



**Florida Department of Environmental Protection**

**CITIZEN SUPPORT ORGANIZATION  
2017 REPORT  
(pursuant to Florida Statute 20.058)**

Citizen Support Organization (CSO) Name: Friends of Anastasia State Recreation Area, Inc.

Mailing Address: 1304A A1A South, St. Augustine, Florida 32080

Telephone Number: **(904) 461-2000**\_\_Website Address (if applicable): http://www.friendsofanastasia.org/

**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.

**Brief Description of the CSO's Mission:**

The current CSO mission statement is: "To generate supplemental resources which will provide increased recreational opportunities and further enhance protection of the natural and cultural resources of Anastasia State Park." The overall intent is to support operation enhancement, projects, and volunteerism to help the park meet its goals and objectives as described in the park's Unit Management Plan. This support can be either monetary or through volunteerism.

**Brief Description of the CSO's Results Obtained:**

The CSO has purchased vehicles for park staff and conducted several special event fundraisers: *Endless Summer Run 10k & 5K*, *Earth Day Fair*, and monthly *Music in the Park* events. The CSO also conducted quarterly beach cleanup events which involved community volunteers and were a crucial part of conducting the 2016 ASSPD Conference. The CSO also continued with its community outreach efforts through monthly local farmer's markets and events.

**Brief Description of the CSO's Plans for Next Three Fiscal Years:**

To maintain and enhance a working and professional relationship with the park and its visitors. To enhance and stimulate membership with the community. To develop sustainable relationships with other businesses and governmental agencies for utilization of the park and its facilities. To help the park meet its goals of increasing access of the park which would include expansion of recreational programming.

- Copy of the CSO's Code of Ethics attached** (*Model provided; see CSO 2015 instructions*)
- Certify the CSO has completed and provided to the Department the organization's most recent Internal Revenue Service (IRS) Form 990, 990-EZ, or 990-N/Annual Financial Statement**

# Model CSO Code of Ethics – June 2016

## FRIENDS OF ANASTASIA CODE OF ETHICS

### PREAMBLE

- (1) It is essential to the proper conduct and operation of Friends of Anastasia (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 Anastasia 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.

## **Model CSO Code of Ethics – June 2016**

### **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.



# Florida Department of Environmental Protection

Anastasia State Park  
1340A A1A South  
St. Augustine, FL 32080

Rick Scott  
Governor

Carlos Lopez-Cantera  
Lt. Governor

Ryan Matthews  
Interim Secretary

## Memorandum

**TO:** Larry Fooks, Bureau Chief  
District III Administration

**FROM:** Mark Giblin, Park Manager III  
Anastasia State Park

**SUBJECT:** Friends of Anastasia State Park 2017 Annual Report

**DATE:** April 5, 2017

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The Friends of Anastasia continue to be an essential part in supporting park operations and goal to increase visitation. This diverse group has grown tremendously in the recent years; demonstrating real initiative and motivation to expand their goals and promote the park.

The events that they have supported last year were "Endless Summer Run" and "Earth Day". They were an integral part of the ASSPD conference planning and implementing. They have continued with the seasonal Music in the Park event and now seek to expand support through events like "National Literacy Day" and a monthly "Beach Clean Up". These new events will encourage increased park visitation and public awareness of local ecosystems and wildlife.

They are constantly finding new ways to increase membership and more importantly involvement from the general members. They stay up to date on the latest trends in technology and are always seeking out new approaches in attracting new members. The group continues with their outreach efforts by setting up informational booths at local events.

They are dedicated to developing and sustaining community partnerships and have welcomed several new sponsors this year and also have many returning sponsors year after year.

The dedication of the members of Friends of Anastasia will bring the group as a whole great success. I look forward to seeing what this group will accomplish in the future years. I know that they will work towards common goals which will advance the parks operations and public image.

/MSG

CC: Robert Yero & Greg Adams

April 15, 2017

Mark Giblin, Park Manager  
Anastasia State Park  
1340A A1A South  
St. Augustine, FL 32080

Dear Mark,

It's been a pleasure partnering with Anastasia State Park over another successful year. Highlights from 2016 include:

- Continued board development
- Successful Endless Summer Run events
- Jr. Ranger program support
- Successful ASSPD Conference
- Continued park-wide recycling program
- Increasing membership to over 130 members
- Enhanced "Music in the Park" to a Summer Concert Series
- Increasing events held in the park

Our goals for fiscal year Jan. – Dec. 2017 include:

- Spend budgeted monies
- Continue with fundraisers
- Build up membership
- Expand outreach efforts
- Increase public access
- Streamline recycling program to meet the Friends of Anastasia's recycling goal
- Increase interpretive efforts

The Friends of Anastasia look forward to continued involvement with Anastasia State Park.

Sincerely,

*Greg Adams*

Greg Adams  
President, Friends of Anastasia

## **Citizen Support Organization Statement of Accomplishments and Goals**

This statement is part of the Citizen Support Organization's (CSO's) Annual Financial Report (see Chapter 5: Section 7) of the 2015 CSO Handbook. The primary purpose of the Annual Financial Report is to provide a summary of the most relevant information to the Department and Division, and to meet the common interests of donors, members, creditors, and others who provide resources to the not for profit organization. Report the accomplishments for the CSO's past fiscal year and goals for the upcoming year.

**Name of the CSO** Friends of Anastasia State Park

**CSO Address** 1340A A1A South

**City, State, Zip Code** St. Augustine, FL 32080

A summary of CSO accomplishments from the period of January 1, 2016 through December 31, 2016 is as follows:

**Estimated Total Volunteer Hours** (Jan. 1-Dec. 31 2016)

**Total Membership** (Jan. 1 – Dec. 31, 2016)

**Total Volunteer Hours:** 2,749.3 hours

**Total Membership:** 132 members

### **List of CSO Board Members**

Please see attached.

### **Summary of Accomplishments**

- Continued board development
- Successful Endless Summer Run event
- Successful ASSPD Conference
- Successful Earth Day event
- Jr. Ranger program support
- Continued park-wide recycling program
- Increasing membership Renewal
- Enhanced "Music in the Park" to Summer Concert Series
- Increasing events held in the park

### **Summary of Goals or Priorities for the Upcoming Fiscal Year (Attach additional pages as needed)**

- Spend budgeted monies
- Continue review and revision of Friends of Anastasia organizational documents.
- Continue with fundraisers
- Continue to increase membership
- Expand outreach efforts to actively involve Friends of Anastasia membership
- Increase public access, such as installing additional bike racks
- Streamline recycling program to meet the Friends of Anastasia's recycling goal
- Increase interpretive efforts

## **CURRENT BOARD MEMBERS:**

**Greg Adams, President**

115 Segovia Road  
St. Augustine, FL 32086  
(904) 794-0480  
[adam33131186@att.net](mailto:adam33131186@att.net)

**Rita Roberts, Vice President**

75 Comares Avenue 2-B  
St. Augustine, FL 32080  
(904) 824-4909  
[rrinletplace@att.net](mailto:rrinletplace@att.net)

**Doug Imshaug, Treasurer**

1195 San Jose Forest Drive  
St. Augustine, FL 32080  
(810) 571-0253  
[imshaug@yahoo.com](mailto:imshaug@yahoo.com)

**Richard Gallik, Director**

471 High Tide Drive  
St. Augustine, FL 32080  
32080  
(904) 471-1615  
[richtg@att.net](mailto:richtg@att.net)

**Louise Gallik, Director**

471 High Tide Drive  
St. Augustine, FL 32080  
(904) 471-1615  
[llantiques@att.net](mailto:llantiques@att.net)

**Katrina Leonard, Director**

405 Andreas Street  
St. Augustine, FL 32080  
(954) 540-1390  
[katrina.leonard86@yahoo.com](mailto:katrina.leonard86@yahoo.com)

**Cecile Browning-Nusbaum, Director**

74 Lemon St.  
St. Augustine, FL 32084  
904-806-3022  
[cecile@oldcity.com](mailto:cecile@oldcity.com)

## **Citizen Support Organization Statement on Value of Contributed Services**

This statement reports on services provided to the Citizen Support Organization (CSO) from park staff support and in-kind support for the past fiscal year. The statement is part of the CSO's Annual Financial Report described in Chapter 5: Section 7 of the 2014 CSO Handbook. The primary purpose of the Annual Financial Report is to provide a summary of the most relevant information to the Department and Division, and to meet the common interests of donors, members, creditors, and others who provide resources to the not for profit organization.

This Value of Contributed Services for a park is provided to the CSO by the park or District through the Park Programs Development Specialist. Note, the Division of Recreation and Parks operates on a cash-based method of accounting.

**Park Name:** Anastasia State Park

**Park Address:** 1340A A1A South St. Augustine FL 32080

**Name of the CSO:** Friends of Anastasia State Park

A summary of contributed services from Jan. 1, 2016 through Dec 31 2016 is as follows:

### **Park Staff Support**

The total number of hours contributed in staff support services converted to a monetary amount.

The park contributed a total of \$7,225.51 in staff support services to the CSO.

### **Park Facilities Support**

The total amount of water, electric, and utility expenses used to support CSO events, concessions, etc.

The CSO received a total of \$ 100.00 in park facilities support.

### **In-Kind Support**

The CSO receives additional services outside of the park staff contributed hours called in-kind services. In-kind services are a type of charitable giving in which, instead of money, a person contributes services, goods, or commodity's. Examples are professional services of a lawyer, accountant, or any professional or the estimated value of a good or commodity.

The CSO received a total of \$ 0 in in-kind support services.

### **List of Program Services**



Federal charitable 501(c)(3) organizations are required to report total expenses and revenue for each program service. According to the IRS, a program service is any activity by the organization which accomplishes its charitable purposes.

For *each* program service provide a description, total expense, and total revenue. For *each* program service description, clearly and concisely describe the accomplishments through specific measurements such as visitors served, days of an event, number of sessions or events held, publications issued, etc. (add pages as appropriate).

**Program Service Description:** Jr. Rangers - This program supports about 20-25 students each year who build environmental skills through it. It has allowed the park to sustain this educational programming and maintain a good relationship with the local Elementary School every year.

Total Expense \$150.00

Total Revenue \$0.00

**Program Service Description:** Vol-Camp Hosts - This program supports 22 volunteers each month along with volunteer vehicles. It supplements their resource-based and recreation-based projects which aid the park.

Total Expense \$5,256.00

Total Revenue \$0.00

**Program Service Description** Endless Summer Run – This 10K & 5K run was a resource-based recreation activity in the park. It raised awareness of the park as well as exposed visitors to its less-utilized trails. Last year’s race brought in 500 runners and countless more visitors and community supporters.

Total Expense \$9,978.00

Total Revenue \$18,524.00

### **Total Program Services**

Provide a total amount for all program expenses and a total amount for all program revenue.

CSO total program service expenses \$15,384.00

CSO total program service revenues \$18,524.00

Anastasia State Park  
300 Anastasia Park Road  
St. Augustine, FL 32080

This Value of Contributed Services is provided by the staff of Anastasia State Park, Division of Recreation and Parks, Department of Environmental Protection. The Division of Recreation and Parks operates on a cash-based method of accounting.

A summary of contributed services from Anastasia State Park \_\_\_\_\_ for the period of January 1, 2016 through December 31, 2016 is as follows:

Staff Support:

The park contributed a total of \$7,225.51 in staff support services to the Friends of Anastasia State Recreation Area, Inc.

Breakdown:

Program Services	\$ 314.78
Management & General Support	\$ 6,910.73
	_____
Total	\$7,225.51

Department of the Treasury  
Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.  
▶ Information about Form 990-EZ and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

**A** For the 2016 calendar year, or tax year beginning , 2016, and ending , 20

**B** Check if applicable:

- Address change
- Name change
- Initial return
- Final return/terminated
- Amended return
- Application pending

**C** Name of organization: **Friends of Anastasia State Park, Inc**

Number and street (or P.O. box, if mail is not delivered to street address): **1340A A1A South** Room/suite: \_\_\_\_\_

City or town, state or province, country, and ZIP or foreign postal code: **Saint Augustine, FL, 32080**

**D** Employer identification number: **59-3654107**

**E** Telephone number: **904-461-2000**

**F** Group Exemption Number: ▶ \_\_\_\_\_

**G** Accounting Method:  Cash  Accrual  Other (specify) ▶ \_\_\_\_\_

**I** Website: ▶ [www.friendsofanastasia.org](http://www.friendsofanastasia.org)

**J** Tax-exempt status (check only one) –  501(c)(3)  501(c) ( ) ◀ (insert no.)  4947(a)(1) or  527

**K** Form of organization:  Corporation  Trust  Association  Other \_\_\_\_\_

**L** Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ . . . . . ▶ \$ **40,096**

**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (see the instructions for Part I)  
Check if the organization used Schedule O to respond to any question in this Part I . . . . .

		1	2	3	4	5a	5b	5c	6a	6b	6c	6d	7a	7b	7c	8	9	10	11	12	13	14	15	16	17	18	19	20	21		
Revenue	<b>1</b> Contributions, gifts, grants, and similar amounts received . . . . .																													717	
	<b>2</b> Program service revenue including government fees and contracts . . . . .																													0	
	<b>3</b> Membership dues and assessments . . . . .																													2,918	
	<b>4</b> Investment income . . . . .																													20	
	<b>5a</b> Gross amount from sale of assets other than inventory . . . . .						0																							0	
	<b>b</b> Less: cost or other basis and sales expenses . . . . .						0																							0	
	<b>c</b> Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) . . . . .								0																					0	
	<b>6</b> Gaming and fundraising events																														
	<b>a</b> Gross income from gaming (attach Schedule G if greater than \$15,000) . . . . .									0																					0
	<b>b</b> Gross income from fundraising events (not including \$ 750 of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000) . . . . .										36,114																				
<b>c</b> Less: direct expenses from gaming and fundraising events . . . . .										26,025																					
<b>d</b> Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c) . . . . .												10,089																			
<b>7a</b> Gross sales of inventory, less returns and allowances . . . . .													25																	5	
<b>b</b> Less: cost of goods sold . . . . .													20																		
<b>c</b> Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) . . . . .																														5	
<b>8</b> Other revenue (describe in Schedule O) . . . . .																														2,003	
<b>9 Total revenue.</b> Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 . . . . . ▶																														15,752	
Expenses	<b>10</b> Grants and similar amounts paid (list in Schedule O) . . . . .																													0	
	<b>11</b> Benefits paid to or for members . . . . .																													878	
	<b>12</b> Salaries, other compensation, and employee benefits . . . . .																													0	
	<b>13</b> Professional fees and other payments to independent contractors . . . . .																														0
	<b>14</b> Occupancy, rent, utilities, and maintenance . . . . .																														0
	<b>15</b> Printing, publications, postage, and shipping . . . . .																														110
	<b>16</b> Other expenses (describe in Schedule O) . . . . .																														6,663
<b>17 Total expenses.</b> Add lines 10 through 16 . . . . . ▶																														7,651	
Net Assets	<b>18</b> Excess or (deficit) for the year (Subtract line 17 from line 9) . . . . .																													8,101	
	<b>19</b> Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) . . . . .																													18,328	
	<b>20</b> Other changes in net assets or fund balances (explain in Schedule O) . . . . .																													0	
	<b>21</b> Net assets or fund balances at end of year. Combine lines 18 through 20 . . . . . ▶																														26,429



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.

Table with columns for question number, question text, and Yes/No checkboxes. Rows include questions 33 through 45b regarding organizational activities, financials, and governance.

	Yes	No
46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I . . . . .	46	✓

**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 organization used Schedule O to respond to any question in this Part VI . . . . .

	Yes	No
47 Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II . . . . .	47	✓
48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E . . . . .	48	✓
49a Did the organization make any transfers to an exempt non-charitable related organization? . . . . .	49a	✓
b If "Yes," was the related organization a section 527 organization? . . . . .	49b	

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees, and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
NONE				

f Total number of other employees paid over \$100,000 . . . . . ▶ 0

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and business address of each independent contractor	(b) Type of service	(c) Compensation
NONE		

d Total number of other independent contractors each receiving over \$100,000 . . . . . ▶ 0

52 Did the organization complete Schedule A? **Note:** All section 501(c)(3) organizations must attach a completed Schedule A . . . . . ▶  Yes  No

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

<b>Sign Here</b>	Signature of officer	Date
	<b>Doug Imshaug, Treasurer</b>	
	Type or print name and title	

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

May the IRS discuss this return with the preparer shown above? See instructions . . . . . ▶  Yes  No



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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		<u>Endless Summer Ru</u> (event type)	<u>NONE</u> (event type)	<u>NONE</u> (total number)	(add col. (a) through col. (c))
Revenue	<b>1</b> Gross receipts . . . . .	\$32,787			\$32,787
	<b>2</b> Less: Contributions . . . . .	-0-			-0-
	<b>3</b> Gross income (line 1 minus line 2) . . . . .	\$32,787			\$32,787
Direct Expenses	<b>4</b> Cash prizes . . . . .	-0-			-0-
	<b>5</b> Noncash prizes . . . . .	\$7192			\$7192
	<b>6</b> Rent/facility costs . . . . .	\$755			\$755
	<b>7</b> Food and beverages . . . . .	\$307			\$307
	<b>8</b> Entertainment . . . . .	-0-			-0-
	<b>9</b> Other direct expenses . . . . .	\$14,964			\$14,964
	<b>10</b> Direct expense summary. Add lines 4 through 9 in column (d) . . . . . ▶				\$23,218
<b>11</b> Net income summary. Subtract line 10 from line 3, column (d) . . . . . ▶				\$9,569	

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

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

**9** Enter the state(s) in which the organization conducts gaming activities: \_\_\_\_\_

**a** Is the organization licensed to conduct gaming activities in each of these states?  Yes  No

**b** If "No," explain: \_\_\_\_\_

\_\_\_\_\_

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

**b** If "Yes," explain: \_\_\_\_\_

\_\_\_\_\_





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

**Supplemental Information to Form 990 or 990-EZ**

OMB No. 1545-0047

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

**2016**

Department of the Treasury  
Internal Revenue Service

▶ Attach to Form 990 or 990-EZ.

**Open to Public Inspection**

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Name of the organization

Employer identification number

**Friends of Anastasia State Park**

**59-3654107**

**PART I 8) OTHER REVENUE**

**Recycle Cans - \$294**

**Fiscal Agent for ASSPD - \$1,709**

**PART I 16) OTHER EXPENSES**

**St John County Visitor Convention - \$200**

**Volunteer aand Camp Hosts - \$162**

**Park Maintenance-Supplies - \$1,282**

**2 Golf cart purchases - \$4,500**

**Office Expense / Web - \$150**

**Earth Day Celebration - \$198**

**Blue Tube Sponsorship - \$125**

**Anastasia Mouse Supplies - \$46**

## General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

**Future developments.** For the latest information about developments related to Schedule O (Form 990 or 990-EZ), such as legislation enacted after the schedule and its instructions were published, go to [www.irs.gov/form990](http://www.irs.gov/form990).

### Purpose of Schedule

An organization should use Schedule O (Form 990 or 990-EZ), rather than separate attachments, to provide the IRS with narrative information required for responses to specific questions on Form 990 or 990-EZ, and to explain the organization's operations or responses to various questions. It allows organizations to supplement information reported on Form 990 or 990-EZ.

Don't use Schedule O to supplement responses to questions in other schedules of the Form 990 or 990-EZ. Each of the other schedules includes a separate part for supplemental information.

### Who Must File

All organizations that file Form 990 and certain organizations that file Form 990-EZ must file Schedule O (Form 990 or 990-EZ). At a minimum, the schedule must be used to answer Form 990, Part VI, lines 11b and 19. If an organization isn't required to file Form 990 or 990-EZ but chooses to do so, it must file a complete return and provide all of the information requested, including the required schedules.

## Specific Instructions

Use as many continuation sheets of Schedule O (Form 990 or 990-EZ) as needed.

Complete the required information on the appropriate line of Form 990 or 990-EZ prior to using Schedule O (Form 990 or 990-EZ).

Identify clearly the specific part and line(s) of Form 990 or 990-EZ to which each response relates. Follow the part and line sequence of Form 990 or 990-EZ.

**Late return.** If the return is not filed by the due date (including any extension granted), attach a separate statement giving the reasons for not filing on time. **Don't use** this schedule to provide the late-filing statement.

**Amended return.** If the organization checked the *Amended return* box on Form 990, *Heading*, item B, or Form 990-EZ, *Heading*, item B, use Schedule O (Form 990 or 990-EZ) to list each part or schedule and line item of the Form 990 or 990-EZ that was amended.

**Group return.** If the organization answered "Yes" to Form 990, line H(a), but "No" to line H(b), use a separate

attachment to list the name, address, and EIN of each affiliated organization included in the group return. **Don't use** this schedule. See the Instructions for Form 990, *I. Group Return*.

**Form 990, Parts III, V, VI, VII, IX, XI, and XII.** Use Schedule O (Form 990 or 990-EZ) to provide any narrative information required for the following questions in the Form 990.

1. Part III, *Statement of Program Service Accomplishments*.

- a. "Yes" response to line 2.
- b. "Yes" response to line 3.
- c. Other program services on line 4d.

2. Part V, *Statements Regarding Other IRS Filings and Tax Compliance*.

- a. "No" response to line 3b.
- b. "Yes" or "No" response to line 13a.
- c. "No" response to line 14b.

3. Part VI, *Governance, Management, and Disclosure*.

- a. Material differences in voting rights among members of the governing body in line 1a.
- b. Delegation of governing board's authority to executive committee in line 1a.
- c. "Yes" responses to lines 2 through 7b.
- d. "No" responses to lines 8a, 8b, and 10b.
- e. "Yes" response to line 9.
- f. Description of process for review of Form 990, if any, in response to line 11b.
- g. "Yes" response to line 12c.
- h. Description of process for determining **compensation** in response to lines 15a and 15b.

i. If applicable, in response to line 18, an explanation as to why the organization checked the "Other" box or didn't make any of Forms 1023, 1024, 990, or 990-T publicly available.

j. Description of public disclosure of documents in response to line 19.

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

a. Explain if reporting of compensation paid by a related organization is provided only for the period during which the related organization was related, not the entire calendar year ending with or within the tax year, and state the period during which the related organization was related.

b. Description of reasonable efforts undertaken to obtain information on compensation paid by related organizations, if the organization is unable to obtain such information to report in column (E).

5. Explanation for Part IX, *Statement of Functional Expenses*, line 11g (other fees

for services), including the type and amount of each expense included in line 11g, if the amount in Part IX, line 11g, exceeds 10% of the amount in Part IX, line 25 (total functional expenses).

6. Explanation for Part IX, *Statement of Functional Expenses*, line 24e (all other expenses), including the type and amount of each expense included in line 24e, if the amount on line 24e exceeds 10% of the amount in Part IX, line 25 (total functional expenses).

7. Part XI, *Reconciliation of Net Assets*. Explain any other changes in net assets or fund balances reported on line 9.

8. Part XII, *Financial Statements and Reporting*.

- a. Change in accounting method or description of other accounting method used on line 1.
- b. Change in committee oversight review from prior year on line 2c.
- c. "No" response to line 3b.

**Form 990-EZ, Parts I, II, III, and V.** Use Schedule O (Form 990 or 990-EZ) to provide any narrative information required for the following questions.

1. Part I, *Revenue, Expenses, and Changes in Net Assets or Fund Balances*.

- a. Description of other revenue, in response to line 8.
- b. List of grants and similar amounts paid, in response to line 10.
- c. Description of other expenses, in response to line 16.
- d. Explanation of other changes in net assets or fund balances, in response to line 20.

2. Part II, *Balance Sheets*.

- a. Description of other assets, in response to line 24.
- b. Description of total liabilities, in response to line 26.

3. Description of other program services in response to Part III, *Statement of Program Service Accomplishments*, line 31.

4. Part V, *Other Information*.

- a. "Yes" response to line 33.
- b. "Yes" response to line 34.
- c. Explanation of why organization didn't report unrelated business gross income of \$1,000 or more to the IRS on Form 990-T, in response to line 35b.
- d. "No" response to line 44d.

**Other.** Use Schedule O (Form 990 or 990-EZ) to provide narrative explanations and descriptions in response to other specific questions. The narrative provided should refer and relate to a particular line and response on the form.



**Don't include on Schedule O (Form 990 or 990-EZ) any social security number(s), because this schedule will be made available for public inspection.**