

# Florida Department of Environmental Protection CITIZEN SUPPORT ORGANIZATION 2015 REPORT

(pursuant to Florida Statute 20.058)

Citizen Support Organization (CSO) Name: Friends of Anclote Key State Park & Lighthouse

Mailing Address: PO Box 2622, Tarpon Springs FL 34688-0655

Telephone Number: 727-940-2658

Website Address (if applicable): www.AncloteCSO.org and

https://www.facebook.com/AncloteKeyLighthouse

#### **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: This is quoted from our Bylaws

- 1. Acting as a non-profit citizen support organization, as defined and regulated by the Florida Department of Environmental Protection, to generate and employ additional resources and support for, and in the best interests of, Anclote Key State Park and Lighthouse. This will be accomplished through, among other events and activities, the following: special work projects, special programs, special events, outreach programs, educational and scientific research, activities and communications, interpretive programs, fundraising activities and events, guided tours as well as those activities or events which are designed to meet the additional areas of park needs recommended by the Division of Recreation and Parks or the Park Manager.
- 2. To generally to do all things and transact all business which may lawfully be done by any person or individual, consistent with the rights and purposes of a non-profit CSO. The CSO shall not engage in any activities prohibited under Chapter 617, Florida Statutes.
- 3. However, there shall be no pecuniary gain or profit to CSO members. The CSO shall be non-discriminatory, non-partisan, and non-sectarian. The CSO shall not engage in direct support or opposition to, specific issues or activities of political officers or candidates.

## Brief Description of the CSO's Results Obtained in 2014:

- The Board met every month.
- The CSO achieved retroactive reinstatement of its status as a 501(c)(3) organization.
- Events
  - o Gulf Harbors Pancake Breakfast, March 16, 2014 (recruited five new members)
  - o Island Earth Days April 12-13 (Done sold memorabilia and one brick ordered)
  - o Work day on June 7, 2014.
  - Lecture, featuring Neal Hurley Lighthouse expert, about the Lighthouse on September 9, 2014 and over 40 people attended.
  - Participated in National Public Lands Day on September 28, 2014 where volunteers and about 12 students from the Science Club at a local high school attended and helped clean up the island
- Membership and Outreach
  - Launched our Facebook page and achieved over 700 followers.
  - May 8, 2014, The Park Manager and Board President presented a program to the Calusa Boat Club.

- Advertised our CSO at the Tarpon Springs Music on the Beach event, August 9, 2014
- Fundraising
  - o Memorabilia
    - The Chamber of Commerce shop is selling our goods
    - Chamber Antique and Treasure Sale on November 22
  - o Grant from Florida Lighthouse Association
    - Applied for and received \$10,000 from the FLA to help fund replacement of the grates on the dock; work was completed; attended the FLA meeting to present the results and show photos
  - Two Board Members have company matching grants. \$750 was received from Verizon from one
    of those Members.
  - Continued to sell memorial bricks
- Relationships with other CSOs/Groups
  - o Members in good standing of the Tarpon Springs Chamber of Commerce
  - Board President and another Board Member attended an work day at the Egmont Key Park, learning how another CSO operates and about the park in general.
  - The CSO is a Member of Friends of Florida State Parks and three Board Members attended the Spring FFSP Conference.
  - o Board President attended an invitational meeting of the Friends of Florida State Parks in September along with the Park Manager.
  - o Members in good standing of the Florida Lighthouse Association
  - The leader of the Save Our Sandbar group attended one of our Board Meetings and then helped us achieve greater reach with Anclote CSO's Facebook page.
  - o Two members of the Board attended a meeting of the Friends of the Anclote River.
- Support for the Park's needs
  - Purchased a mower for the Island
  - Helped build a walkway over an area that always floods
  - Built a washstand for the new Club Car
- Record-keeping upgraded so that funds accounting are now computer-based in Quicken Business and standard reports can be generated. Memorabilia was inventoried and we now have a true accounting of this.
- Volunteers donated over 553 hours

## Brief Description of the CSO's Plans for Next Three Fiscal Years: 2015, 2016, 2017

- Quarterly Clean-up days advertised to all Members, all in our association management system contact list, and on Facebook.
- Member Recruitments and Fundraisers
  - o One major event each year, with the current goal being "Escape to the Island" Family Fun Day
  - One major event "on land" each year
- Sell our Memorabilia and perhaps sell the trailer; possibly open an online store on Ebay or Etsy (yes we collect sales tax)
- Help refurbish and sell equipment no longer needed, and use the funds to purchase needed new equipment for the Park
- Continue our involvement with the Tarpon Springs Chamber of Commerce and other groups mentioned above.
- Investigate grant funding opportunities and apply. Suggest paying special attention to events that will generate membership, stewardship, and student involvement.
- Overall Goal: Community Engagement
- ☑ Copy of the CSO's Code of Ethics attached (Model provided; see CSO 2014 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

## **Code of Ethics**

## Friends of Anclote Key State Park & Lighthouse

#### CODE OF ETHICS

## **PREAMBLE**

- (1) It is essential to the proper conduct and operation of the Friends of Anclote Key State Park and Lighthouse (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 the Friends of Anclote Key State Park and Lighthouse 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.

## **Code of Ethics**

#### 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.

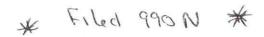
#### 8. Requirements to Abstain From Voting

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.

## **Code of Ethics**

#### 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.



## **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)

▶ Do not enter social security numbers on this form as it may be made public.

OMB No. 1545-1150

Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ Information about Form 990-EZ and its instructions is at www.irs.gov/form990.

A	ror me	2014 calendar year, or tax year beginning , 2014, and el	numg		, 20			
B	Check if ap	oplicable: C Name of organization	D Em	ployer id	entification number			
	Address c	trange Friend, Anchote Ken StatePork + Lighthouse	5	9 3.	5 0 3338			
	Name cha			phone n				
	Initial retu	m POBOX 2622	73	7 -	06PT: 66P			
	Final return/terminated  City or town, state or province, country, and ZIP or foreign postal code				F Group Exemption			
	Amended return			Number >				
-								
		ting Method: Cash Cash Other (specify)	_ H Check		f the organization is not			
	Website: ► \( \infty \omega				ach Schedule B			
		990, 99	0-EZ, or 990-PF).					
		organization: ☑ Corporation ☐ Trust ☐ Association ☐ Other						
		s 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or		S	₹ <u>.</u>			
(Pa	rt II, coli	umn (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ		<b>\$</b>				
P	art I	Revenue, Expenses, and Changes in Net Assets or Fund Balances (s	ee the instru	uctions	for Part I)			
-		Check if the organization used Schedule O to respond to any question in this						
	1	Contributions, gifts, grants, and similar amounts received		1	11649			
	2	Program service revenue including government fees and contracts		2				
	3	Membership dues and assessments		3	795			
	4	Investment income		4				
	5a	Gross amount from sale of assets other than inventory 5a						
				- 120				
	b		.\		-			
	C	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a	1)	5c				
	6	Gaming and fundraising events						
<i>a</i>	а	Gross income from gaming (attach Schedule G if greater than						
Revenue		\$15,000)		1000	*,			
Ve	b		ributions					
Re		from fundraising events reported on line 1) (attach Schedule G if the		ripsie.				
	1	sum of such gross income and contributions exceeds \$15,000) 6b						
	C	Less: direct expenses from gaming and fundraising events 6c						
	d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b	and subtract	district to				
		line 6c)		6d				
	7a	Gross sales of inventory, less returns and allowances   7a   🖔	10		<del></del>			
	b		61					
	C	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	According to the second second	7c	140			
	8	Other revenue (describe in Schedule O)		8				
	9	<b>Total revenue.</b> Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8		9	FAROU			
	10				1343 8 7			
		Grants and similar amounts paid (list in Schedule O)		10				
	11	Benefits paid to or for members		11				
88	12	Salaries, other compensation, and employee benefits		12				
Expens	13	Professional fees and other payments to independent contractors		13	920			
	14	Occupancy, rent, utilities, and maintenance		14				
	15	Printing, publications, postage, and shipping		15	70			
	16	Other expenses (describe in Schedule O)		16	13441			
	17	Total expenses. Add lines 10 through 16	>	17	13781			
(A)	18	Excess or (deficit) for the year (Subtract line 17 from line 9)		18	-1197			
Net Assets	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (mus						
		end-of-year figure reported on prior year's return)	-	19				
at )	20	Other changes in net assets or fund balances (explain in Schedule O)		20				
S	21	Net assets or fund balances at end of year. Combine lines 18 through 20		21	- 1197			
Ear	-	work Reduction Act Notice, see the separate instructions.	CONTRACTOR OF THE OWNER.	21	Form <b>990-EZ</b> (2014)			
UL	LanalA	voir neutrouil Act Notice, see the separate instructions, Cat. No. 10	0421		runn <b>334" L.L.</b> (2014)			

Fa	rt II Balance Sheets (see the instructions f	or Part II)				
	Check if the organization used Schedule	O to respond to a	the state of the s			🗆
				(A) Beginning of year		B) End of year
22	Cash, savings, and investments					16568
23	Land and buildings				23	
24	Other assets (describe in Schedule O)				24	E
25	Total assets	* * * * * *			-	14 248
26		(5)	the state of the s		26 27	V
27 Par	Net assets or fund balances (line 27 of column  Statement of Program Service Accom			- A-A-A-A-A-A-A-A-A-A-A-A-A-A-A-A-A-A-A	21	14568
r all	Check if the organization used Schedule	7.		100		Expenses
Wha						ired for section
	t is the organization's primary exempt purpose? S					(3) and 501(c)(4) sizations; optional for
as m	cribe the organization's program service accomplisheasured by expenses. In a clear and concise m	snments for each o	r its three largest pr	the number of	others	
	ons benefited, and other relevant information for ea		Solvices provided	, the named of		
28						
	(Grants \$ ) If this amount	includes foreign gra	ants, check here .	▶□	28a	
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31	Other program services (describe in Schedule O)					
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Pai	Other Information (Note the Schedule A and personal benefit contract statement requirement	s in th	ne	age
	instructions for Part V) Check if the organization used Schedule O to respond to any question in this	Part	T	
33	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	Yes	No
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 a change to the organization's name. Otherwise, explain the	33		
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business	34		×
b	activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		<u> </u>
c	The tree grant and organization mod at orm ode the years in two, provide an explanation in defiedure of	35b		
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		×
37a	The state of the s		. 10.03	
38a	S	37b		×
b	, seriodate E, tartitatio the total amount involved			14
39	Section 501(c)(7) organizations. Enter:	11)73		Na. 47
a b	Initiation fees and capital contributions included on line 9			
40a	330			
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	40b		'\ '\
С	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			
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization			
е	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	40e		X
41	List the states with which a copy of this return is filed			
42a	The organization's books are in care of Carl Tucker  Located at \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		J-1	430
IJ	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)?	42b	Yes	No *X
	If "Yes," enter the name of the foreign country: ▶			MAI
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			Volta V
С	At any time during the calendar year, did the organization maintain an office outside the U.S.?	42c		×
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		. >	· 🗆
44a	completed instead of Form 990-EZ	44a	Yes	No ×
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be	44b		×
	Did the organization receive any payments for indoor tanning services during the year?  If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	44c	N THE REAL PROPERTY.	×
15a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		X
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-FZ (see instructions)	45b		(
		·VU	1 ,	1

	Did the organization engage, directly or to candidates for public office? If "Yes,"	indirectly, in political o complete Schedule C	campaign activities or	behalf of o	in opposit	tion	
Part	VI Section 501(c)(3) organization All section 501(c)(3) organization 50 and 51.	s only				170 C. W 2 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	
	Check if the organization used So	chedule O to respond	d to any question in t	his Part VI			
47	Did the organization engage in lobbying year? If "Yes," complete Schedule C, Pa					4000	Yes
48	Is the organization a school as described		ii)? If "Ves " complete		* * *		
49a	Did the organization make any transfers	to an exempt non-cha	ritable related organiz				
50	If "Yes," was the related organization as	ection 527 organization	on?		* * *	. 49Ł	
-	Complete this table for the organization's employees) who each received more tha	n \$100,000 of compe	nsation from the orga	ner than offic nization. If th	ers, airect iere is non	tors, trust e, enter "	ees and 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 contributions benefit plans, comper	benefits, to employee and deferred	(e) Estimat	
	NON 2						
						The second secon	
						ANGEL AND	
51	Total number of other employees paid ov Complete this table for the organization \$100,000 of compensation from the organization	's five highest compe anization. If there is no	ensated independent	contractors	who each	received	more t
2.53.0.500.1	(a) Name and business address of each independent contractor			1			
	tay rating and business address of each independ	dent contractor	(b) Type of serv	ice	(c)	Compensat	ion
	Mo NU E	dent contractor	(b) Type of serv	ice	(c)	Compensat	ion
		dent contractor	(b) Type of serv	ice	(c)	Compensat	ion
		dent contractor	(b) Type of serv	ice	(c)	Compensat	ion
		dent contractor	(b) Type of serv	ice	(c)	Compensat	ion
52	Total number of other independent contra	actors each receiving	over \$100,000 <b>I</b> ction 501(c)(3) organ	>	ust attach	a	180
52 nder pe	Total number of other independent contra Did the organization complete Schedu completed Schedule A	actors each receiving of the A? <b>Note</b> . All secondary including accompany	over \$100,000	nizations mu	ust attach	a ▶□ Yes	□ No
nder pe	Total number of other independent contral Did the organization complete Scheducompleted Schedule A	actors each receiving of the A? <b>Note</b> . All secondary including accompany	over \$100,000	nizations mu	ust attach	a ▶□ Yes	□ No
nder pe ue, corr	Total number of other independent contra Did the organization complete Schedu completed Schedule A	actors each receiving of the A? <b>Note</b> . All secondary including accompany	over \$100,000	nizations mu	ust attach	a ▶□ Yes	□ No
nder pe ue, corr ign ere	Total number of other independent contral Did the organization complete Scheducompleted Schedule A	actors each receiving of the A? <b>Note</b> . All secondary including accompany	over \$100,000	nizations mu	ust attach pest of my kno	a ▶□ Yes owledge and	□ No
nder pe lie, corr ign ere aid repa	Total number of other independent contra Did the organization complete Schedu completed Schedule A	ictors each receiving of the A? <b>Note.</b> All secondary including accompany officer) is based on all infor	over \$100,000 I ction 501(c)(3) organ  ing schedules and statement mation of which preparer h	nizations mu	ust attach	a ▶□ Yes owledge and	□ No
52 nder pe	Total number of other independent contra Did the organization complete Schedu completed Schedule A	ictors each receiving of the A? <b>Note.</b> All secondary including accompany officer) is based on all infor	over \$100,000 I ction 501(c)(3) organ  ing schedules and statement mation of which preparer h	nizations mu	JSt attach pest of my knoge.  Check □ self-employe s EIN ▶	a ▶□ Yes owledge and	□ No

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

## 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.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990 or 990-EZ.
► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

F-11 ands Huclo K Key St PK + hight how.	Employer identification number
	Section 2
Advertising	~12
auto Trailer - tires tog leneval	S 6 S
buck orders	3 25
Conference + Workshops	388
Equipment - mower attachment - Island	158
Bank + Service Charge Fees - Paylal	13
Chian's Expense	10040
Meals Entertainent	46
Salas Tax	13
Speaker Fees	141
Supplies - work gloves - cleanup on Island	3 6
Miss bus - will correct - website see	318
Oriental Freding Company	
	134101
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