

Florida Department of Environmental Protection

CITIZEN SUPPORT ORGANIZATION 2015 REPORT (pursuant to Florida Statute 20.058)

Citizen Support Organization (CSO) Name: <u>Friends of Colt Creek State Park, Inc.</u> Mailing Address: P.O. Box 2646, Lakeland, FL 33810 Telephone Number: 863-660-0682 Website Address: Friendsofcoltcreek.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:

Raise funds in order to sponsor park needs and improvements.

Conduct community outreach programs in order to educate the community about the Park.

Organize volunteer programs designed to benefit the Park.

Partner with the Park's staff on projects intended to benefit the Park

Brief Description of the CSO's Results Obtained:

•The CSO raised an additional \$15,000.

•Increased our total membership to 132.

•Sent out our first membership renewal and have already received 59 continuing members.

•Increased our presence in newspapers, social media (1850+ FB friends), and started an electronic quarterly newsletter and website.

- •Held 4 workdays to restore and maintain the park's butterfly garden.
- •Organized and held 6 events utilizing over 200 volunteers.
- •Assisted with 3 Park events providing volunteers and funding.

•Purchased three 2-way radios and a digital projector for the park at their request.

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

•Continue to partner with Park on assisting them with their events

*Organizing our own EVENTS INCLUDING OUR annual Get to Know Colt Creek State Park.

- •Raise a minimum of \$20,000 yearly.
- •Continue to raise membership to at least 200 members.
- •Assist with development and community awareness of the upcoming family campground.
- •Develop marketing plan to draw more visitation.

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

Friends of Colt Creek State Park, Inc. CODE OF ETHICS

PREAMBLE

- (1) It is essential to the proper conduct and operation of Friends of Colt Creek State Park, Inc. (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 Colt Creek State Park, Inc. 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, eward, 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.

		1		Short	Form					OMB No. 1545-1150
-	QQ)0-EZ	Return of	Organization Ex	cempt Fr	om Inco	me 1	ax		004 A
Form				27, or 4947(a)(1) of the inte	-				ione)	20 14
			muer section 50 (c), 52	., or 4347(a)(1) of the life	mai nevenue u	one (evcehr	private	iounuat		
			► Do not enter	social security numbers	on this form as	it may be ma	ade put	blic.		Open to Public
Depa	irtment o	of the Treasury nue Service	► Information a	bout Form 990-EZ and its	instructions is	at www.irs.	nov/for	m990.		Inspection
			year, or tax year begin			2014, and en				, 20
			C Name of organization	nnny	,	2014, anu th	ung	D Empl	over id	entification number
	Address c		·	Devile Lee						083225
_	Vame cha	-	riends of Colt Creek Stat	te Park, Inc box, if mail is not delivered to s	treet address)	I Room/	suite	E Telep		
	nitial retu	m	-							0-0682
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	/ebsite	•			imeu casn		- 1			ach Schedule B
			k ogly one) — 🗹 501(c)(3	3) □ 501(c) () ◀ (ins	ert no.) 🔲 4947(a)(1) or 5	- 1	•		D-EZ, or 990-PF).
				Trust Assoc			21	(1 01111 01		
				gross receipts. If gross rece			r if total	assets		
				ile Form 990 instead of For					▶ .	
-	art I			hanges in Net Asset				instruc	tions	for Part I)
			· •	Schedule O to respor		•				•
	1		The second s	imilar amounts received			<u>i uiti</u>	<u> </u>	1	1159.40
	2			g government fees and		• • • •	•••	•••	2	1100.40
	3	•	dues and assessme				•••	· · }	3	21095.00
	4	investment i					• •	•••	4	21033.00
	5a			other than inventory		5a	• •	•••		· · · · · · · · · · · · · · · · · · ·
	b			s expenses		5b				
	c			other than inventory (Su					5c	
	6		fundraising events			nom nno ouj	• •	•••		
	a	-	÷	ttach Schedule G if	preater than			· [
ue						6a				
Revenue	b	Gross incom	ne from fundraising ev	vents (not including 💲		of contri	bution	s		
Sev				on line 1) (attach Sche	dule G if the					
	ł			ontributions exceeds \$1		6b		366.17		
	c	Less: direct	expenses from gamir	ng and fundraising event	s	6c	2	2718.53		
	d			g and fundraising even		Sa and 6b a		The second se		
	ļ	line 6c) .							6d	-2352.36
	7a	Gross sales	of inventory, less retu	Irns and allowances .		7a		228.00		
	b					7b		830.96		
	C	Gross profit	or (loss) from sales of	f inventory (Subtract line	7b from line 7	7a)			7c	-602.96
	8	Other reven	ue (describe in Sched	ule 0)				[8	
	9	Total reven	ue. Add lines 1, 2, 3,	4, 5c, 6d, 7c, and 8 .		<u> </u>		. 🕨	9	19299.08
	10			(list in Schedule O) .					10	428.98
	11								11	
es	12		•	d employee benefits .					12	
Expenses	13			ents to independent co					13	700.00
Хре	14			iintenance					14	
Û	15			nd shipping					15	112.86
	16			edule 0)					16	1463.77
	17	Total exper	ises. Add lines 10 thr	ough 16	<u></u>	<u> </u>	<u>· ·</u>	. 🕨	17	2705.61
S	18	Excess or (d	leficit) for the year (Su	btract line 17 from line 9	3)			[.18	16593.47
Assets	19			peginning of year (from						
S	ł	end-of-year	figure reported on pr	ior year's return)					19	0

Net A Net assets or fund balances at end of year. Combine lines 18 through 20 21 For Paperwork Reduction Act Notice, see the separate instructions.

Other changes in net assets or fund balances (explain in Schedule O) .

20

Cat. No. 10642I

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16593.47 Form 990-EZ (2014)

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21

Form	990-EZ (2014)					Page 2
Pa	rt II Balance Sheets (see the instructions	for Part II)		,		
	Check if the organization used Schedule	• O to respond to a	ny question in this	Part II		🗆
			<u> </u>	(A) Beginning of year		(B) End of year
22	Cash, savings, and investments		[0	22	16593.47
23	Land and buildings		[0	23	0
24	Other assets (describe in Schedule O)		[0	24	0
25	Total assets		[0	25	16593.47
26	Total liabilities (describe in Schedule O)		[0	26	0
27	Net assets or fund balances (line 27 of column				27	16593.47
Par	t III Statement of Program Service Accom					
	Check if the organization used Schedule	e O to respond to a	ny question in this	Part III 🛛 . 🗹	(D.a.	Expenses
₩ha	t is the organization's primary exempt purpose?					quired for section (c)(3) and 501(c)(4)
as n	cribe the organization's program service accompli neasured by expenses. In a clear and concise n ons benefited, and other relevant information for e	nanner, describe the			-	anizations; optional for ers.)
28	National Public Lands Day - Buterfly Garden restoration	- 28 volunteers - CSO	provided plants, garde	n supplies,		
	food and beverage for volunteers		Lessansen, karassis Mannas,	/**		

	(Grants \$) If this amount	includes foreign gra	nts, check here	🕨 🔲	28 a	712.63
29	Get to Know Colt Creek State Park Event - Increase awa	areness of the park, inc	rease visitation - 200 v	isitors to the park t		
	day - 50 volunteers					
	(Grants \$) If this amount	includes foreign gra	nts, check here .	🕨 🔲	29 a	448.40
30	Purchase of Projector for Park Staff - to enable staff to n	nake presentations at th	ne park as well as cvic	organizations to		
	promote the park					
		includes foreign gra			30a	428.98
31	Other program services (describe in Schedule O)					1
	(Grants 8) If this amount	includes foreign gra	nts, check here .	🕨 🔲	31 a	l 1576.87
-	Total program service expenses (add lines 28a	and the second			32	
-	t IV List of Officers, Directors, Trustees, and Ke	y Employees (list each	n one even if not com	pensated—see the ir		
-		y Employees (list each O to respond to an	n one even if not com ny question in this	pensated—see the ir Part IV ...		
-	t IV List of Officers, Directors, Trustees, and Ke	y Employees (list each O to respond to an (b) Average hours per week devoted to position	n one even if not com	pensated—see the ir Part IV (d) Health benefits, contributions to employe	 ee (e)	ctions for Part IV)
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Form 99	0-EZ (2014)		Ρ	age 3
Part	V Other Information (Note the Schedule A and personal benefit contract statement requirements instructions for Part V) Check if the organization used Schedule O to respond to any question in this			
	instructions for Part V) check in the organization used Schedule O to respond to any question in this	Fall	v Yes	No
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	100	
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 change on Schedule O (see instructions)	34		/
35a	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)?	35a		/
b	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b		V
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 .	35c		/
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	Enter amount of political expenditures, direct or indirect, as described in the instructions			\checkmark
b	Did the organization file Form 1120-POL for this year?	37b		\square
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a		/
b	If "Yes," complete Schedule L, Part II and enter the total amount involved			
39	Section 501(c)(7) organizations. Enter:		, 1995 - 1997 - 1997 1998 - 1997 - 1997	
a	Initiation fees and capital contributions included on line 9			
b 40a	Gross receipts, included on line 9, for public use of club facilities			
40a	section 4911 ►; section 4912 ►; section 4955 ►			/
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	222		V
	that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		K
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			
đ	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization			
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	40e		/
41	List the states with which a copy of this return is filed ►	¢		
42a	The organization's books are in care of Julie Townsend Telephone no.	863-28	8-031	7
-	Located at \blacktriangleright 818 Jonson Ave Lakeland FL ZIP + 4 \blacktriangleright At any time during the calendar year, did the organization have an interest in or a signature or other authority over	338	· · · · · · · · · · · · · · · · · · ·	
b	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b	Yes	No
	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).			4
C	At any time during the calendar year, did the organization maintain an office outside the U.S.?	42c		\checkmark
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		. 1	
		1	Yes	No
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a		1
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	44b		/
c d	Did the organization receive any payments for indoor tanning services during the year?	44c 44d		5
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		1
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			$\overline{}$
	Form 990-EZ (see instructions)	45b		

Form 990-EZ (2014)

							Yes	No
16	Did the organization engage, directly or in to candidates for public office? If "Yes," of						103	V
'art '		s only s must answer que	stions 47–49b and	52, and co	omplete th	e tables f	or lin	es
							Yes	No
17	Did the organization engage in lobbying year? If "Yes," complete Schedule C, Par		section 501(h) electio			tax · 47		
18	Is the organization a school as described in	n section 170(b)(1)(A)(i	i)? If "Yes," complete :	Schedule E		. 48		/
19a	Did the organization make any transfers t						<u> </u>	V
b	If "Yes," was the related organization a se	ction 527 organizatio	on?			. 49b		
50	Complete this table for the organization's employees) who each received more than							
	(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	benefit plans,	benefits, to employee and deferred nsation	(e) Estimate other com		
	2020							
	none							
		,						
			<u> </u>	I				
т 51	Total number of other employees paid ov Complete this table for the organization \$100,000 of compensation from the orga	s five highest comp	ensated independent	contractor	s who each	received	more	tha
	(a) Name and business address of each independ	lent contractor	(b) Type of serv	ice	(c)	Compensati	on	
	none							
			1					

Under penalties of periury, 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.

Sign Here	Signature of officer Julie). Townsend . Tr	easu	0/25/15 Date XCC
	Type or print name and title			
Paid Preparer	Print/Type preparer's name	Preparer's signature	Date	Check if PTIN self-employed
Use Only	Firm's name 🕨			Firm's EIN 🕨
Use only	Firm's address 🕨			Phone no.
May the IRS	discuss this return with the preparer s	shown above? See instructions		🕨 🗆 Yes 🗔 No

SCH	EDULE A	Pu	hlic Charit	y Status and	Public	Supp	ort	OMB No. 1545-0047
(Form	n 990 or 990-EZ)		e if the organizat	ion is a section 501(c)()(1) nonexempt charita	(3) organiz		1	2014
Depart	ment of the Treasury I Revenue Service	••••••••••••••••••••••••••••••••••••••		ch to Form 990 or Form			····· ··· ··· ··· ··· ··· ··· ··· ···	Open to Public
		Information abou	t Schedule A (Forr	n 990 or 990-EZ) and its	instructio	ns is at wy		Inspection
	of the organization	of Colt C	rook Sta	L Park T	'n		Employer identification	on number
Par				organizations must	comple	te this n	art) See instructi	000
1				s: (For lines 1 through				0113.
1				on of churches descr				
2			•	(Attach Schedule E.)			~~~~	
3				anization described i	n sectior	170(b)(1	YAYiii)	
4	🔲 A medical re		n operated in co	onjunction with a hos)(iii). Enter the
5	🗌 An organizat	-	he benefit of a	college or university	owned o	r operate	d by a governmer	ital unit described in
6	🗌 A federal, sta	ite, or local govern	ment or govern	mental unit described	in section	on 170(b)	(1)(A)(v).	
7	🗋 An organizat	· ·	receives a subs	tantial part of its sup				m the general public
8				(1)(A)(vi). (Complete	•			
9	receipts from support from	n activities related n gross investme	I to its exempt nt income and	re than 33¹/₃% of its functions—subject to unrelated business 75. See section 509(a	o certain taxable i	exception ncome (l	ns, and (2) no moi ess section 511 t	re than 33¹/₃% of its
10	🗌 An organizat	ion organized and	operated exclusion	sively to test for publi	c safety.	See sect i	on 509(a)(4).	
11	one or more	publicly supported	organizations d	vely for the benefit of, escribed in section 5	09(a)(1) 0	r section	509(a)(2). See sec	tion 509(a)(3). Check
	the box in lin	es 11a through 11d	that describes	the type of supporting	organiza	tion and c	omplete lines 11e,	11f, and 11g.
a	the suppor) the power to re	supervised, or control gularly appoint or ele ections A and B .				
b	control or i	nanagement of th	e supporting org	d or controlled in con anization vested in th , Sections A and C .				
c	🔲 Type III fu	nctionally integra	ted. A supportir	g organization opera). You must comple				lly integrated with,
d	Type III no that is not	n-functionally inf functionally integra	egrated. A suppated. A suppated. The organi	porting organization o zation generally must	perated i satisfy a	n connec distributi	tion with its suppo on requirement and	
				mplete Part IV, Secti				11 Too 111
e				written determination onally integrated supp				n, type m
f	Enter the num	ber of supported o	organizations .					
g				orted organization(s).	T			
	(i) Name of support	ed organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section	listed in you	rganization Ir governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
				(see instructions))	Yes	No		
(A)								
(B)								
(C)								
(D)								
(E)								
Tota	it							

Schedu	le A (Form 990 or 990-EZ) 2014						Page 2
Part	II Support Schedule for Organiza (Complete only if you checked th Part III. If the organization fails to	he box on line	e 5, 7, or 8 of	Part I or if th	e organizatio	n failed to qua	
Secti	on A. Public Support			, <u>_</u> , <u>_</u>			
	dar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")					1159.40	
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f).						
6	Public support. Subtract line 5 from line 4.						
	on B. Total Support						
	dar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7 8	Amounts from line 4						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 12 13	Total support. Add lines 7 through 10 Gross receipts from related activities, etc First five years. If the Form 990 is for th organization, check this box and stop he	he organization	n's first, secon	d, third, fourth	, or fifth tax y		
Secti	on C. Computation of Public Suppor			• • • • •			•• □
<u>3ecu</u> 14	Public support percentage for 2014 (line (1. column (fi)		14	100 %
15	Public support percentage from 2013 Scl		-			15	100 %
16a	331/3% support test-2014. If the organi	zation did not	check the box	on line 13, and	d line 14 is 331	/3% or more, ch	eck this
	box and stop here. The organization qua	•	· · ·	•			المرسيا
b	33 ¹ /3% support test—2013. If the organ check this box and stop here. The organ					15 is 33 ¹ /3% (
17a	10%-facts-and-circumstances test—2 10% or more, and if the organization me Part VI how the organization meets the "f organization	ets the "facts- facts-and-circu	and-circumsta umstances" tes	nces" test, ch t. The organiz	eck this box ar ation qualifies	nd stop here. E as a publicly su	xplain in pported
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organization more th	013. If the orga tion meets the neets the "fact	anization did n e "facts-and-ci s-and-circums	ot check a bo> rcumstances" tances" test. T	k on line 13, 16 test, check th he organizatio	5a, 16b, or 17a, his box and sto n qualifies as a	and line p here . publicly
18	supported organization	id not check a	box on line 13	, 16a, 16b, 17a	i, or 17b, chec	k this box and s	see

Part							
	(Complete only if you checked th						der Part II.
	If the organization fails to qualify	under the te	sts listed bel	ow, please co	omplete Part	<u>II.)</u>	
	on A. Public Support						
-	dar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and membership fees					22254.40	
2	received. (Do not include any "unusual grants.") Gross receipts from admissions, merchandise					Lew Titu	
-	sold or services performed, or facilities	:					
	furnished in any activity that is related to the					594.17	
•	organization's tax-exempt purpose					576.11	
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
				<u> </u>			
4	Tax revenues levied for the						
	organization's benefit and either paid to or expended on its behalf				ł	ł	
-							
5	The value of services or facilities furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5.					22848.57	
0 7a					·	22840-01	
74	received from disqualified persons .						
b	Amounts included on lines 2 and 3					1	
U	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year				ł		
С	Add lines 7a and 7b					1	
8	Public support (Subtract line 7c from						
	line 6.)						
Secti	on B. Total Support						.
	idar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9	Amounts from line 6					22848.57	
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties and income from similar sources .						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
C	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether						
	or not the business is regularly carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets (Explain in Part VI.)				ł		
13	Total support. (Add lines 9, 10c, 11,						
13	and 12.)					22848.59	
14	First five years. If the Form 990 is for th	le organization	l l'e firet eacon	d third fourth	l or fifth tay y		
17	organization, check this box and stop he	-			-		
Sect	ion C. Computation of Public Suppor						
15	Public support percentage for 2014 (line &			3. column (f))		15	100 %
16	Public support percentage from 2013 Sch		-				100 %
	ion D. Computation of Investment Inc						
17	Investment income percentage for 2014 (y line 13, colu	mn(f))	17	%
18	Investment income percentage from 2013	Schedule A,	Part III, line 17			18	%
19a	331/3% support tests-2014. If the organ						
	17 is not more than 331/3%, check this box	-	-			-	
b	331/3% support tests—2013. If the organiz						
	line 18 is not more than 331/3%, check this l	-	-				
20	Private foundation. If the organization di	d not check a	box on line 14	, 19a, or 19b,	check this box	and see instru	ctions

Part IV

Supporting Organizations (Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A. D. and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain,
- 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 Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- b Did the organization confirm that each supported organization gualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2) (B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c 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 Part VI 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.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, 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).
- **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?
- Substitutions only. Was the substitution the result of an event beyond the organization's control? C
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes." complete Part I of Schedule L (Form 990).
- Did the organization make a loan to a disgualified person (as defined in section 4958) not described in line 7? 8 If "Yes," complete Part I of Schedule L (Form 990).
- Was the organization controlled directly or indirectly at any time during the tax year by one or more 9a disgualified 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 Part VI.
- Did one or more disgualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which ħ the supporting organization had an interest? If "Yes," provide detail in Part VI.
- Did a disqualified person (as defined in line 9(a)) 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 Part VI.
- 10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below.
 - **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.)

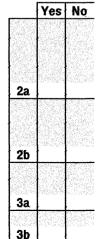
Νo Yes 1 2 3a 3b 3c 4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9c 10a 10b

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		1.12112-1212
b	A family member of a person described in (a) above?	11b		
C	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
	ion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supported organization(s) that operated, supervised, or controlled the support.</i>	2		
Sect	ion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Sect	ion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how</i> <i>the organization maintained a close and continuous working relationship with the supported organization(s)</i> .	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's			

significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? *If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.*

Section E. Type III Functionally-Integrated Supporting Organizations

- 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):
- a \Box The organization satisfied the Activities Test. Complete line 2 below.
- **b** The organization is the parent of each of its supported organizations. *Complete line 3 below.*
- c 🔲 The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).
- 2 Activities Test. Answer (a) and (b) below.
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in **Part VI identify** those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- 3 Parent of Supported Organizations. Answer (a) and (b) below.
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *Provide details in Part VI.*
- **b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in **Part VI** the role played by the organization in this regard.



3

Page 5

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970. See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Section B - Minimum Asset Amount	ŗ	(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other			
factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		<u>.</u>
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		-
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions)	6		
7 Check here if the current year is the organization's first as a non-functional			

instructions).

Schedule A (Form 990 or 990-EZ) 2014

ecti	V Type III Non-Functionally Integrated 509(a)(ion D - Distributions	-,	(Current Year
1	Amounts paid to supported organizations to accomplish	exempt nurnoses		
2			rted	
-	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt pur	poses of supported orga	nizations	
4		<u> </u>		
5	Qualified set-aside amounts (prior IRS approval required)		
6				
7	Total annual distributions. Add lines 1 through 6.	······································		
8	Distributions to attentive supported organizations to whi	ch the organization is res	nonsive	
•	(provide details in Part VI). See instructions.	on the organization is rea	,p choire	
9	Distributable amount for 2014 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount		gan barran an a	
	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1	Distributable amount for 2014 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2014			
	(reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2014:			
a				
b				
ĉ				
d				
e	From 2013			
f	Total of lines 3a through e			
ġ	Applied to underdistributions of prior years			
h	Applied to 2014 distributable amount			
1	Carryover from 2009 not applied (see instructions)			
i	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
) A	Distributions for 2014 from Section			
4	D. line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2014 distributable amount			
C	Remainder. Subtract lines 4a and 4b from 4.			
5				
•	any. Subtract lines 3g and 4a from line 2 (if amount			
	greater than zero, see instructions).			
6	Remaining underdistributions for 2014. Subtract lines 3h			
•	and 4b from line 1 (if amount greater than zero, see			
	instructions).			
7	Excess distributions carryover to 2015. Add lines 3j and 4c.			
8	Breakdown of line 7:			
a				
b				
C				
d	Excess from 2013			
u	Excess from 2014			

Part VI	Form 990 or 990-EZ) 2014 Supplemental Information, Provide the explanations required by Part II, line 10: Part II, line 17a or 17b; and
	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions.)

SCHEDULE O (Form 990 or 990-EZ) Department of the Treasury Internal Revenue Service	Supplemental Information to Form 990 or 990 Complete to provide information for responses to specific question Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or 990-EZ. Information about Schedule O (Form 990 or 990-EZ) and its instructions is at ww	ns on 2014 Open to Public
Name of the organization	sof Colt Creek State Park, Inc	Employer identification number 416 - 508.3225
Other E	Expenses (line 1b)	
Organizo	ition incorporation costs 8	399.50
checks	1	24.43
Flowers	for Fineral of Board Member	90.95
	- of Revenue Salestax payment	5.88
	: hosting	109.45
Samis	Club Membership	45.00
Sauar	e. com transaction fees	4.24
Board	Meeting food	184.32
	<u> </u>	1463.77

Other	Program Services (line 31)	
Friends	s of Colt Creek State Park Eve	int
Exper	ses: Literacy Day	200.07
	ke Rodeo	119.25
	isar Weed Event	111.92
Su	pport for Park Events	1145.63
*****	• •	157687
		1010101
		-

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Cat. No. 51056K Schedule O (Form 990 or 990-EZ) (2014)