

## Florida Department of Agriculture and Consumer Services Division of Administration

## TOTAL COMPENSATION PAID TO NON-PROFIT PERSONNEL USING STATE FUNDS

In accordance with Section 215.985, Florida Statutes (F.S.), for each contract between a state entity and a non-profit organization (Contractor) as defined in Section 215.97(2)(m), F.S., the Contractor must submit documentation which indicates the amount of state funds:

- allocated to be used during the full term of the contract for remuneration to any member of the board of directors or an officer of the Contractor, and
- allocated under each payment by the Department to be used for remuneration of any member of the board of directors or an officer of the Contractor. The documentation must indicate the amounts and recipients of the remuneration.

Terms used in this form are defined as follows:

- "Officer" means a Chief Executive Officer (CEO), Chief Financial Office (CFO), Chief Operating Officer (COO), or any other position performing an equivalent function.
- "Remuneration" means all compensation earned by or awarded to personnel, whether paid of accrued, regardless of contingency, including bonuses, accrued paid time off, severance payments, incentive payments, contributions to a retirement plan, or in-kind payments, reimbursements, or allowances for moving expenses, vehicles and other transportation, telephone services, medical services, housing, and meals.
- "State funds" means funds paid from the General Revenue Fund or any state trust fund, funds allocated by the Federal Government and distributed by the state, or funds appropriated by the state for distribution through any grant program. The term does not include funds used for the state Medicaid program.

Upon completion of this form, submit to the appropriate Department Contract Manager(s) no later than ten (10) business days from execution of the relevant agreement. **Please complete a separate form for each officer or member of the board of directors receiving remuneration from state funds**. If the following form is not applicable, please certify the following:

CERTIFICATION: I certify that the officers and the members of the board of directors of the below- named non-profit organization do NOT receive any remuneration from state funds in association with the agreement cited below.	
Name of Non-Profit Organization	Florida Thoroughbred Breeders' Association
Agency Agreement/Contract #	30457
Signature	***************************************
Name and Title	Lonny Powell, CEO
Date	5/9/24