16	

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)

Section A

17 MACRS deductions for assets placed in service in tax years beginning before 2009	17	8,919
18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here	<input type="checkbox"/>	

Section B -- Assets Placed in Service During 2009 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depr. (business/investment use only -- see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
			27.5 yrs.	MM	S/L	
i Nonresidential real property			39 yrs.	MM	S/L	
				MM	S/L	

Section C -- Assets Placed in Service During 2009 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 40-year			40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21 Listed property. Enter amount from line 28	21	
22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations -- see instructions	22	8,919
23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

2009 Federal Depreciation Schedule

Keep Hillsborough County Beautiful
59-3138161

04-13-2010

Description	Date	Method	Year	Cost	Land/ Other	§179	Spec Allow	Basis	Prior	Current
Form 990										
35MM Camera	01-01-95	S/L	5	500	0	0	0	500	500	0
Dell Computer	11-30-05	200DBMQ	5	712	0	0	0	712	566	55
Display Board & Acc	05-01-01	S/L	5	710	0	0	0	710	710	0
HP Deskjet Printer	05-01-02	S/L	5	487	0	0	0	487	487	0
Laptop Computer	12-01-00	S/L	5	2,490	0	0	0	2,490	2,490	0
Laptop-USF Comp Stor	03-31-06	200DBMQ	5	854	0	0	0	854	654	60
Mainframe Computer	01-01-00	S/L	5	3,000	0	0	0	3,000	3,000	0
Netgear Equipment	03-01-01	S/L	5	100	0	0	0	100	100	0
Perm Display Board	01-01-95	S/L	5	2,000	0	0	0	2,000	2,000	0
Power Point Program	07-31-06	200DBMQ	3	900	0	0	0	900	825	56
Signs	08-29-08	200DBHY	5	6,510	0	0	0	6,510	1,302	1,562
Signs	09-15-08	200DBHY	5	270	0	0	0	270	54	64
Signs	08-31-06	200DBMQ	5	508	0	0	0	508	353	46
Signs	11-15-06	200DBMQ	5	2,659	0	0	0	2,659	1,749	273
Signs	06-30-02	S/L	5	9,653	0	0	0	9,653	9,653	0
Signs	05-15-08	200DBHY	5	127	0	0	0	127	25	31
Signs	12-31-08	200DBHY	5	1,773	0	0	0	1,773	355	425
Signs	04-17-08	200DBHY	5	432	0	0	0	432	86	104
Signs	03-14-08	200DBHY	5	200	0	0	0	200	40	48
Signs	06-30-07	200DBHY	5	5,820	0	0	0	5,820	3,026	838
Signs	07-31-06	200DBMQ	5	3,867	0	0	0	3,867	2,684	355
Signs	09-30-07	200DBHY	5	19,997	0	0	0	19,997	10,398	2,880
Signs	01-31-08	200DBHY	5	2,280	0	0	0	2,280	456	548
Signs	12-15-06	200DBMQ	5	1,982	0	0	0	1,982	1,304	203
Signs	12-29-06	200DBMQ	5	243	0	0	0	243	159	26
Signs	09-29-06	200DBMQ	5	270	0	0	0	270	188	25
Signs	12-31-07	200DBHY	5	3,363	0	0	0	3,363	1,749	484
Signs	02-29-08	200DBHY	5	1,428	0	0	0	1,428	286	343
Signs	08-31-06	200DBMQ	5	165	0	0	0	165	115	15
Signs	11-30-08	200DBHY	5	1,995	0	0	0	1,995	399	478
30 Assets			Totals:	75,295	0	0	0	75,295	45,713	8,919
30 Assets			Grand Totals:	75,295	0	0	0	75,295	45,713	8,919

* Asset disposed this year

-C Carryover basis in like-kind exchange transaction

-B Excess basis in like-kind exchange transaction

2009 Federal Future Depreciation Schedule

Keep Hillsborough County Beautiful
59-3138161

04-13-2010

Description	Date	Method	Year	Basis	Prior	2009	2010	2011
Form 990								
35MM Camera	01-01-95	S/L	5	500	500	0	0	0
Dell Computer	11-30-05	200DBMQ	5	712	566	55	68	0
Display Board & Acc	05-01-01	S/L	5	710	710	0	0	0
HP Deskjet Printer	05-01-02	S/L	5	487	487	0	0	0
Laptop Computer	12-01-00	S/L	5	2,490	2,490	0	0	0
Laptop-USF Comp Stor	03-31-06	200DBMQ	5	854	654	60	52	66
Mainframe Computer	01-01-00	S/L	5	3,000	3,000	0	0	0
Netgear Equipment	03-01-01	S/L	5	100	100	0	0	0
Perm Display Board	01-01-95	S/L	5	2,000	2,000	0	0	0
Power Point Program	07-31-06	200DBMQ	3	900	825	56	0	0
Signs	08-29-08	200DBHY	5	6,510	1,302	1,562	1,094	766
Signs	09-15-08	200DBHY	5	270	54	64	46	32
Signs	08-31-06	200DBMQ	5	508	353	46	40	52
Signs	11-15-06	200DBMQ	5	2,659	1,749	273	238	299
Signs	06-30-02	S/L	5	9,653	9,653	0	0	0
Signs	05-15-08	200DBHY	5	127	25	31	21	15
Signs	12-31-08	200DBHY	5	1,773	355	425	298	208
Signs	04-17-08	200DBHY	5	432	86	104	73	51
Signs	03-14-08	200DBHY	5	200	40	48	34	23
Signs	06-30-07	200DBHY	5	5,820	3,026	838	586	514
Signs	07-31-06	200DBMQ	5	3,867	2,684	355	310	388
Signs	09-30-07	200DBHY	5	19,997	10,398	2,880	2,016	1,764
Signs	01-31-08	200DBHY	5	2,280	456	548	382	268
Signs	12-15-06	200DBMQ	5	1,982	1,304	203	178	223
Signs	12-29-06	200DBMQ	5	243	159	26	22	27
Signs	09-29-06	200DBMQ	5	270	188	25	21	27
Signs	12-31-07	200DBHY	5	3,363	1,749	484	339	297
Signs	02-29-08	200DBHY	5	1,428	286	343	240	168
Signs	08-31-06	200DBMQ	5	165	115	15	14	16
Signs	11-30-08	200DBHY	5	1,995	399	478	335	235
30 Assets	Totals:			75,295	45,713	8,919	6,407	5,439
30 Assets	Grand Totals:			75,295	45,713	8,919	6,407	5,439

* Asset disposed this year

~C Carryover basis in like-kind exchange transaction

~B Excess basis in like-kind exchange transaction