

# Florida Department of Environmental Protection CITIZEN SUPPORT ORGANIZATION 2022 LEGISLATIVE REPORT

(pursuant to Section 20.058 Florida Statutes)

Citizen Support Organization (CSO) Name: Friends of Tomoka Basin State Parks Inc

Mailing Address: PO Box 1035, Bunnell Fl 32110

Telephone Number: 386.295.9402

Website Address (required if applicable): https://friendsoftomokabasin.wordpress.com/

☑ Check to confirm your Code of Ethics is posted conspicuously on your website.

#### **Statutory Authority:**

Section 20.2551, F.S., Citizen support organizations; use of property; audit; public records; partnerships. In summary, the statute specifies the organizational requirements, operational parameters, duties of a CSO to support the Department of Environmental Protection (Department), or individual units of the Department, use of Department property, audit requirements, public records requirements, and authorizes public-private partnerships to enhance lands managed by the Department.

**Section 258.015, F.S., Citizen support organizations; use of property; audit.** In summary, the statute defines a CSO, requires authorization by the Division of Recreation and Parks, and specifies the use of property. This statute authorizes the Partnerships in Parks (PIP) program for state parks, the program's operational parameters, CSO's operational parameters, and donor recognition.

#### YOUR MISSION AND LAST CALENDAR YEAR'S PROGRAM ACCOMPLISHMENTS:

**CSO's Mission:** (Consistent with your Articles and Bylaws)

The CSO promotes activities to conserve, enhance, improve, and interpret the cultural, historic, natural, scenic, and recreational resources of the Tomoka Basin State Parks.

**Describe Last Calendar Year's Results Obtained:** <u>Brag!</u> (List or discuss the past calendar year's accomplishments and contributions. Cite specific support from last calendar year's Annual Program Plan.)

- The CSO participated with Tomoka State Park staff in a National Public Lands Day event. The CSO provided drinks and snacks to volunteers and park visitors. The volunteers assisted park staff in weeding and cleaning the native plant garden of invasive plant species. Attendance 30.
- As President of the Rotary Club of Port Orange-South Daytona, I invited the Park Service Specialist to Zoom with my Rotary Club, she presented a broad spectrum of activities at the Tomoka Basin State Parks including volunteer options with the CSO. Attendance 50.
- As President of the Rotary Club of Port Orange-South Daytona, I invited a retired Florida Park Service Ranger and former Park Manger to Zoom with my Rotary Club, his presentation was on Seminole War events at Bulow

Plantation Ruins and other historical events at the Tomoka State Park. I took the opportunity to promote the CSO. Attendance 50.

- The CSO was invited to participate in a first time Indigenous Peoples Heritage Day event at the Ponce Inlet Lighthouse Park. The CSO created a display area using a popup canopy and tables, it was a great opportunity to promote the CSO and Tomoka Basin State Parks. Displays included banners promoting volunteering at State Parks, park-CSO brochures, and artifacts representing various historical time periods. The CSO volunteers wore historical uniforms. A 30-minute presentation at the activities center outlining to the attendees the Seminole War and other historical events that occurred at the Parks including sharing current historic, scenic, and recreational opportunities. Attendance 429 and it was raining and storming most of the day.
- The CSO was invited back to participate in a first time Florida Heritage Day event at Ponce Inlet Lighthouse Park.
   As before the CSO created a display area using a popup canopy and tables, again it was a great opportunity to promote the CSO and Tomoka Basin State Parks. Displays included banners promoting volunteering at State Parks, park-CSO brochures, and artifacts representing various historical time periods. The CSO volunteers wore historical uniforms. Attendance 629 and weather was perfect.
- The CSO provided volunteers to assist in clearing and cleaning over 7 miles of hiking trails at Bulow Plantation Ruins Historic State Park and at Bulow Creek State Park in preparation for the annual running event in a long-term fundraising partnership with Don Stoner—Runner's High Timing and Management. Part of last year's annual program plan.
- The CSO provided water station volunteers for the annual trail running event at Bulow Plantation Ruins Historic State Park and at Bulow Creek State Park as part of a long-term fundraising partnership with Don Stoner— Runner's High Timing and Management. Estimated race attendance over 500. Part of last year's annual program plan.
- The CSO provided water station volunteers for the annual marathon running event at Tomoka State Park and at Bulow Creek State Park as part of a long-term fundraising partnership with Don Stoner—Runner's High Timing and Management. Estimated race attendance over 1,500. Part of last year's annual program plan.
- The CSO purchased wildflower seeds (Southeastern Roadside Mix) for planting in the existing native plants garden at Tomoka State Park and for creating additional wildflower areas in the Tomoka Basin State Parks. Part of last year's annual program plan.
- The CSO continues to improve and add posts to their Facebook page (1,279 followers) to help promote the Tomoka Basin State Parks and the volunteer group. We collaborated with District 3 ROAR member to advertise on various media outlets soliciting for new members and to fill officer-director vacancies. Part of last year's annual program plan.
- The CSO congratulates Tomoka State Park on the recognition of the Tomoka Mound and Midden Complex (circa 3,000 BC) by the National Park Service and the site listing on the National Register of Historic Places on November 27, 2020.

#### Describe the CSO's Plans for the Next Three Calendar Years:

Create a "social media virtual volunteer-webmaster" position to help promote the Tomoka Basin State Parks.
 This would enhance general membership and assist in adding board members to fill the vacant officer positions-Membership Secretary and General Secretary.

- Continue our successful long-term fundraising partnerships with Don Stoner—Runner's High Timing and Management for the Bulow Woods Trail Run and the Tomoka Marathon.
- Continue with above programs and activities, increase volunteer participation where possible.
- Provide volunteer living history interpretation at Bulow Plantation Ruins, including historical tours of slave cabins and the historic sugar mill ruins.
- Utilize Daytona State College students, engaged in service learning, to develop and present programs to the public on local history topics.
- Increase fundraising activities where possible through hosting open houses, new and targeted programs to attract and broaden a more diverse audience and visitors to the park (such as local/college photography and art groups, area senior assisted living residence field trips). Invite local groups such as 4-H, scout groups, elementary, middle, and high school students to age-appropriate programs and workshops.
- Create educational materials and other publishable works for visitors to enjoy at the parks.
- Erect a late 19<sup>th</sup> century sugar mill grinder to be used for interpretive experience at Bulow Plantation Ruins.
- Assist with the Tomoka Mound-Midden Complex and Lost Causeway tours using the tram. Inviting the archelogy professor for a repeat as tour guide.
- Expand membership recruitment methods and increase opportunities to showcase the CSO and Tomoka Basin State Parks through attending more local outreach events, meetings such as HOA, civic organizations in both Flagler and Volusia counties.
- Procure more efficient roadside signage for events/programs hosted at Bulow Plantation and other parks.
- Create a new CSO website and expand social media accounts, such as Instagram and Twitter, to promote awareness of the volunteer group and its activities.
- Continue funding discussions and historical research with the long-term goal to build a replica slave cabin at Bulow Plantation Ruins.
- Revive the trail maintenance group service workdays at Bulow Plantation Ruins, Bulow Creek and Tomoka State Parks using community partnerships and local groups.

#### **CSO's LAST CALENDAR YEAR STATISTICS:**

**Total Number of CSO General Membership: 50** 

**Total Number of Board of Directors: 4** 

Total Volunteer Hours for the Board of Directors (Hours from VSys - Work with your parks' volunteer manager): 163.90

#### **PARK & CSO RELATIONSHIP:**

Do not duplicate by describing accomplishments and contributions in the summary. <u>Brag</u> in the above Results Obtained. Below, describe the <u>relationship</u>.

#### Park Manager's Comments on the CSO & Park Relationship and Support:

Provide your perspective on

• Changing developments of the park provided by the CSO.

- Effectiveness of the organization in fulfilling their purpose to support the park(s).
- Effectiveness of the Board of Directors in completing their Annual Program Plan.
- The relationship between the park and CSO. What went well? Are there areas of improvement?

I am new to the park, but so far, the CSO seems very accommodating and supportive of the park. They seem like they are willing to start working toward growing board and membership. I believe that they need to focus on growing the membership and building a strong board before they add too many other goals to the annual plan. The CSO seems as if they are in agreeance with this and have already started working with the PSS on accomplishing these goals.

#### CSO President's Comments on the CSO & Park Relationship and Support:

Provide your perspective on the relationship between the park and CSO. What went well? Are there areas of improvement?

It has been a challenging year for everyone dealing with COVID-19 protocols, illness, both CSO Officer changes and Park Management changes. The CSO Relationship with the Parks has always been outstanding. The Park Management both the New and the Old do go above and beyond to support the CSO.

#### SUMMARIZE FINANCIAL ACTIVITY FOR LAST CALENDAR YEAR, DIRECT PARK(S) SUPPORT & REVENUES:

**Program Service Expenses** are costs related to providing your organization's programs or services in accordance with your mission. Describe and provide expenses that <u>directly support the park(s)</u>. For established nonprofit organizations, program service expenses generally represent most of the overall expenses of the organization. For the last calendar year provide description and total \$ for each that apply.

Building improvement,	construction,	or renovations	\$-0-
		0 00	7 -

- Cultural resources (e.g., historic structure restoration/ renovation) \$-0-
  - Natural resources (e.g., native plants, natural lands restoration) \$125
- Maintenance equipment (e.g., mowers, chippers, blowers, chainsaws) \$-0-
  - Other facilities and landscape maintenance \$-0-
  - Vehicles (e.g., trucks/cars, UTVs, golf carts, accessible devices, etc.) \$-0-
- Amenities (e.g., water fountains, benches, picnic tables, recreational equipment, kiosks etc.) \$-0-
- Park employees or volunteers support (e.g., interns, training, uniforms, awards, or recognition) \$58
  - Big ticket visitor center exhibits or interpretation updates \$-0-
    - Park exhibits, displays, signage \$-0-
    - Park publications, brochures, maps, etc. \$-0-
    - Programing/interpretation support material purchases \$-0-
      - Other program services \$-0-

# **Total Program Service Expenses \$183**

#### **Visitor Services Revenue**

Describe revenues and the sources generated from <u>fundraising on park property</u>.

- Park gift shops, craft stores, and concession sales \$-0-
- Merchandise sales (e.g., plants, firewood, ice, t-shirts, hats, etc.) \$-0-
- Programs and Special Events (e.g., fundraising workshops, seasonal events, concerts, etc.) \$-0-
  - Vending (e.g., drink machines, penny press, laundry, Wifi, etc.) \$-0-
    - Rentals (e.g., bikes, canoe, kayak, SUPs, etc.) \$-0-
      - In-park donation boxes \$555
      - Other visitor services revenue \$1,400
      - Total Visitor Services Revenue \$1,955

#### **NET ASSETS:** \$4,054

Organizations end of last year's <u>Total Liabilities minus Total Assets</u>. This is <u>not</u> the above's Visitor Service Revenue minus Program Service Expenses.

#### **CSO AUDIT THRESHOLD:**

## Last Calendar Year's Total Expenses (including grants) \$678

Are the CSO's annual total expenses \$300,000 including grants? Then Section 215.981(2), Florida Statute requires an independent CPA audit using Government Audit Standards (U.S. GAO Yellow Book). The audit is **due by September 1** (9 months after the CSO's calendar year ends) to the Florida Auditor General and to the Department.

This information is complete to the best of my knowledge pursuant to Section 20.058 Florida Statutes				
Title	Name	Signature	Date	
CSO President	HEWITTJI	Levery Dux	05/27/2022	
Park Manager	7	2994	5/31/22	

<sup>☑</sup> CSO's Code of Ethics is attached

<sup>☑</sup> CSO has attached the most recent Internal Revenue Service (IRS) Form 990, 990-EZ, or 990-N receipt. All IRS Form 990's must be complete with Part III Program Service and all appropriate Schedules (A, O and others as appropriate). If filing an IRS extension, attach the IRS 8868 receipt and the most recent complete 990 and schedules.

# FRIENDS OF TOMOKA BASIN STATE PARKS CODE OF ETHICS

June 14, 2020

## **PREAMBLE**

- (1) It is essential to the proper conduct and operation of FRIENDS OF TOMOKA BASIN STATE PARKS. (herein "CSO") that its board members, officers, and employees be independent and impartial and that their position not be used for private gain. Therefore, the Florida Legislature in Section 112.3251, Florida Statute (Fla. Stat.), requires that the law protect against any conflict of interest and establish standards for the conduct of CSO board members, officers, and employees in situations where conflicts may exist.
- (2) It is hereby declared to be the policy of the state that no CSO board member, officer, or employee shall have any interest, financial or otherwise, direct or indirect, or incur any obligation of any nature which is in substantial conflict with the proper discharge of his or her duties for the CSO. To implement this policy and strengthen the faith and confidence of the people in Citizen Support Organizations, there is enacted a code of ethics setting forth standards of conduct required of FRIENDS OF TOMOKA BASIN STATE PARKS. board members, officers, and employees in the performance of their official duties.

# **STANDARDS**

The following standards of conduct are enumerated in Chapter 112, Fla. Stat., and are required by Section 112.3251, Fla. Stat., to be observed by CSO board members, officers, and employees.

#### 1. Prohibition of Solicitation or Acceptance of Gifts

No CSO board member, officer, or employee shall solicit or accept anything of value to the recipient, including a gift, loan, reward, promise of future employment, favor, or service, based upon any understanding that the vote, official action, or judgment of the CSO board member, officer, or employee would be influenced thereby.

#### 2. Prohibition of Accepting Compensation Given to Influence a Vote

No CSO board member, officer, or employee shall accept any compensation, payment, or thing of value when the person knows, or, with reasonable care, should know that it was given to influence a vote or other action in which the CSO board member, officer, or employee was expected to participate in his or her official capacity.

#### 3. Salary and Expenses

No CSO board member or officer shall be prohibited from voting on a matter affecting his or her salary, expenses, or other compensation as a CSO board member or officer, as provided by law.

#### 4. Prohibition of Misuse of Position

A CSO board member, officer, or employee shall not corruptly use or attempt to use one's official position or any property or resource which may be within one's trust, or perform official duties, to secure a special privilege, benefit, or exemption.

#### 5. Prohibition of Misuse of Privileged Information

No CSO board member, officer, or employee shall disclose or use information not available to members of the general public and gained by reason of one's official position for one's own personal gain or benefit or for the personal gain or benefit of any other person or business entity.

#### 6. Post-Office/Employment Restrictions

A person who has been elected to any CSO board or office or who is employed by a CSO may not personally represent another person or entity for compensation before the governing body of the CSO of which he or she was a board member, officer, or employee for a period of two years after he or she vacates that office or employment position.

#### 7. Prohibition of Employees Holding Office

No person may be, at one time, both a CSO employee and a CSO board member at the same time.

#### 8. Requirements to Abstain From Voting

A CSO board member or officer shall not vote in official capacity upon any measure which would affect his or her special private gain or loss, or which he or she knows would affect the special gain or any principal by whom the board member or officer is retained. When abstaining, the CSO board member or officer, prior to the vote being taken, shall make every reasonable effort to disclose the nature of his or her interest as a public record in a memorandum filed with the person responsible for recording the minutes of the meeting, who shall incorporate the memorandum in the minutes. If it is not possible for the CSO board member or officer to file a memorandum before the vote, the memorandum must be filed with the person responsible for recording the minutes of the meeting no later than 15 days after the vote.

#### 9. Failure to Observe CSO Code of Ethics

Failure of a CSO board member, officer, or employee to observe the Code of Ethics may result in the removal of that person from their position. Further, failure of the CSO to observe the Code of Ethics may result in the Florida Department of Environmental Protection terminating its Agreement with the CSO.

# Form **990-EZ**

Department of the Treasury Internal Revenue Service

# Short Form Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

(except private foundations)
► Do not enter social security numbers on this form, as it may be made public.

► Go to www.irs.gov/Form990EZ for instructions and the latest information.

OMB No. 1545-0047

2021

Open to Public Inspection

Α	For t	the 2021 calendar year, or tax year beginning , 2021, a	nd ending		,
В	Check if applicable: C			D Employe	r identification number
	Addres	ss change	16.3	0.0000	
L		change Friends of Tomoka Basin State Parks Inc PO Box 1035	E Telephon	862922 e number	
H	Initial r	Bunnell FI. 32110			
H		ded return			) 761-7089
-		ation pending		<b>F</b> Group Numbe	Exemption r ►
G		ounting Method: X Cash Accrual Other (specify) ►	<b>H</b> Ch	eck ► X if th	e organization is <b>not</b>
ı		site: Facebook.com/FriendsofTomokaBasinStateParks/		quired to attac	
J		xempt status (check only one) — $\boxed{X}$ 501(c)(3) $$ 501(c) ( ) $\blacktriangleleft$ (insert no.) $$ 4947(a)(1)	) or 527 (Fo	orm 990).	
K					
L	Add I	lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$ ts (Part II, column (B)) are \$500,000 or more, file Form 990 instead of Form 990	200,000 or more,	or if total	,
Pa	rt I	Revenue, Expenses, and Changes in Net Assets or Fund Balar			
_	-	Check if the organization used Schedule O to respond to any question in this F Contributions, gifts, grants, and similar amounts received			_
	1				2,928.
	3	Program service revenue including government fees and contracts			
	4	Investment income.			
		Gross amount from sale of assets other than inventory	1	4	
		Less: cost or other basis and sales expenses			
		<u> </u>		5 0	
	6	: Gain or (loss) from sale of assets other than inventory (subtract line 5b from line 5a)			
<u>o</u>	_		6 a		
Š		o Gross income from fundraising events (not including \$	of contributions		
Revenue	"	from fundraising events reported on line 1) (attach Schedule G if the sum	or corneributions		
ď		of such gross income and contributions exceeds \$15,000)	6 b		
	С	: Less: direct expenses from gaming and fundraising events	6 c		
	d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)		6 c	
	7 a	Gross sales of inventory, less returns and allowances	7 a		
	b	Less: cost of goods sold	7 b		
	С	Gross profit or (loss) from sales of inventory (subtract line 7b from line 7a)		7 c	
	8	Other revenue (describe in Schedule O)			
	9	<b>Total revenue.</b> Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8			2,928.
	10	Grants and similar amounts paid (list in Schedule O)			
	11	Benefits paid to or for members			
ses	12	Salaries, other compensation, and employee benefits			
ë	13	Professional fees and other payments to independent contractors			300.
Expenses	14	Occupancy, rent, utilities, and maintenance.			
	15	Printing, publications, postage, and shipping.  Other expenses (describe in Schedule O).	e Schedule (	15	134.
	16				244.
	17	Total expenses. Add lines 10 through 16		17	678.
ţ	18				2,250.
Net Assets	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (m figure reported on prior year's return)	nust agree with end	d-of-year 19	1,804.
χA	20	Other changes in net assets or fund balances (explain in Schedule O)			1,004.
ž	21	Net assets or fund balances at end of year. Combine lines 18 through 20			4,054.
				1	1 4,004.

	, , ,	10. 20.0211 000.00 10.2				· - · - · ·
Pai	Balance Sheets (see the inst Check if the organization used Sche	ructions for Part II)	action in this Part II			Г
	Check if the organization used Sche	edule of to respond to any que		A) Beginning of year		( <b>B)</b> End of year
22	Cash, savings, and investments			1,804		4,054.
23	Land and buildings				23	2,000
24	Other assets (describe in Schedule O)				24	
25	Total assets			1,804		4,054.
26	Total liabilities (describe in Schedule O)			0	•	0.
27	Net assets or fund balances (line 27 of o			1,804	. 27	4,054.
Pai	<b>Statement of Program Service Ac</b> Check if the organization used Scl	complishments (see the inst hedule O to respond to any o	ructions for Part III) westion in this Part III	X		Expenses
What	is the organization's primary exempt purpose? See	Schedule 0	acstroir iii tiiis i art iii		(Req (c)(3	uired for section 501 ) and 501(c)(4)
Desc	cribe the organization's program service as sured by expenses. In a clear and concise	ccomplishments for each of i	ts three largest progra	m services, as	orgai	nizations; optional thers.)
bene	sured by expenses. In a clear and concise efited, and other relevant information for e	e manner, describe the service ach program title.	es provided, the num	per of persons	101 0	ulers.)
28	See Schedule O					
	(Grants \$ ) If thi	is amount includes foreign gr	ants, check here		28 a	678.
29						
	(Grants \$ ) If thi	is amount includes foreign gr	ants check here	<b>-</b>	29 a	
30						
	(Grants \$ ) If thi	is amount includes foreign gr	ants, check here	<b>-</b>	<b>30</b> a	
31	, ,	•		_		
		is amount includes foreign gr			31 a	
	Total program service expenses (add lin				32	678.
Pai	List of Officers, Directors, Check if the organization used Sci					
	Check if the organization used 3cl				s,	· · · · · · · · · · · · · · · · · · ·
	(a) Name and title	<b>(b)</b> Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MIS/ 1099-NEC)	contributions to empl benefit plans, and def		(e) Estimated amount of other compensation
777		position	(if not paid, enter -0-)	compensation		
	Lene_Dupont	1.0	0.		0.	
	easurer witt J Dupont	10	U .	•	0.	0.
	esident	10	0		0.	0.
	Nancy Duke Birkhead	10	-		<u> </u>	<u> </u>
	ce President	10	0 .	.	0.	0.
	ce Evans					
Di	rector	10	0	,	0.	0.
				+		
				1		1

Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V.) Check if the organization used Schedule O to respond to any question in this Part V	ee S	ch (	$\Box$				
, , , , , , , , , , , , , , , , , , , ,		Yes	No				
Did the organization engage in any significant activity not previously reported to the IRS?  If 'Yes,' provide a detailed description of each activity in Schedule O	33		X				
34 Were any significant changes made to the organizing or governing documents? If 'Yes,' attach a conformed copy of the amended documents if they reflect							
3 3	34		X				
<b>35 a</b> Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35 a		Х				
	35 b						
c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If 'Yes,' complete Schedule C, Part III	25		.,				
reporting, and proxy tax requirements during the year? If Yes, complete Schedule C, Part III	35 c		X				
disposition of net assets during the year? If 'Yes,' complete applicable parts of Schedule N	36		Χ				
37a Enter amount of political expenditures, direct or indirect, as described in the instructions. ► 37a 0.							
	37 b		X				
<b>38 a</b> Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee; <b>or</b> were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38 a		Х				
<b>b</b> If 'Yes,' complete Schedule L, Part II, and enter the total	-						
amount involved							
a Initiation fees and capital contributions included on line 9							
<b>b</b> Gross receipts, included on line 9, for public use of club facilities							
40 a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:							
section 4911 ►							
<b>b</b> Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been							
reported on any of its prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	40 b		Χ				
c Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ 0.							
managers or disqualified persons during the year under sections 4912, 4955, and 4958							
by the organization b							
e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If 'Yes,' complete Form 8886-T	40 e		Χ				
41 List the states with which a copy of this return is filed None	<b>40</b> C						
42a The organization's  books are in care of ► Hewitt J Dupont  Telephone no. ► (386)	761-	-708	9				
books are in care of ► Hewitt J Dupont  Located at ► 823 Valencia Road South Daytona FL  Telephone no. ► (386)  ZIP + 4 ► 32119	<u></u>	. <u>/ 0 0</u> .	<u>-</u>				
<b>b</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)?		Yes	No				
	42 b		Х				
If "Yes," enter the name of the foreign country -	If 'Yes,' enter the name of the foreign country ▶						
See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).							
<b>c</b> At any time during the calendar year, did the organization maintain an office outside the United States?	42 c		X				
	42 c		X				
<b>c</b> At any time during the calendar year, did the organization maintain an office outside the United States?	42 c		X				
<b>c</b> At any time during the calendar year, did the organization maintain an office outside the United States?	42 c		X				
<b>c</b> At any time during the calendar year, did the organization maintain an office outside the United States?		<u> </u>	X N/A				
c At any time during the calendar year, did the organization maintain an office outside the United States?			N/A N/A				
c At any time during the calendar year, did the organization maintain an office outside the United States?  If 'Yes,' enter the name of the foreign country    43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here  and enter the amount of tax-exempt interest received or accrued during the tax year.  43			N/A				
c At any time during the calendar year, did the organization maintain an office outside the United States?  If 'Yes,' enter the name of the foreign country   43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here			N/A N/A				
c At any time during the calendar year, did the organization maintain an office outside the United States?  If 'Yes,' enter the name of the foreign country   43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year.  44 a Did the organization maintain any donor advised funds during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ.  b Did the organization operate one or more hospital facilities during the year? If 'Yes,' Form 990 must be completed	44 a		N/A N/A No				
c At any time during the calendar year, did the organization maintain an office outside the United States?  If 'Yes,' enter the name of the foreign country ▶  43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year.  ▶ 43  44 a Did the organization maintain any donor advised funds during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ.  b Did the organization operate one or more hospital facilities during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ.	44 a		N/A N/A No X				
c At any time during the calendar year, did the organization maintain an office outside the United States?  If 'Yes,' enter the name of the foreign country ▶  43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year.  ▶ 43  44a Did the organization maintain any donor advised funds during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ.  b Did the organization operate one or more hospital facilities during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ.  c Did the organization receive any payments for indoor tanning services during the year?	44 a		N/A N/A No				
c At any time during the calendar year, did the organization maintain an office outside the United States?  If 'Yes,' enter the name of the foreign country ▶  43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year.  ↓ 43  44 a Did the organization maintain any donor advised funds during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ.  b Did the organization operate one or more hospital facilities during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ.  c Did the organization receive any payments for indoor tanning services during the year?  d If 'Yes' to line 44c, has the organization filed a Form 720 to report these payments?  If 'No,' provide an explanation in Schedule O.	44 a 44 b 44 c		N/A N/A No X X				
c At any time during the calendar year, did the organization maintain an office outside the United States?  If 'Yes,' enter the name of the foreign country ▶  43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year  44 a Did the organization maintain any donor advised funds during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ.  b Did the organization operate one or more hospital facilities during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ.  c Did the organization receive any payments for indoor tanning services during the year?  d If 'Yes' to line 44c, has the organization filed a Form 720 to report these payments?  If 'No,' provide an explanation in Schedule O.	44 a 44 b 44 c		N/A N/A No X				

	, , = = =						Yes	No
		engage, directly or indirect				46	Tes	
		office? If 'Yes,' complete				46		X
Part VI Section 501(c)(3) Organizations Only All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51.								
	Check if the	e organization used S	Schedule O to resp	ond to any questio	n in this Part VI…			
47 Did the	organization e	ngage in lobbying activities	or have a section 501(h	) election in effect during	the tax vear? If 'Yes.'		Yes	No
		C, Part II				47		Х
<b>48</b> Is the o	organization a	school as described in se	ection 170(b)(1)(A)(ii)?	If 'Yes,' complete Sche	dule E	48		Х
<b>49</b> a Did the	organization	make any transfers to an	exempt non-charitable	e related organization?		49 a		X
		ted organization a section	•					
		r the organization's five high received more than \$100,00				key		
					(e) Estimate other com			
None								
			00.000					
		er employees paid over \$1				N100 000 (		
comple	nte this table to nsation from t	r the organization's five high he organization. If there is	nest compensated indep s none, enter 'None.'	endent contractors who ea	ach received more than \$	\$100,000 of		
		ss address of each independent co		<b>(b)</b> Type	of service	(c) Comp	pensatio	n
None								
NOIIE								
<b>d</b> Total n	umber of othe	er independent contractors	each receiving over \$	100 000	•			
52 Did the	organization	complete Schedule A? No	ote: All section 501(c)(	3) organizations must a	ttach a	→ X <sub>Ye</sub>	Г	¬
		A					<b>s</b> L	No
true, correct, and	d complete. Declara	ation of preparer (other than officer	r) is based on all information of	of which preparer has any knowl	edge.	iller, it is		
	<u> </u>							
Sign Here	Signature of of	ncer			Date			
Here	Hewitt Type or print n	J Dupont			President			
l F	Print/Type prepare		Preparer's signature	Date	I II	PTIN		
_					Check L if		۵	
raiu –	<u>HeWitt J</u> Firm's name ▶	SHELLEY & SHELLI	<u>Hewitt J Dupor</u> EY CPA	1L	self-employed	20014188	7	
i i chai ci	Firm's address >		STE 213		Firm's EIN	48-1290	1481	
200 01119			32129			5-322-37		
May the IRS	discuss this r	eturn with the preparer sh		uctions	•			No
BAA	<u> </u>					Form <b>99</b>		

#### **SCHEDULE A** (Form 990)

Department of the Treasury Internal Revenue Service

**Public Charity Status and Public Support** 

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

► Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization	Name of the organization Employer identification number						
Friends of Tomoka Basin					46-38629		
Part I Reason for Public Cha	<u> </u>	<u> </u>			1 /	uctions.	
The organization is not a private found	dation because it is: (	For lines 1 through 12,	check o	nly one	box.)		
1 A church, convention of church	nes, or association of cl	nurches described in <b>sec</b>	tion 170(	(b)(1)(A)(	(i).		
2 A school described in section	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).)						
3 A hospital or a cooperative h	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).						
4 A medical research organiza	4 A medical research organization operated in conjunction with a hospital described in <b>section 170(b)(1)(A)(iii)</b> . Enter the hospital's						
name, city, and state:							
5 An organization operated for section 170(b)(1)(A)(iv). (Co	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 gov	ernment or governme	ental unit described in <b>s</b>	ection 1	70(b)(1)	)(A)(v).		
7 An organization that normally in section 170(b)(1)(A)(vi).		part of its support from a	governm	iental un	it or from the general p	public described	
8 A community trust described	l in <b>section 170(b)(1)(</b>	A)(vi). (Complete Part	l.)				
9 An agricultural research organ or university or a non-land-gra university:							
An organization that normall from activities related to its investment income and unreduced June 30, 1975. See section	exempt functions, sub lated business taxabl	oject to certain exception e income (less section	ns; and	(2) no r	more than 33-1/3% o	its support from gross	
11 An organization organized a	nd operated exclusive	ely to test for public saf	ety. See	section	1 509(a)(4).		
12 X An organization organized a or more publicly supported clines 12a through 12d that de	organizations describe	d in <b>section 509(a)(1)</b> d	r sectio	n 509(a	)(2). See section 509	(a)(3). Check the box on	
a Type I. A supporting organization organization organization (s) the power to recomplete Part IV, Sections A	ion operated, supervise	d, or controlled by its sup	ported c	organizat	ion(s), typically by givi	ng the supported	
b Type II. A supporting organiz management of the supporting must complete Part IV, Sect	zation supervised or c organization vested in	controlled in connection the same persons that c	with its ontrol or	support manage	ted organization(s), be the supported organiz	y having control or ation(s). <b>You</b>	
c X Type III functionally integrated organization(s) (see instruction	I. A supporting organizat	tion operated in connection	n with, a Δ D an	nd functi	onally integrated with, i	ts supported	
d Type III non-functionally integrated. The functionally integrated. The instructions). You must com	rated. A supporting org	anization operated in col	nnection	with its	supported organization It and an attentivenes	(s) that is not s requirement (see	
e Check this box if the organiz integrated, or Type III non-fu	zation received a writt	en determination from	the IRS	that it is	s a Type I, Type II, Ty	pe III functionally	
f Enter the number of supported		g organization	··			6	
g Provide the following information	n about the supported	d organization(s).					
(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	in your g	Is the tion listed governing ment?	(v) Amount of monetary support (see instructions	(vi) Amount of other support (see instructions)	
			Yes	No			
(A) a							
(A) See Part VI							
(B)							
(C)							
(D)							
(E)							
Total					1 0	. 0 .	

46-3862922

# Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

# **Section A. All Supporting Organizations**

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If 'No,' describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1	X	
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If 'Yes,' explain in <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		X
<b>3</b> a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer lines 3b and 3c below.	<b>3</b> a		X
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If 'Yes,' describe in <b>Part VI</b> when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If 'Yes,' explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3с		
<b>4</b> a	Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.	<b>4</b> a		Х
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If 'Yes,' describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If 'Yes,' explain in <b>Part VI</b> what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If 'Yes,' answer lines 5b and 5c below (if applicable). Also, provide detail in <b>Part VI</b> , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		Х
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5с		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If 'Yes,' provide detail in Part VI.</i>	6		Х
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If 'Yes,' complete Part I of Schedule L (Form 990).	7		X
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If 'Yes,' complete Part I of Schedule L (Form 990).	8		Х
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If 'Yes,' provide detail in <b>Part VI</b> .	9a		X
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If 'Yes,' provide detail in <b>Part VI.</b>	9b		Х
С	Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If 'Yes,' provide detail in <b>Part VI.</b>	9с		X
<b>0</b> a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations)? If 'Yes,' answer line 10b below.	1 <b>0</b> a		Х
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	10b		

46-3862922

Pai	rt IV	Supporting Organizations (continued)			
11	Hac t	the organization accepted a gift or contribution from any of the following persons?		Yes	No
	<b>a</b> A per	rson who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below,			
	the g	poverning body of a supported organization?	11a		X
		mily member of a person described on line 11a above?	11b		X
		6 controlled entity of a person described on line 11a or 11b above? If 'Yes' to line 11a, 11b, or 11c, provide detail in <b>Part VI</b> .	11c		X
Sec	tion	B. Type I Supporting Organizations		\ <u>'</u>	
1	Did tl	he governing body, members of the governing body, officers acting in their official capacity, or membership of one		Yes	No
•	or mo office organ than	ore supported organizations have the power to regularly appoint or elect at least a majority of the organization's ers, directors, or trustees at all times during the tax year? If 'No,' describe in <b>Part VI</b> how the supported nization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees			
		allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers ng the tax year.	1		
2	that o	he organization operate for the benefit of any supported organization other than the supported organization(s) operated, supervised, or controlled the supporting organization? If 'Yes,' explain in <b>Part VI</b> how providing such fit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the porting organization.	2		
Sec	tion (	C. Type II Supporting Organizations			
				Yes	No
1		a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees ach of the organization's supported organization(s)? If 'No,' describe in <b>Part VI</b> how control or management of the			
		orting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Sec	tion l	D. All Type III Supporting Organizations			
1	Did th	he organization provide to each of its supported organizations, by the last day of the fifth month of the		Yes	No
organi year, (	orgar	nization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	nization's governing documents in effect on the date of notification, to the extent not previously provided?	1	Χ		
2	Were	e any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
_	orgar	nization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in <b>Part VI</b> how organization maintained a close and continuous working relationship with the supported organization(s).	2	Х	
3	voice all tir	eason of the relationship described on line 2, above, did the organization's supported organizations have a significant e in the organization's investment policies and in directing the use of the organization's income or assets at mes during the tax year? If 'Yes,' describe in <b>Part VI</b> the role the organization's supported organizations played	3	Х	
Soc		is regard.  E. Type III Functionally Integrated Supporting Organizations	_ 3	Λ	
360					
1	Checi	k the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
á	a∐⊺	The organization satisfied the Activities Test. Complete line 2 below.			
I	o ∐ ⊺	The organization is the parent of each of its supported organizations. Complete line 3 below.			
•	: [X] ⊤	The organization supported a governmental entity. <i>Describe in <b>Part VI</b> how you supported a governmental entity (see</i> See Part VI	instru	uctions	s).
2	Activ	rities Test. <b>Answer lines 2a and 2b below.</b>		Yes	No
ŧ	suppo orgai	substantially all of the organization's activities during the tax year directly further the exempt purposes of the orted organization(s) to which the organization was responsive? If 'Yes,' then in <b>Part VI identify those supported</b> nizations and explain how these activities directly furthered their exempt purposes, how the organization was consive to those supported organizations, and how the organization determined that these activities constituted			
		tantially all of its activities.	<b>2</b> a		
ı	more	he activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or e of the organization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the ons for the organization's position that its supported organization(s) would have engaged in these activities			
		ons for the organization's position that its supported organization(s) would have engaged in these activities for the organization's involvement.	2b		
		nt of Supported Organizations. <i>Answer lines 3a and 3b below.</i>			
i	a Did the each	he organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of of the supported organizations? If 'Yes' or 'No,' provide details in <b>Part VI</b> .	<b>3</b> a		
ı	Did th	ne organization exercise a substantial degree of direction over the policies, programs, and activities of each of its orted organizations? If 'Yes,' describe in <b>Part VI</b> the role played by the organization in this regard.	3b		

Schedule A (Form 990) 2021

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

#### Schedule A, Part I, Line 12 Name(s) of Supported Organization(s)

Name of Supported Organization	Federal EIN		Listed in Governing Document?  Yes No	Mor	unt of netary oport	Amount of Other Support
Bulow Plantation Ruins	59-6001874	6		\$	0. \$	0.
Bulow Creek State Park	59-6001874	6			0.	0.
Tomoka State Park	59-6001874	6			0.	0.
Addison Blockhouse Hist	State Park 59-6001874	6			0.	0.
Haw Creek Preserve Stat	e Park 59-6001874	6			0.	0.
Dummett Sugar Mill Ruin	s59-6001874	6			0.	0.
				\$	0. \$	0.

#### **Additional Explanation of Other Income**

Fundraising, Scrap sales-Equipment donated

#### Part IV, Section D, Line 3 - Role The Organization's Supported Orgs. Played

Citizens Support Organization Agreement with the State of Florida grants exclusive right for the CSO to conduct following activities, projects and events for Bulow Plantation Ruins Historic State Park, Bulow Creek State Park, Tomoka State Park, Addison Block House State Park and Haw Creek Preserve State Park including fundraising, offical meetings, volunteer activities and projects, public educational and interpretative activities or events and any other activities set forth in Articles of Incorporation. The State Park Manager is the designated CSO Agreement manager and is responsible for comunicating agency policy and proper procedures, ensuring that CSO programs and projects are consistent with Park needs and goals, ensuring that CSO upholds CSO agreement, ensuring sound governance in accordance with Bylaws, Articles of Incorporation, CSO agreement, State and Federal laws and ensuring

Schedule A (Form 990) 2021

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Part VI

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

# Part IV, Section D, Line 3 - Role The Organization's Supported Orgs. Played (continued)

that CSO is capable of meeting non-profit organization standards and the organization's mission. CSO annually develops and submits to State Park Manager for review and approval a CSO Program Plan of all projects, activities and events it plans to carry out on Park property. CSO annually provides financial reports to State Park Mananger either as a financial statement or a Form 990-EZ.

#### Part IV, Section E, Line 1c - Explain How Organization Supports Government Entity

Citizens Support Organization Agreement with the State of Florida grants exclusive right for the CSO to conduct following activities, projects and events for Bulow Plantation Ruins Historic State Park, Bulow Creek State Park, Tomoka State Park, Addison Blockhouse Historic State Park and Haw Creek Preserve State Park including fundraising, offical meetings, volunteer activities and projects, public educational and interpretative activities or events and any other activities set forth in Articles of Incorporation. The State Park Manager is the designated CSO Agreement manager and is responsible for comunicating agency policy and proper procedures, ensuring that CSO programs and projects are consistent with Park needs and goals, ensuring that CSO upholds CSO agreement, ensuring sound governance in accordance with Bylaws, Articles of Incorporation, CSO agreement, State and Federal laws and ensuring that CSO is capable of meeting non-profit organization standards and the organization's mission. CSO annually develops and submits to State Park Manager for review and approval a CSO Program Plan of all projects, activities and events it plans to carry out on Park property. CSO annually provides financial reports to State Park Mananger either as a financial statement or a Form 990-EZ.

Part VI

Schedule A (Form 990) 2021

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

Part IV, Section E, Line 2a - Identify Supported Orgs. and Explain How Activities Furthered Exempt Purposes Citizens Support Organization Agreement with the State of Florida grants exclusive right for the CSO to conduct following activities, projects and events for Bulow Plantation Ruins Historic State Park, Bulow Creek State Park, Tomoka State Park, Addison Blockhouse Historic State Park and Haw Creek Preserve State Park including fundraising, offical meetings, volunteer activities and projects, public educational and interpretative activities or events and any other activities set forth in Articles of Incorporation. The State Park Manager is the designated CSO Agreement manager and is responsible for comunicating agency policy and proper procedures, ensuring that CSO programs and projects are consistent with Park needs and goals, ensuring that CSO upholds CSO agreement, ensuring sound governance in accordance with Bylaws, Articles of Incorporation, CSO agreement, State and Federal laws and ensuring that CSO is capable of meeting non-profit organization standards and the organization's mission. CSO annually develops and submits to State Park Manager for review and approval a CSO Program Plan of all projects, activities and events it plans to carry out on Park property. CSO annually provides financial reports to State Park Mananger either as a financial statement or a Form 990-EZ.

#### Part IV, Section E, Line 2b - Reasons For The Organization's Position

Citizens Support Organization Agreement with the State of Florida grants exclusive right for the CSO to conduct following activities, projects and events for Bulow Plantation Ruins Historic State Park, Bulow Creek State Park, Tomoka State Park, Addison Blockhouse Historic State Park and Haw Creek Preserve State Park including fundraising, offical meetings, volunteer activities and projects, public educational and interpretative activities or events and any other activities set forth in Articles of Incorporation. The State Park Manager is the designated CSO Agreement manager and is responsible for comunicating agency policy and proper procedures,

Schedule A (Form 990) 2021

Part VI

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

## Part IV, Section E, Line 2b - Reasons For The Organization's Position (continued)

ensuring that CSO upholds CSO agreement, ensuring sound governance in accordance with Bylaws, Articles of Incorporation, CSO agreement, State and Federal laws and ensuring that CSO is capable of meeting non-profit organization standards and the organization's mission. CSO annually develops and submits to State Park Manager for review and approval a CSO Program Plan of all projects, activities and events it plans to carry out on Park property. CSO annually provides financial reports to State Park Manager either as a financial statement or a Form 990-EZ.

#### Part IV, Section E, Line 3b - Role Played in Management of Policies, Programs, & Activities

Citizens Support Organization Agreement with the State of Florida grants exclusive right for the CSO to conduct following activities, projects and events for Bulow Plantation Ruins Historic State Park, Bulow Creek State Park, Tomoka State Park, Addison Blockhouse Historic State Park and Haw Creek Preserve State Park including fundraising, offical meetings, volunteer activities and projects, public educational and interpretative activities or events and any other activities set forth in Articles of Incorporation. The State Park Manager is the designated CSO Agreement manager and is responsible for comunicating agency policy and proper procedures, ensuring that CSO programs and projects are consistent with Park needs and goals, ensuring that CSO upholds CSO agreement, ensuring sound governance in accordance with Bylaws, Articles of Incorporation, CSO agreement, State and Federal laws and ensuring that CSO is capable of meeting non-profit organization standards and the organization's mission. CSO annually develops and submits to State Park Manager for review and approval a CSO Program Plan of all projects, activities and events it plans to carry out on Park property. CSO annually provides financial reports to State Park Mananger either as a financial statement or a Form 990-EZ.

#### SCHEDULE O (Form 990)

# 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 Form 990-EZ.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► Go to www.irs.gov/Form990 for the latest information.

Form 990-EZ, Part III, Line 28 - Statement of Program Service Accomplishments

Citizens Support Organization for the Tomoka Basin Florida State Parks: Park
Trail Maintenance; Park Events and Educational Programs; Interpretive Displays;
Historical Tours and Internet Website visits. Number of persons benefited: Over
10,000

#### Form 990-EZ, Part V - Regarding Transfers Associated with Personal Benefit Contracts

(a) Did the organization, during the year, recei	ve any funds, directly or
indirectly, to pay premiums on a personal benefit	contract?
(b) Did the organization, during the year, pay p	premiums, directly or
indirectly, on a personal benefit contract?	No