

Florida Department of Environmental Protection CITIZEN SUPPORT ORGANIZATION 2025 LEGISLATIVE REPORT

(pursuant to Section 20.058 Florida Statutes)

Citizen Support Organization (CSO) Name: Florida State Parks Foundation, Inc.

Mailing Address: 1700 North Monroe Street, Suite 11 #200, Tallahassee, Florida 32303

Telephone Number: 813-586-0681

Website Address (*required if applicable*): www.floridastateparksfoundation.org ☑ Check to confirm your Code of Ethics is posted conspicuously on your website.

Statutory Authority:

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

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

YOUR MISSION AND LAST CALENDAR YEAR'S PROGRAM ACCOMPLISHMENTS:

CSO's Mission: Consistent with your Articles and Bylaws

Mission: Florida State Parks Foundation preserves, protects, sustains and grows Florida State Parks. The Florida State Parks Foundation supports the entire Florida State Park system through programs that:

- Preserve and protect state parks.
- Educate visitors about the value of state parks.
- Encourage community engagement and active use of state parks.
- Provide financial support to supplement state funding.

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

This summary covers the Foundation's fiscal year Jan 1 - Dec 31, 2024

Advocacy:

The Florida State Parks Foundation began the year by teaming up with partners Live Wildly to host the first ever Florida State Parks Legislative Reception at the Historic Capitol in Tallahassee.

Attendees enjoyed a wide variety of educational and interactive experiences that showcased the unique natural, cultural and historical resources found in Florida's state parks. These included a first-of-its-kind art capsule collection featuring original works inspired by Florida's state parks.

Florida artists Deborah Mitchell and AMLgMATD unveiled new designs capturing scenes from Paynes Prairie Preserve, Myakka River, Wekiwa Springs and Jonathan Dickinson state parks, among others.

The evening also highlighted the close connection that state parks share with the Florida Wildlife Corridor, a statewide network of nearly 18 million acres of connected conservation land and waters crucial to Florida's native wildlife.

Guest speakers included Senator Ana Maria Rodriguez, Representative Jennifer Canady and Representative Sam Garrison, as well as Florida Department of Environmental Protection Secretary Shawn Hamilton and Florida State Parks Director Chuck Hatcher.

Each of Florida's four National Gold Medals for Excellence in Parks and Recreation Management, won between 1999 and 2019, were on display throughout the evening.

Prior to the reception, Sen. Rodriguez filed Senate Resolution 1808 declaring Jan. 31, 2024, as Florida State Parks Day at the Florida Capitol and presented that resolution at the reception.

The following day, Foundation Board Members and staff met with more than 20 legislators or their staff to advocate for the Governor's Recommended Parks Improvement Budget.

In 2024, the Foundation also continued to conduct its hallmark legislative state parks tours. In July, Foundation staff joined the Florida Park Service to host Representative Kelly Skidmore for a tour of John D. MacArthur Beach State Park. Then, in August, the Foundation worked in coordination with the Florida Park Service to lead Representative Vicki Lopez on a tour of Bill Baggs Cape Florida State Park.

Fundraising:

In January, the Fort Mose Historical Society, Florida State Parks and the Foundation hosted a groundbreaking ceremony for the reconstruction of the 1738 historic Fort Mose. The project was a fundraising focus of the Foundation for the several years, as we spearheaded fundraising efforts through the generosity of several community partners and organizations. Major contributors included St. Johns County, The Jacksonville Jaguars Foundation, The St. Augustine Amphitheatre's Fort Mose Jazz & Blues Series, The Delores Barr Weaver Legacy Fund, The Lastinger Family Foundation, Florida Power and Light, The Bailey Group, Wells Fargo, Northrop Grumman, Florida Blue, and The Community Foundation for Northeast Florida.

In August, with sea turtle nesting season in full swing, the Foundation announced the latest element in a longstanding partnership with the Sea Turtle Conservancy's Sea Turtle Grants Program.

Through this partnership, Cayo Costa State Park and Fort Pierce Inlet State Park each received a new utility task vehicle (UTV) to assist with sea turtle care and management. A grant of \$31,370.85 from the Sea Turtle Grants Program secured the purchase of both UTVs.

In September, the Foundation was featured at The St. Augustine Amphitheatre's Sing Out Loud music festival, which attracted more than 30,000 attendees, elevating the profile of the Foundation and marketing the specialty license plate.

The Foundation announced in October that Jacksonville philanthropist Delores Barr Weaver announced a \$500,000 commitment to the Foundation to enhance accessibility in Florida State Parks. The grant will be distributed in increments of \$100,000 over five years.

In December, the Foundation joined Florida State Parks and the Friends of Topsail Hill to break ground on a new Visitor & Nature Center. The center will serve as a gateway to the park's pristine beachfront along the Gulf and will have event space for approximately 100 people.

Additionally, the "Explore Our State Parks" specialty license plate continued to soar in popularity.

As of December 2024, more than 17,000 vehicles in Florida had received the plate – good for 39th out of 150 specialty license plates in the state. In three years of availability, the plate has helped to fund the purchase of more than 150 water bottle refilling stations, more than 700 energy-efficient lighting fixtures, 25 e-bikes for use by park rangers across the state, and the "Great Blue Heron" hybrid-electric river tour boat at Edward Ball Wakulla Springs State Park.

The Foundation's Plant a Pine program continued to be successful and had raised more than \$40,000 by the end of 2024.

Communications:

Robust and comprehensive communications elevated the Florida State Parks Foundation's profile to new heights in 2024. Thanks to aggressive earned media campaigns that resulted in statewide, regional and national coverage of projects and initiatives, the Foundation solidified its status as a major player in the conservation and outdoor recreation space.

Media highlights include an extensive article about the Fort Mose reconstruction project in the Washington Post, as well as articles and clips related to Foundation projects or initiatives in outlets from Tampa, Orlando, Jacksonville, Tallahassee, Naples, Panama City, Bradenton and more.

As a result, Foundation board members and staff were regularly featured and quoted as subject-matter experts in news coverage related to parks projects, accessibility initiatives, and other topics related to conservation and outdoor recreation. The Foundation in 2024 continued its successful campaign to highlight accessibility in state parks with a guest editorial, written by CEO Julia Gill Woodward, that featured in newspapers across the state. The editorial emphasized the importance of accessibility in Florida's state parks and highlighted the Foundation's work in the field.

After successfully launching a staff-managed email marketing program in 2023, the Foundation continued to expand and evolve its digital marketing efforts in 2024. Weekly emails to a subscriber list of nearly 200,000 supporters promoting parks-themed merchandise sales or unrestricted donations. Email marketing also served as a significant driver for "Explore Our State Parks" specialty license plates, with nearly 1,500 new sign-ups from email subscribers.

Each month, the Foundation distributed a monthly "Friends 2 Friends" newsletter to citizen support organizations across the state. The newsletter features a short message from the Foundation CEO, as well as Foundation news and CSO "brags" that shine a spotlight on CSO achievements.

Support:

In May, the Foundation awarded a total of \$100,000 through its small grants program to 10 state parks citizen support organizations to advocate for or support their parks.

2024's winners included Friends of Camp Helen State Park, Friends of Pensacola State Parks, Friends of Fort Clinch, Stephen Foster Citizen Support Organization, Friends of DeLeon Springs State Park, Friends of Gamble Rogers State Park, Friends of Delnor-Wiggins Pass State Park, Friends of Koreshan State Park, Inc., Friends of MacArthur Beach State Park, Inc., and Friends of Oleta River State Park.

Since it began in 2021, the Foundation's CSO small grants program has distributed nearly \$225,000 to 36 CSOs or state parks without a CSO. The program previously awarded grant amounts of up to \$5,000 but expanded amounts to \$10,000 in 2024.

The Foundation also provided funding for professional development for 95 park staff. Staff attended conferences and trainings with the National Association for Interpretation (NAI) and National Recreation & Park Association (NRPA), several completed their NRPA Certified Park and Recreation Professional (CPRP) certifications, and one completed their American Planning Association (APA) certification. The CPRP certification is the national standard for all parks and recreation professionals who want to be at the forefront of their profession.

In response to a historic 2024 Atlantic hurricane season and in anticipation of potential future storms, the Foundation and Florida Power & Light Company announced in November a joint initiative to provide three new trailers and equipment that will allow Florida State Parks strike and recovery teams to efficiently mobilize and respond to severe weather events.

The new trailers were funded with two grants totaling \$215,000, including \$140,000 from FPL's charitable arm, the NextEra Energy Foundation, and \$75,000 from the Florida State Parks Foundation's Disaster Relief Fund.

Programs:

The Foundation achieved great fundraising success for projects across the state, with primary areas of focus including accessibility and environmental sustainability.

In April, in recognition of its commitment to providing and enhancing accessible experiences in Florida's award-winning state parks, the Florida State Parks Foundation received the SportsAbility Alliance's Active Leisure for Life Award.

In October, the Foundation and the St. Joe Community Foundation announced a partnership to enhance accessible experiences for visitors at St. Andrews State Park, Topsail Hill Preserve State Park and Grayton Beach State Park in the Florida Panhandle.

A grant of \$62,250 provided two Eco Rover chairs and accompanying travel trailers, two floating beach chairs for use on land or in water, and two standard beach chairs with related accessories.

In July, the Foundation partnered with REI Co-op's Winter Park store and Cannondale Bikes to provide 25 Cannondale e-bikes for use by park rangers across the state. The bikes were purchased with funds generated by the "Explore Our State Parks" specialty license plate.

At the end of the year, the Foundation and Florida Power & Light Company (FPL) announced a partnership allowing for the purchase of accessible electric trams for use at Big Lagoon State Park in Pensacola and Oleta River State Park in North Miami Beach.

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

- 1. **Advocacy Goal:** Advocate for the Florida Park Service at the legislative level.
 - a. Promote Florida State Parks specialty license plate for the benefit of our award-winning state parks.
 - b. Promote the economic impact of Florida State Parks, individually and collectively.
- 2. **Fundraising Goal:** Seek funds, funders, and partnerships to financially support Florida State Parks.
 - a. Identify statewide small-scale to large capital projects and resource management projects and focus fundraising on those needs.
 - b. Engage Board Members for strategic development of potential funders.
 - c. Develop focused effort of planned giving strategy to support endowment and other projects.
- 3. **Communications Goal:** Use effective and innovative communication tools to increase awareness of Florida State Parks and the Foundation.
 - a. Improve and expand communication to all stakeholders.
 - b. Develop and annually review crisis communication plan.
 - c. Expand marketing efforts.
- 4. **Support Goal:** Provide support to the Florida Park Service and local Friends groups with education, communication, funding, and other services.
 - a. Assist in funding Florida Park Service professional development needs.
 - b. Assist Friends groups with technical functions, communications and networking.
 - c. Assist Friends groups with increasing their capacity to support their local state parks.
- 5. **Program Goal:** Provide programs that enhance park experiences and increase educational opportunities.
 - d. Provide support and funding for accessibility projects and park improvements.
 - e. Increase educational opportunities.
 - f. Increase Greener Initiative programs.

CSO's LAST CALENDAR YEAR STATISTICS:

Total Number of CSO General Membership: 80

Total Number of Board of Directors: 20

Total Volunteer Hours for the Board of Directors (Hours from Volunteers. Work with your parks' volunteer

manager): 1,373

PARK & CSO RELATIONSHIP:

Keep the summary simple. Save time. Don't duplicate by describing accomplishments and contributions in the summary. Brag in the above Results Obtained. Describe the relationship here.

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

Thank you to the Foundation staff and board for a year of incredible successes promoting and supporting Florida State Parks. The staff relationship and mine as FPS Director and contract manager of the Foundation are solid.

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

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

As our relationship with the Florida Park Service has strengthened over the past year, we reaffirm the vision statement that was crafted by leadership of the Foundation and the Department of Environmental Protection in 2019. Together, the following vision statement was created: *The relationship between the Florida Park Service and the Florida State Parks Foundation is an enduring collaborative and complementary partnership with the shared vision to preserve, protect, and sustain Florida State Parks, therefore providing value-added benefits to the State of Florida in its entirety.*

The Foundation has continued to grow substantially this past year and looks forward to continuing an effective and impactful partnership with the Florida Park Service for many years ahead.

SUMMARIZE FINANCIAL ACTIVITY FOR LAST CALENDAR YEAR, SPECIFIC PARK(S) SUPPORT:

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

Building improvement, construction or renovations \$235,656.32 Cultural resources (e.g., historic structure restoration/ renovation) \$0 Natural resources (e.g., native plants, natural lands restoration) \$16,351.50 Maintenance equipment (e.g., mowers, chippers, blowers, chainsaws) \$1,775.74 \$5,000.00 Other facilities and landscape maintenance Vehicles (e.g., trucks/cars, UTVs, golf carts, accessible devices, etc.) \$24,809.99 Amenities (e.g., water fountains, benches, picnic tables, recreational equipment, kiosks \$7,561.43 Park employees or volunteers support (e.g., interns, training, uniforms, awards, or \$37,324.22 Big ticket visitor center exhibits or interpretation updates \$6,467.06 Park exhibits, displays, signage \$1,359.00 Park publications, brochures, maps, etc. \$0 Programing/interpretation support material purchases \$2,016.17 Other program services \$99,587.04 Total Program Service Expenses \$1,433,902.22

Total Operating Expenses (Overhead including fees, memberships, postage, rent, utilities \$819,489.19

Visitor Services Revenue

Park gift shops, craft stores and concession sales \$0

Merchandise sales (e.g., plants, firewood, ice, t-shirts, hats, etc.) \$0

Programs and Special Events (e.g., fundraising workshops, seasonal events, concerts, \$0

Vending (e.g., drink machines, penny press, laundry, Wifi, etc.) \$0

Rentals (e.g., bikes, canoe, kayak, SUPs, etc.) \$0

In-park donation boxes \$0
Other visitor services revenue \$0
Total Visitor Services \$0

Net Assets \$22,675,665.61

CSO AUDIT:

Total of Last Calendar Year's Expenses (including grants) \$2,285,255.91

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

This information is complete to the best of my knowledge pursuant to Section 20.058 Florida Statutes										
Title	Name	Signature	Date							
CSO President	Kathleen Brennan		5/30/2025							
Contract Manager	Juck Hatch		6/4/2025							

 [□] CSO's Code of Ethics is attached

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

Code of Ethics for

Florida State Parks Foundation's Board of Directors

Statement of Commitment

"In establishing policy for and on behalf of Florida State Parks Foundation's members, I am a custodian in trust of the assets of their society/association. The members recognize the need for competent and committed elected board members to serve their organization and have put their trust in my sincerity and abilities. In return, the members deserve my utmost effort, dedication, and support."

"Therefore, as a board member/director of Florida State Parks Foundation, I acknowledge and commit that I will observe a high standard of ethics and conduct as I devote my best efforts, skills and resources in the interest of Florida State Parks Foundation and its members. I will perform my duties as board member/director in such a manner that members' confidence and trust in the integrity, objectivity and impartiality of Florida State Parks Foundation are conserved and enhanced. To do otherwise would be a breach of the trust which the membership has bestowed upon me."

Ethical Guidelines

General

- 1. I will always hold the betterment of the membership of the organization as my priority, including during all participation in discussions and voting matters.
- 2. I recognize that I am obligated to act in a manner which will bear the closest public scrutiny.
- 3. It is my responsibility to contribute to the board of directors any suggestions of ways to improve the organization's policies, standards, practices or ethics.
- 4. I will not abuse my position as a board member by suggesting to any organization employee that I am entitled to or expect any special treatment beyond regular members of the organization.
- I will declare any conflict of interest, be it real, potential, or apparent, which is not immediately obvious with regard to any matter being discussed in my presence during a meeting.
- 6. If the board decides at any time during a meeting that I have a conflict, I will accept their request that I refrain from participating in the discussion and I will leave the meeting at the board's request. I understand that the board's decision will be recorded in the minutes, either with or without the reasons for the decision being also recorded

- 7. I understand that the following activities are considered by the organization to be conflicts of interest, and that conflicts of interest are not limited to the following situations:
 - where a director makes a decision or does an act motivated by other or additional considerations than "the best interests of the organization"
 - where a director personally contracts with the organization or where he/she is a director of other organizations which are contracting with this organization
 - where a director learns of an opportunity for profit which may be valuable to him/her personally or to another organization of which he/she is a member, or to other persons known to the director
 - where a director, in any circumstance as related to the organization, puts his/her personal interests ahead of the best interests of the organization

Information

- 8. I will not knowingly take advantage of or benefit from information that is obtained in the course of my official duties and responsibilities as a board member, and that is not generally available to membership
- 9. I will be alert to information which the organization can use to develop improved policies and strategies
- 10. I will protect the organizations information closely and will not release or share confidential information without the permission, preferably in writing, of the person who provided it
- 11. I will maintain confidentiality of all information which the board deems ought to be kept confidential

Resources

12. I will be mindful of resources which are in my trust on behalf of the organization, and will help establish policies which ensure the maximization of secure and protected resources

Gifts and Hospitality

- 13. Should business associates or others offer me gifts, favors, or benefits on a personal basis because of the business the organization does with them, I will recognize that such offers may be an effort to secure advantage from me, and I will reject such offers on the basis that it is against the organization's policy to accept gifts from business contacts. The most I will accept will be normal promotional handouts of a nominal value.
- 14. I will not routinely accept the hospitality of others. For example, when meals are taken with business colleagues, I will pay for as many meals as do my colleagues.

Representing the Organization

15. As part of my duties as a board member, I represent the organization informally and formally to other associations, societies, government officials, and business representatives. I recognize that it is important that I represent the organization in such a way as to leave others with a positive impression of the organization. In my duties I will preserve and enhance the good reputation of the organization and will avoid behavior which might damage its image.

Interpretation

16. The president of the organization shall ensure that the practice of this policy will be fair, just, and equitable in all situations of interpretation and application.

Enforcement

- 17. The president is ultimately responsible for immediate interpretation, application and enforcement of the board members' code of ethics policy. All complaints concerning a possible code of ethics violation shall be made in writing to or by the president with a copy provided to the complainant.
- 18. The president shall make an initial determination of the issue and shall attempt initial resolution of the problem with the complainer and the complainant.
- 19. If this initial attempt at resolution is not successful, the president shall appoint a tribunal composed of three board members to investigate the complaint. The tribunal is required to investigate as required and submit a written report to the president within 30 days. The president will render his/her decision within ten days of receiving the tribunal's report.
- 20. The president's decision may be appealed in writing to the board of directors for consideration the board's next regular meeting at the organization's next regular scheduled meeting for a final decision. The final decision shall be delivered in writing to the complainer and complainant.

Delegation and Penalties

- 21. Should the president be the subject of a written complaint, the vice president shall perform the duties normally assigned to the president in this matter.
- 22. Penalties imposed for breach of the code of ethics may include, but are not limited to, the following:
 - Excluding the director from portions of all future meetings and discussions which relate to the stated conflict of interest, and/or
 - censure of the director, in private, in public, or both, and/or

removal of the director from office by a resolution passed by a vote of two-thirds of
the members voting at an annual or special general meeting of the not-for-profit
organization's members, provided that notice of such a proposed resolution is given
with the notice calling the meeting.

e read and I accept Florida State Parks Foundation's Code of Ethics for Board Members

I have read and I accept Florida State Parks F	Foundation's Code of Ethics for Board Members
 Date	
Signature of Director or Nominee	-

Form **8868**

(Rev. January 2025)

Application for Extension of Time To File an Exempt Organization Return or Excise Taxes Related to Employee Benefit Plans

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service File a separate application for each return.

Go to www.irs.gov/Form8868 for the latest information.

Electronic filing (e-file). You can electronically file Form 8868 to request up to a 6-month extension of time to file any of the forms listed below except for Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts. An extension request for Form 8870 must be sent to the IRS in a paper format (see instructions). For more details on the electronic filing of Form 8868, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits. Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Part I - Identification Name of exempt organization, employer, or other filer, see instructions. Taxpayer identification number (TIN) Type or **Print** 59-3207818 FLORIDA STATE PARKS FOUNDATION, INC. File by the Number, street, and room or suite no. If a P.O. box, see instructions. due date for 1700 N. MONROE STREET 11, #200 filing your instructions City, town or post office, state, and ZIP code. For a foreign address, see instructions. TALLAHASSEE, FL 32303 Enter the Return Code for the return that this application is for (file a separate application for each return) 01 Return | Application Is For Application Is For Return Code Code Form 990 or Form 990-EZ 01 Form 4720 (other than individual) 09 Form 4720 (individual) 03 Form 5227 10 Form 990-PF 04 Form 6069 11 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 8870 12 Form 990-T (trust other than above) 06 Form 5330 (individual) 13 07 Form 5330 (other than individual) 14 Form 990-T (corporation) Form 1041-A 80 Form 990-T (governmental entities) 15 After you enter your Return Code, complete either Part II or Part III. Part III, including signature, is applicable only for an extension of time to file Form 5330. • If this application is for an extension of time to file Form 5330, you must enter the following information. Plan Name Plan Number Plan Year Ending (MM/DD/YYYY) Part II - Automatic Extension of Time To File for Exempt Organizations (see instructions) The books are in the care of JULIA WOODWARD - 1700 N. MONROE STREET SUITE 11 #200 -TALLAHASSEE, FL 32303 Telephone No. 813-586-0681 Fax No. _ If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four-digit Group Exemption Number (GEN)
. If this is for the whole group, check this . If it is for part of the group, check this box ... and attach a list with the names and TINs of all members the extension is for. I request an automatic 6-month extension of time until NOVEMBER 15 , 20 25 , to file the exempt organization return for the organization named above. The extension is for the organization's return for: X calendar year 20 24 or tax year beginning _____ , 20 ____ , and ending ___ If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return 2 Change in accounting period 3a If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. За If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. Зс

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. 1545-0047

Department of the Treasury Internal Revenue Service

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

A	or the	e 2023 calendar year, or tax year beginning	and ending								
В	Check if applicabl	C Name of organization		D Employer identifi	cation number						
	Addre	FLORIDA STATE PARKS FOUNDATION, INC.	•								
	Name chang	Doing business as		59-32078	18						
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/sui	te E Telephone numbe	r						
	Final return	1700 N. MONROE STREET 11	#200	813-586-	0681						
	termin ated	City or town, state or province, country, and ZIP or foreign postal code									
	Amen return	TADDAHASSEE, FD 32303	H(a) Is this a group re	eturn							
	Application	F Name and address of principal officer: JULIA WOODWARD		for subordinates	? Yes X No						
	pendir	SAME AS C ABOVE		H(b) Are all subordinates in	ncluded? Yes No						
<u>1</u>	Гах-ех		a)(1) or 5	27 If "No," attach a	list. See instructions						
	Nebsi			H(c) Group exemption	n number						
		organization: X Corporation Trust Association Other	L Ye	ar of formation: 1993	M State of legal domicile: ${f FL}$						
Pá	art I	Summary									
a)	1	Briefly describe the organization's mission or most significant activities: ${f FL}$									
Governance		PRESERVES, PROTECTS, SUSTAINS AND GROWS	5 FLORII	DA STATE PARK	S						
rna	2	Check this box if the organization discontinued its operations or di	isposed of mo	re than 25% of its net as:							
ove.	3			<u>3</u>	19						
	1 .	Number of independent voting members of the governing body (Part VI, line			19						
es 6		Total number of individuals employed in calendar year 2023 (Part V, line 2a)			5						
Activities &		Total number of volunteers (estimate if necessary)			19						
₹	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.						
_	b	Net unrelated business taxable income from Form 990-T, Part I, line 11			0.						
			-	Prior Year	Current Year						
ē	8	Contributions and grants (Part VIII, line 1h)		1,043,274.	1,650,623.						
ent	9	Program service revenue (Part VIII, line 2g)		0.	0.						
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		467,201.	106,799.						
_	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	0.						
_		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 1	12)	1,510,475.	1,757,422.						
	1	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		794,935.	899,565.						
	1	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.						
es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-		381,528.	504,688.						
ens	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.						
Expenses	_b	Total fundraising expenses (Part IX, column (D), line 25) 274		200 760	241 550						
ш	''	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		300,760.	241,550.						
	1	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		1,477,223.	1,645,803.						
		Revenue less expenses. Subtract line 18 from line 12		33,252. Beginning of Current Year	111,619. End of Year						
t Assets or		T. I. I I. (D. I. V. I' 40)		18,913,684.	21,176,686.						
SSE	20	Total assets (Part X, line 16)	·····	71,641.	46,329.						
Net /		Total liabilities (Part X, line 26)	·····	18,842,043.	21,130,357.						
	22 art II	Net assets or fund balances. Subtract line 21 from line 20 Signature Block		10,042,043.	21,130,337.						
		Ities of perjury, I declare that I have examined this return, including accompanying sche	adulae and etata	ments, and to the hest of my	/ knowledge and helief it is						
		t, and complete. Declaration of preparer (other than officer) is based on all information		· · · · · · · · · · · · · · · · · · ·	, knowledge and belief, it is						
truc	, 001100	t, and complete. Declaration of preparer (other than officer) is based on all information	or writeri prepar	ci ilas ally kilowicugo.							
Sig	n	Signature of officer		Date							
Her		JULIA WOODWARD, CEO									
1101	•	Type or print name and title									
		Print/Type preparer's name Preparer's signature		Date Check	PTIN						
Paid	i	STACEY T KOLKA		if self-employ	P01371120						
Pre	oarer	Firm's name THOMAS HOWELL FERGUSON P.A.			9-3186310						
	Only	Firm's address 2615 CENTENNIAL BLVD., SUITE 20	00								
		TALLAHASSEE, FL 32308		Phone no. 85	0-668-8100						
Ma	the If	RS discuss this return with the preparer shown above? See instructions		<u>.</u>	X Yes No						
			2001 12 21 22		Form 990 (2023)						

Pai	Check if Schedule O contains a response or note to any line in this Part III
_	
1	Briefly describe the organization's mission: FLORIDA STATE PARKS FOUNDATION PRESERVES, PROTECTS, SUSTAINS AND GROWS
	FLORIDA STATE PARKS FOUNDATION PRESERVES, PROTECTS, SUSTAINS AND GROWS
	FLORIDA STATE PARKS.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes." describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$
	THE FOUNDATION PROVIDES FINANCIAL SUPPORT FOR PARK PROJECTS THAT
	SUPPLEMENT STATE AND FRIENDS GROUP FUNDING. THE FOUNDATION ACTS AS A
	PARTNER IN THIS MANNER BY SEEKING AND SOLICITING SUPPORT FROM OUTSIDE
	FUNDERS FOR PARK SPECIFIC PROGRAMS AND PROJECTS AS WELL AS GRANTING
	FUNDS FOR PROGRAMS, PROJECTS AND EQUIPMENT.
	20 116
4b	(Code:) (Expenses \$ 39,116. including grants of \$ 39,116.) (Revenue \$)
	THE GREENER INITIATIVE IS DESIGNED TO EXPAND ENVIRONMENTALLY FRIENDLY
	PRACTICES IN STATE PARKS, REDUCE PARKS' ENERGY-RELATED EXPENSES AND
	ENCOURAGE PARK VISITORS TO MAKE ENVIRONMENTALLY-CONSCIOUS DECISIONS IN THE PARKS AND AT HOME.
	THE PARKS AND AT HOME.
4c	(Code:) (Expenses \$243,663. including grants of \$243,663.) (Revenue \$)
	THE FOUNDATION SUPPORTS THE FLORIDA PARK SERVICE'S COMMITMENT TO
	PROVIDING INCLUSIVE EXPERIENCES TO EVERY PARK VISITOR. MANY INNOVATIVE
	ADVANCES HAVE BEEN MADE THAT ALLOW PEOPLE WITH DISABILITIES
	UNPRECEDENTED ACCESS TO THE OUTDOORS: ALL-TERRAIN POWER WHEELCHAIRS
	ABLE TO HANDLE DEEP SAND OR RUGGED TRAILS; ACCESSIBLE KAYAK LAUNCHES;
	ROLL OUT MATTING THAT TRANSFORMS SANDY BEACHES INTO STABLE EASILY
	TRAVERSED PATHS; AND MORE. ACCESS FOR ALL GRANTS CAN BE REQUESTED TO
	PROVIDE FUNDING FOR ACCESSIBILITY PROJECTS, EQUIPMENT AND SERVICES.
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ 58,649 • including grants of \$ 34,659 •) (Revenue \$)
<u>4e</u>	Total program service expenses 1,121,032.
	Form 990 (2023)

Part IV | Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. 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	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
·	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>	- '-		 ^
8				x
•	Schedule D, Part III	8		_ A
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?	_	٦,	
	If "Yes," complete Schedule D, Part IV	9	_X_	
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a		X
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	X	
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
·	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
124		12a		X
h	Schedule D, Parts XI and XII Was the organization included in consolidated, independent audited financial statements for the tax year?	12a		1
b		401-	x	
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		_
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			٠,,
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			١,,
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			l
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b		20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	

	990 (2023) FLORIDA STATE PARKS FOUNDATION, INC. 59-320	<u> 7818</u>	P	age 4
Pai	t IV Checklist of Required Schedules (continued)		V	Na
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		Yes	No
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	04-		
4	any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c 24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	24u		
2 54	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes." complete			
	Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			,,,
•	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV,			
•	instructions for applicable filing thresholds, conditions, and exceptions): A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
а	"Yes," complete Schedule L, Part IV	28a		х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If</i>			
	"Yes," complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
24	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	X	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	34		x
35 a	Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	Jour		
-	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
Da	Note: All Form 990 filers are required to complete Schedule O	38	X	
Pai				$\overline{}$
	Check if Schedule O contains a response or note to any line in this Part V			
4 -	Enter the growth of the bay 2 of Favor 1000 Fator 0 if not applicable	7	Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	4		

(gambling) winnings to prize winners?

023) FLORIDA STATE PARKS FOUNDATION, INC. Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V

2a Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, gled for the calendar year ending with or within the year covered by this return 2 3 3 5 5 5 8 8 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				Yes	No						
b If a least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b X 3 Did the organization have unrelated business gross income of \$1,000 or more during the year? 3 Did the organization have unrelated business gross income of \$1,000 or more during the year? 3 Did In "Yes," has it filed a Form 990-T for this year? "Yes" to line 3b, provide an explanation on Schedule 0 3 Did In "Yes," the set filed a Form 990-T for this year? "Yes" to line 3b, provide an explanation on Schedule 0 3 Did any taxonic for filing requirements for FinCR Form 114, Report of Foreign Bank and Financial Accounts (*BAR). 5 Did any taxonic for filing requirements for FinCR Form 114, Report of Foreign Bank and Financial Accounts (*BAR). 5 Did any taxonic for filing requirements for FinCR Form 114, Report of Foreign Bank and Financial Accounts (*BAR). 5 Did any taxonic for filing requirements for FinCR Form 114, Report of Foreign Bank and Financial Accounts (*BAR). 5 Did any contributions brain were not tax deductible as charitable contributions? 5 Did The Standard Comparization in American Financial Accounts (*BAR). 5 Did were not tax deductible? 5 Did the organization have were not tax deductible as charitable contributions? 5 Did the organization necess of \$5's made party as contribution and party for goods and services provided to the payor? 5 Did the organization necessed any funds, directly or indirectly, to pay premium on a personal benefit contract? 7 Did the organization selection of qualified intellectual property, did the organization file a Form 8888? 5 Did the organization on evide value, or the value of the goods or services provided? 5 Did the organization on evide value, or the value of the goods or services provided? 6 Did the organization on evide value, or the value of the goods or services provided? 7 Did the organization on evide value, or the value of the goods or services provided? 6 Did the organization on evide value, or the value of the goods or ser	2a										
3a Dit the organization have unrelated business gross income of \$1,000 or more during the year? 3b Dit 1/1**es*, fish tifed a form 900 for this year? If 1/10* to line 3b, provide an explanation on Schadule 0 4d At any time during the calendar year, did the organization have an interest in, or a signiture or other authority over, a financial account in a foreign country such as a bank account, securities account, or other financial accountry? 5d In 1/1**es*, financial accountry in a foreign country such as a bank account, securities account, or other financial accountry? 5d In 1/1**es*, financial financial foreign country such as a bank account, securities account, or other financial accountry? 5d In 1/1**es*, financial financial foreign game and game an		filed for the calendar year ending with or within the year covered by this return 2a									
b If Yes, "Itas it filled a Form 990T for this year? If 'No' for line 3b, provide an explanation on Schedule O 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)? 4a	b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х							
4a A lary 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 accounts? b if "Yes," either the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5a Was the organization aparty to a prohibited tax shefter transaction at any time during the tax year? 5b If "Yes" to line Sao r5b, did the organization that it was or is a party to a prohibited tax shefter transaction? 5c If "Yes" to line Sao r5b, did the organization the foreign 888617? 5b If "Yes," did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductibles calentable contributions? 6a Dess the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductibles calentable contributions? 6b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductibles a charitable contribution and partly for goods and services provided to the payor? 7c If yes, "find the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7b If "Yes," includes the number of Forms 88282 filed during the year 1c Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7c X 7d If the organization received a contribution of care, boats, singlenes, or other vehicles, did the organization file a Form 1098-C7 8d Sponsoring organizations make any taxabilided intellectual property, did the organization file a Form 1098-C7 8d Sponsoring organizations make any taxabilided intellectual property, did the organization file a Form	За		3a		X						
francial account in a foreign country (such as a bank account, securities account, or other financial account)? b If Yes,* enter the name of the foreign country See instructions for filing requirements for FincEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5a Wes the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5b Did any scalable party notify the organization file Form 888617? 6c If Yes* to line Sa or 5b, did the organization file Form 888617? 6d Does the organization and party to a prohibited tax shelter transaction? 6d Does the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible as charitable contributions? b If Yes*, did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). 6 If Wes*, did the organization neotive apyment in excess of 57s make party as a contribution and partly for goods and services provided to the payor? 7 If If Yes*, did the organization neotive apyment in excess of 57s make party as a contribution and partly for goods and services provided to the payor? 7 If If Yes*, did the organization neotive and payor and the pa	b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b								
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5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a X 5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5c If "Yes" to line Sa or Sb, did the organization file Form 8886-T? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductibles? 6b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductibles? 7 Organizations that may receive deductible contributions under section 170(c). a bill the organization include with every solicitation an express statement that such contributions or gifts were not tax deductibles? 7 Organizations that may receive deductible contributions under section 170(c). a bill the organization notify the donor of the value of the goods or services provided? 7 Organization sell, exchange, or otherwise dispose of tanglish personal property for which it was required to file Form 8882 or otherwise dispose of tanglish personal property for which it was required to file Form 8882; and the organization received any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 Organization received and contribution of cualified intellectual property, did the organization file Form 1098-C? 8 Sponsoring organization make a distribution of qualified intellectual property, did the organization file Form 1098-C? 8 Sponsoring organization make a distribution of the device of the year? 9 Did the sponsoring organization make a distribution is under section 4966? 9 Sponsoring organization make a distribution is under section 4968? 9 Sponsoring organization make a distribution is under section 4968? 9 Sponsoring organization secleved a contribution of care section 4966? 9 Sponsoring organization secleved and the avex event interest received or accurated uning the	b										
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that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17										
			17								

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI

	Check if Schedule O contains a response or note to any line in this Part VI					X						
Sec	tion A. Governing Body and Management											
					Yes	No						
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	1:	9								
	If there are material differences in voting rights among members of the governing body, or if the governing											
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.											
b	Enter the number of voting members included on line 1a, above, who are independent	1b	1	9								
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with	any other									
	officer, director, trustee, or key employee?											
3	Did the organization delegate control over management duties customarily performed by or under the	direc	t supervision									
	of officers, directors, trustees, or key employees to a management company or other person?			3		X						
4	Did the organization make any significant changes to its governing documents since the prior Form 9	90 wa	s filed?	4		X						
5	5 Did the organization become aware during the year of a significant diversion of the organization's assets?											
6	6 Did the organization have members or stockholders?											
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap	point	one or									
	more members of the governing body?			7a		X						
b	b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or											
	persons other than the governing body?											
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	r by th	e following:									
а	The governing body?			8a	X							
b	Each committee with authority to act on behalf of the governing body?			8b	X							
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read	ched a	t the									
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O											
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	venue	Code.)									
					Yes	No						
10a	Did the organization have local chapters, branches, or affiliates?			10a		X						
b	If "Yes," did the organization have written policies and procedures governing the activities of such ch	apters	, affiliates,									
	and branches to ensure their operations are consistent with the organization's exempt purposes?											
11a	a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?											
b	b Describe on Schedule O the process, if any, used by the organization to review this Form 990.											
12a	a Did the organization have a written conflict of interest policy? If "No," go to line 13											
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	to con	flicts?	12b	X	<u> </u>						
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	'es," d	escribe									
	on Schedule O how this was done			12c	_							
13	Did the organization have a written whistleblower policy?			13	X	<u> </u>						
14	Did the organization have a written document retention and destruction policy?			14	X							
15	Did the process for determining compensation of the following persons include a review and approva	l by in	dependent									
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?											
а	The organization's CEO, Executive Director, or top management official			15a	X							
b	Other officers or key employees of the organization			15b	X							
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.											
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	nent w	ith a									
	taxable entity during the year?			16a		X						
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	e its p	articipation									
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ	izatior	ı's									
_	exempt status with respect to such arrangements?			16b								
Sec	tion C. Disclosure											
17	List the states with which a copy of this Form 990 is required to be filed FL											
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, are	nd 990	-T (section 501(c)(3)s only)	availa	ble						
	for public inspection. Indicate how you made these available. Check all that apply.											
	Own website Another's website X Upon request Other (explain											
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co	nflict o	of interest policy, ar	nd finar	ıcial							
	statements available to the public during the tax year.											
20	State the name, address, and telephone number of the person who possesses the organization's boo	ks an	d records									
	JULIA WOODWARD - 813-586-0681		20202									
	1700 N. MONROE STREET SUITE 11 #200 TALLAHASSEE F	TI.	32303									

Part VIII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average		not c		more	than o		Reportable	Reportable	Estimated
	hours per week					son is both an rector/trustee)		compensation from	compensation from related	amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(1) JULIA WOODWARD	40.00									
CEO				Х				169,920.	0.	35,311
(2) AUDRINE FINNERTY	2.00									
TREASURER		X		X				0.	0.	0 .
(3) AVERY MCKNIGHT	1.00									_
DIRECTOR		X						0.	0.	0 .
(4) DEREK BRUCE	1.00	ļ								
DIRECTOR		X						0.	0.	0.
(5) DON PHILPOTT	8.00	↓								•
DIRECTOR	1 00	X				_	_	0.	0.	0 .
(6) EMILY LEWIS	1.00	Į.,		Ι.,					_	0
SECRETARY (7) GREG WILSON	1.00	X		Х			\vdash	0.	0.	0.
DIRECTOR	1.00	x						0.	0.	0.
(8) JACKYE MAXEY	1.00	<u> </u>					\vdash		0.	0 .
DIRECTOR	1.00	x						0.	0.	0
(9) JOSE FELIX DIAZ	1.00	1							•	0
DIRECTOR		x						0.	0.	0 .
(10) JOSE ROMANO	1.00	 								
DIRECTOR		x						0.	0.	0
(11) KATHLEEN BRENNAN	5.00									
PRESIDENT		x		Х				0.	0.	0 .
(12) LIZA MCFADDEN	1.00									
DIRECTOR		X						0.	0.	0 .
(13) LYNN CHERRY	1.00]								
DIRECTOR		Х						0.	0.	0 .
(14) MATT CALDWELL	1.00								_	
PRESIDENT-ELECT		X		X	_	_		0.	0.	0
(15) RICHARD GOLDMAN	1.00	ļ							_	_
DIRECTOR	1 00	X		_	_	_		0.	0.	0 .
(16) ROBERT LARKIN	1.00	 							_	_
DIRECTOR	1 00	X		_	_	_	_	0.	0.	0
(17) RYAN MATTHEWS	1.00	₩.							_	_
DIRECTOR		X		<u> </u>				0.	0.	0 (202)

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)													
(A)	(B)			(C)			(D) (E)			(F)		
Name and title	Average	Average Position (do not check more t				nne	Reportable	Reportable		Estimated		ed	
	hours per	box	, unles	ss per	son is	s both	n an	compensation	compensatio		an	nount	of
	week (list any	_	Cer an	u a uii	recto	or/trus	lee)	from	from related			other	
	hours for	Jirecto				_		the organization	organization (W-2/1099-MIS			pensa om th	
	related	9e Or (stee			nsateo		(W-2/1099-MISC/	1099-NEC)			anizat	
	organizations	truste	al tru		yee	mbel		1099-NEC)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			d relat	
	below	Individual trustee or director	Institutional trustee	Jec.	Key employee	Highest compensated employee	ner				orga	anizati	ons
	line)	Indi	Inst	Officer	Key	High	Former						
(18) TAMMY GUSTAFSON	2.00												_
IMMEDIATE PAST PRESIDENT	1 00	X		Х			_	0.		0.			0.
(19) TOM PENNEKAMP	1.00												•
DIRECTOR	1 00	Х						0.		0.			0.
(20) WENDY SPENCER	1.00												•
DIRECTOR		Х					_	0.		0.			0.
		_					<u> </u>						
		_					_						
		_					<u> </u>						
							\vdash						
_		_					_			\longrightarrow			
		1											
dh Cohasal								169,920.		0.	- 7	5 3	11
1b Subtotal								0.		0.	35,311.		
c Total from continuation sheets to Part VII d Total (add lines 1b and 1c)								169,920.		0.	35,311.		
Total number of individuals (including but no									000 of reportable		• 33,311.		
compensation from the organization	or inflited to th	036	listo	u ab	OVE) WII	016	scerved more triair \$100,	ooo or reportable	,			1
compensation from the organization												Yes	No
3 Did the organization list any former officer,	director truste	e k	ev e	mple	ove	e or	hio	hest compensated emp	lovee on	1			
line 1a? If "Yes," complete Schedule J for si			•		•		_	most compensated emp	•		3		Х
4 For any individual listed on line 1a, is the su													
and related organizations greater than \$150									-		4	Х	
5 Did any person listed on line 1a receive or a													
rendered to the organization? If "Yes," com								•			5		Х
Section B. Independent Contractors	prote Gerreaut	, 0 /	<i>57</i>	OH D	2070	011							
Complete this table for your five highest cor	mpensated ind	lepe	nder	nt co	ntra	actor	rs th	nat received more than \$	100,000 of comp	ensa	tion fro	om	
the organization. Report compensation for t	he calendar ye	ear e	ndin	ıg wi	ith c	or wi	thin	the organization's tax y	ear.				
(A)	_							(B)			((C)	
Name and business address NONE								Description of s	ervices	C		nsatio	n
							\Box						
							_						
							_						
									_				
2 Total number of independent contractors (in	•	ot lin	nited	l to t	_		ted	above) who received mo	ore than				
\$100,000 of compensation from the organize	zation				C	j							

Form 990 (2023) FLORIDA
Part VIII | Statement of Revenue

			Check if Schedule O contains a response	or note to any lin	e in this Part VIII			
			Check if Schedule O Contains a response	or note to any lin	(A) Total revenue	(B) Related or exempt function revenue	(C)	(D) Revenue excluded from tax under sections 512 - 514
ts ts	1	а	Federated campaigns 1a					
Contributions, Giffs, Grants and Other Similar Amounts		b	Membership dues 1b	29,395.				
		С	Fundraising events 1c					
			Related organizations 1d					
s, G mila		е	Government grants (contributions) 1e					
ions, r Simi		f	All other contributions, gifts, grants, and					
but the			similar amounts not included above 1f	1,621,228.				
n tri		g	Noncash contributions included in lines 1a-1f 1g \$					
So		h	Total. Add lines 1a-1f		1,650,623.			
				Business Code				
ė	2	а						
e Zi		b						
Se		С						
am eve		d						
Program Service Revenue		е						
ď			All other program service revenue					
		g	Total. Add lines 2a-2f					
	3		Investment income (including dividends, inter	est, and				
			other similar amounts)		651,031.			651,031.
	4		Income from investment of tax-exempt bond					
	5		Royalties					
			(i) Real	(ii) Personal				
			Gross rents 6a	+				
			Less: rental expenses 6b	+				
			Rental income or (loss) 6c					
			Ross amount from sales of (i) Securities	(ii) Other				
	7	а	(7	<u> </u>				
			assets other than inventory Less: cost or other basis 7a 5,616,134	•				
ø		D	and sales expenses 7b 6,160,366					
nue		_	Gain or (loss) 7c -544,232					
Revenue			Net gain or (loss)	•	-544,232.			-544,232.
er F	l		Gross income from fundraising events (not		,			,
ot P	ľ	_	including \$ of					
			contributions reported on line 1c). See					
			Part IV, line 18	,				
		b	Less: direct expenses)				
			Net income or (loss) from fundraising events					
	9	а	Gross income from gaming activities. See					
			Part IV, line 19	1				
		b	Less: direct expenses 91	o				
		С	Net income or (loss) from gaming activities					
	10	а	Gross sales of inventory, less returns					
			and allowances 10					
			Less: cost of goods sold 10					
		С	Net income or (loss) from sales of inventory					
2				Business Code				
eor ne	11							
llan		b						
Miscellaneous Revenue		۲ C	All other revenue					
Σ			All other revenue Total. Add lines 11a-11d					
	12	<u>e</u>	Total revenue. See instructions		1,757,422.	0.	0.	106,799.
	12		TOTAL TOYONGO, GOO MIGH dOLIONG		=,:::,:==,			= , •

Pai	rt IX Statement of Functional Expense	es			
Secti	ion 501(c)(3) and 501(c)(4) organizations must comp	olete all columns. All othe	er organizations must con	nplete column (A).	
	Check if Schedule O contains a respon	se or note to any line in			
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	899,565.	899,565.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	005 001	00 554	20 045	01 720
_	trustees, and key employees	205,231.	82,554.	30,945.	91,732.
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	243,249.	97,847.	36,677.	108,725.
7	Other salaries and wages	243,249.	31,041.	30,077.	100,725.
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	25,539.	10,273.	3,851.	11,415.
10	Payroll taxes	30,669.	12,337.	4,624.	13,708.
11	Fees for services (nonemployees):	30,003.	12,557.	4,024.	13,700.
	Management				
b	Legal				
	Accounting	58,257.		58,257.	
	Lobbying	,		,	
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	76,407.		76,407.	
g					
	column (A), amount, list line 11g expenses on Sch O.)				
12	Advertising and promotion	28,653.	10,933.	4.	17,716.
13	Office expenses	1,774.	251.	1,402.	121.
14	Information technology				
15	Royalties				
16	Occupancy	6,279.		6,279.	
17	Travel	2,167.		2,167.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	14 505	2 000	10 152	1 470
19	Conferences, conventions, and meetings	14,505.	2,880.	10,153.	1,472.
20	Interest Downerts to offiliates				
21	Payments to affiliates Depreciation, depletion, and amortization				
22 23		14,357.		14,357.	
23 24	Other expenses. Itemize expenses not covered	14,5574		14,5574	
24	above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
а	BANK AND CREDIT CARE FE	22,899.	1,659.	62.	21,178.
b	PRINTING & COPYING	5,148.	924.	4,010.	214.
c	POSTAGE & SHIPPING	4,336.	141.	40.	4,155.
d	SUBSCRIPTIONS	3,719.	1,668.	1,526.	525.
е	All other expenses	3,049.			3,049.
25	Total functional expenses. Add lines 1 through 24e	1,645,803.	1,121,032.	250,761.	274,010.
26	Joint costs. Complete this line only if the organization				_
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				

Form **990** (2023)

Check here

if following SOP 98-2 (ASC 958-720)

Pa	ιx	Balance Sheet					
		Check if Schedule O contains a response or r	note to a	ny line in this Part X			(P)
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			542,708.	1	691,617.
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net		3			
	4	Accounts receivable, net				4	
	5	Loans and other receivables from any current					
		trustee, key employee, creator or founder, sul	ıbstantial	contributor, or 35%			
		controlled entity or family member of any of these persons				5	
	6	Loans and other receivables from other disqu	ualified pe	ersons (as defined			
		under section 4958(f)(1)), and persons describ	bed in se	ction 4958(c)(3)(B)		6	
ţ	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
Ä	9	Prepaid expenses and deferred charges			7,736.	9	8,515.
	10a	Land, buildings, and equipment: cost or other	er				
		basis. Complete Part VI of Schedule D	10a				
	b	Less: accumulated depreciation	10b			10c	
	11	Investments · publicly traded securities				11	
	12	Investments - other securities. See Part IV, lin	ne 11		18,255,040.	12	20,457,647.
	13	Investments - program-related. See Part IV, lir	ne 11			13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			108,200.	15	18,907.
	16	Total assets. Add lines 1 through 15 (must e			18,913,684.	16	21,176,686.
	17	Accounts payable and accrued expenses			41,402.	17	16,090.
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complet	ete Part I\	of Schedule D	30,239.	21	30,239.
Se	22	Loans and other payables to any current or fo					
Liabilities		trustee, key employee, creator or founder, sul					
jab		controlled entity or family member of any of the				22	
_	23	Secured mortgages and notes payable to unrelated third parties				23	
	24	Unsecured notes and loans payable to unrela				24	
	25	Other liabilities (including federal income tax,					
		parties, and other liabilities not included on lin	nes 17-2	4). Complete Part X			
		of Schedule D			71 641	25	46 220
	26	Total liabilities. Add lines 17 through 25			71,641.	26	46,329.
s		Organizations that follow FASB ASC 958, c	check he	re X			
JCe		and complete lines 27, 28, 32, and 33.			10 106 017		10 016 200
alaı	27				18,196,817. 645,226.	27	19,916,209.
Ä	28	Net assets with donor restrictions			045,220.	28	1,214,148.
Ĕ		Organizations that do not follow FASB ASC	C 958, cr	neck here			
P		and complete lines 29 through 33.					
şţs	29	Capital stock or trust principal, or current fund				29	
SSE	30	Paid-in or capital surplus, or land, building, or				30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated			18,842,043.	31	21,130,357.
ž	32	Total liabilities and not seem (fund balances			18,913,684.	32	21,176,686.
	33	Total liabilities and net assets/fund balances			10,313,004.	33	Z1,1/0,000.

Da	AVI D CALLA LA					<i>3</i> -
Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1.	75'	7.4	22.
2	Total expenses (must equal Part IX, column (A), line 25)	2				03.
3	Revenue less expenses. Subtract line 2 from line 1	3				19.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4				43.
5	Net unrealized gains (losses) on investments	5				95.
6	Donated services and use of facilities	6			- , -	
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9				0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10	21.	130).3	57.
Pa	rt XII Financial Statements and Reporting	10			,,	<u> </u>
	Check if Schedule O contains a response or note to any line in this Part XII					
	ones in constant of some and one of the constant of the consta			T	Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	O.	_			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed					
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate					
	consolidated basis, or both:	,				
	Separate basis X Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,				
	review, or compilation of its financial statements and selection of an independent accountant?			2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche					
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the		Г			
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?			За		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required					
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b		

SCHEDULE A

(Form 990)

Total

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number Name of the organization FLORIDA STATE PARKS FOUNDATION, 59-3207818 Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other (described on lines 1-10 organization support (see instructions) support (see instructions) above (see instructions))

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sed	ction A. Public Support						
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	221,823.	563,173.	869,223.	1043274.	1650623.	4348116.
2	Tax revenues levied for the organ-						
	ization'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	221,823.	563,173.	869,223.	1043274.	1650623.	4348116.
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.						4348116.
	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 4	221,823.	563,173.	869,223.	1043274.	1650623.	4348116.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	598,276.	681,669.	1000472.	667,773.	651,031.	3599221.
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	Total support. Add lines 7 through 10						7947337.
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	
13	First 5 years. If the Form 990 is for the	ne organization's fir	st, second, third, f	ourth, or fifth tax y	ear as a section 5	01(c)(3)	
	organization, check this box and stop						
	ction C. Computation of Publi						
	Public support percentage for 2023 (I					14	54.71 %
	Public support percentage from 2022					15	<u>45.59 %</u>
16a	33 1/3% support test - 2023. If the o				14 is 33 1/3% or m	ore, check this box	
	stop here. The organization qualifies		•				
b	33 1/3% support test - 2022. If the	organization did no	t check a box on l	ne 13 or 16a, and	line 15 is 33 1/3%	or more, check thi	s box
	and stop here. The organization qual	ifies as a publicly s	supported organiza	ition			
17a	10% -facts-and-circumstances test	•					
	and if the organization meets the fact		,	•		VI how the organiz	ation
	meets the facts-and-circumstances te	· ·		, ,,			
b	10% -facts-and-circumstances test	•					10% or
	more, and if the organization meets the				•		
	organization meets the facts-and-circu						
18	Private foundation. If the organization	n did not check a l	oox on line 13, 16a	a, 16b, 17a, or 17b	o, check this box ar		
						Schadula A	(Form 990) 2023

332022 12-21-23

SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements
Complete if the organization answered "Yes" on Form 990.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

2023 Open to Public

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service

Name of the organization

FLORIDA STATE PARKS FOUNDATION, INC.

Employer identification number 59-3207818

Pai	t I Organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, lin		Similar Funds o	r Accounts	S. Complete if the
		(a) Donor advise	ed funds	(b) Funds	s and other accounts
1	Total number at end of year			. ,	
2	Aggregate value of contributions to (during year)				
3	Aggregate value of grants from (during year)				
4	Aggregate value at end of year				
5	Did the organization inform all donors and donor advisors in v	writing that the assets he	eld in donor advised	d funds	
	are the organization's property, subject to the organization's	-			Yes No
6	Did the organization inform all grantees, donors, and donor a				
	for charitable purposes and not for the benefit of the donor or	r donor advisor, or for ar	ny other purpose co	onferring	
	impermissible private benefit?				Yes No
Pai	t II Conservation Easements. Complete if the org	ganization answered "Ye	s" on Form 990, Pa	art IV, line 7.	
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).	_		
	Preservation of land for public use (for example, recreated	tion or education)	Preservation of a	historically in	nportant land area
	Protection of natural habitat		Preservation of a	certified histo	oric structure
	Preservation of open space				
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contrib	ution in the form of		
	day of the tax year.			H	leld at the End of the Tax Year
а	Total number of conservation easements			2a	
b				2b	
С	Number of conservation easements on a certified historic stru			2c	
d	Number of conservation easements included on line 2c acqui				
	on a historic structure listed in the National Register			2d	
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or t	terminated by the o	rganization du	uring the tax
	year				
4	Number of states where property subject to conservation eas				
5	Does the organization have a written policy regarding the per				
_	violations, and enforcement of the conservation easements it				Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, ai	nd enforcing consei	rvation easem	ents during the year
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and er	nforcina conservatio	on easements	during the year
			g concentant		and your
8	Does each conservation easement reported on line 2d above	satisfy the requirements	s of section 170(h)(4	1)(B)(i)	
	and section 170(h)(4)(B)(ii)?				Yes No
9	In Part XIII, describe how the organization reports conservation	on easements in its reve	nue and expense st	atement and	
	balance sheet, and include, if applicable, the text of the footn	ote to the organization's	financial statemen	ts that descri	bes the
	organization's accounting for conservation easements.				
Pai	t III Organizations Maintaining Collections of	•	asures, or Oth	er Similar	Assets.
	Complete if the organization answered "Yes" on Form				
1a	If the organization elected, as permitted under FASB ASC 95	•			
	of art, historical treasures, or other similar assets held for pub	ŕ	•		iblic
	service, provide in Part XIII the text of the footnote to its finan				
b	If the organization elected, as permitted under FASB ASC 95	•			
	art, historical treasures, or other similar assets held for public	exhibition, education, o	r research in furthe	rance of publi	c service,
	provide the following amounts relating to these items.				
	(i) Revenue included on Form 990, Part VIII, line 1				
-				\$	
2	If the organization received or held works of art, historical trea		_	gaın, provide	
	the following amounts required to be reported under FASB A	•			
a	Revenue included on Form 990, Part VIII, line 1				
b	Assets included in Form 990, Part X			\$	

332051 09-28-23

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule D (Form 990) 2023

Schedule D (Form 990) 2023

e Other

c Leasehold improvementsd Equipment

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))

Part VII	Investments -	- Other Securitie	s

Part VII Investments - Other Securities			
Complete if the organization answered "Yes"	on Form 990, Part IV, line 1	1b. See Form 990, Part X, line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	l-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A) EQUITY SECURITIES	3,078,675.	END-OF-YEAR MARKET	VALUE
(B) MUTUAL FUNDS	15,811,117.	END-OF-YEAR MARKET	VALUE
(C) SHORT TERM INVESTMENTS	1,567,855.	END-OF-YEAR MARKET	VALUE
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))	20,457,647.		
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line 1	1c. See Form 990, Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	l-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))			
Part IX Other Assets			
Complete if the organization answered "Yes"	on Form 990, Part IV, line 1	1d. See Form 990, Part X, line 15.	
(a)	Description		(b) Book value
(1)			
(2)			

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	

Total. (Column (b) must equal Form 990, Part X, line 15, col. (B))

Other Liabilities

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total.	(Column (b) must equal Form 990, Part X, line 25, col. (B))	

Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the X organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2023

Schedule D (Form 990) 2023

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization							Employer identification number
	TATE PARK	S FOUNDATION	N, INC.				59-3207818
Part I General Information on Grants a	nd Assistance						
1 Does the organization maintain records to		_			-		
criteria used to award the grants or assis	stance?						X Yes No
2 Describe in Part IV the organization's pro							
Part II Grants and Other Assistance to recipient that received more than S					anization answered "Y	es" on Form 990, Part	IV, line 21, for any
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
FLORIDA DEPARTMENT OF							
ENVIRONMENTAL PROTECTION - 3900							
COMMONWEALTH BLVD - TALLAHASSEE,							
FL 32399	95-6007353	GOVERNMENTAL	243,663.	0.			NEW TOUR BOAT
FLORIDA DEPARTMENT OF							
ENVIRONMENTAL PROTECTION - 3900							
COMMONWEALTH BLVD - TALLAHASSEE,							
FL 32399	95-6007353	GOVERNMENTAL	39,116.	0.			UPGRADE LIGHTING AT PARKS
FLORIDA DEPARTMENT OF							
ENVIRONMENTAL PROTECTION - 3900							
COMMONWEALTH BLVD - TALLAHASSEE,							STAFF PROFESSIONAL
FL 32399	95-6007353	GOVERNMENTAL	16,947.	0.			TRAINING
FLORIDA DEPARTMENT OF							
ENVIRONMENTAL PROTECTION - 3900							
COMMONWEALTH BLVD - TALLAHASSEE,							
FL 32399	95-6007353	GOVERNMENTAL	43,235.	0.			WATER BOTTLE STATIONS
FLORIDA DEPARTMENT OF							
ENVIRONMENTAL PROTECTION - 3900							
COMMONWEALTH BLVD - TALLAHASSEE,							
FL 32399	95-6007353	GOVERNMENTAL	25,710.	0.			JUNIOR RANGER PROGRAM
FLORIDA DEPARTMENT OF							
ENVIRONMENTAL PROTECTION - 3900							
COMMONWEALTH BLVD - TALLAHASSEE,							
FL 32399	95-6007353	GOVERNMENTAL	20,000.	0.			AQUARIUM RESTORATION
2 Enter total number of section 501(c)(3) a	nd government or	ganizations listed in the	e line 1 table				1.

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

3 Enter total number of other organizations listed in the line 1 table

Schedule I (Form 990) 2023

Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FLORIDA DEPARTMENT OF							
ENVIRONMENTAL PROTECTION - 3900							
COMMONWEALTH BLVD - TALLAHASSEE,							
FL 32399	95-6007353	GOVERNMENTAL	7,425.	0.			BEACH ACCESS
FLORIDA DEPARTMENT OF							
ENVIRONMENTAL PROTECTION - 3900							
COMMONWEALTH BLVD - TALLAHASSEE,							
FL 32399	95-6007353	GOVERNMENTAL	17,475.	0.			NEW PAVILIONS
FLORIDA DEPARTMENT OF							
ENVIRONMENTAL PROTECTION - 3900							
COMMONWEALTH BLVD - TALLAHASSEE,							
FL 32399	95-6007353	GOVERNMENTAL	13,813.	0.			ADA POOL LIFT
FLORIDA DEPARTMENT OF							
ENVIRONMENTAL PROTECTION - 3900							
COMMONWEALTH BLVD - TALLAHASSEE,							
FL 32399	95-6007353	GOVERNMENTAL	7,848.	0.			SEA TURTLE PROTECTION
FLORIDA DEPARTMENT OF			,				
ENVIRONMENTAL PROTECTION - 3900							
COMMONWEALTH BLVD - TALLAHASSEE,							
, FL 32399	95-6007353	GOVERNMENTAL	25,804.	0.			BEACH ACCESS
FLORIDA DEPARTMENT OF			,				
ENVIRONMENTAL PROTECTION - 3900							
COMMONWEALTH BLVD - TALLAHASSEE,							
FL 32399	95-6007353	GOVERNMENTAL	12,540.	0.			STRIKE TEAM TRAILER
FLORIDA DEPARTMENT OF			,,,,,,	•			
ENVIRONMENTAL PROTECTION - 3900							
COMMONWEALTH BLVD - TALLAHASSEE,							
FL 32399	95-6007353	GOVERNMENTAL	33,313.	0.			UTV PURCHASE
FLORIDA DEPARTMENT OF	35 555,000		137,323.	•			
ENVIRONMENTAL PROTECTION - 3900							
COMMONWEALTH BLVD - TALLAHASSEE,							BOARDWALK/SIGN
FL 32399	95-6007353	GOVERNMENTAL	9,038.	0.			RESTORATION
FLORIDA DEPARTMENT OF	33 3007333	O . DIMININI IND	3,030.	••			
ENVIRONMENTAL PROTECTION - 3900							
COMMONWEALTH BLVD - TALLAHASSEE,							
•	95_6007353	COMEDNIMENTON	76 013	_			IIMV DIIDCUXCE
FL 32399	95-6007353	GOVERNMENTAL	76,013.	0.			UTV PURCHASE

Part II Continuation of Grants and Other	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FLORIDA DEPARTMENT OF							
ENVIRONMENTAL PROTECTION - 3900							
COMMONWEALTH BLVD - TALLAHASSEE,							
FL 32399	95-6007353	GOVERNMENTAL	25,214.	0.			PLANT A PINE
FLORIDA DEPARTMENT OF							
ENVIRONMENTAL PROTECTION - 3900							
COMMONWEALTH BLVD - TALLAHASSEE,							
FL 32399	95-6007353	GOVERNMENTAL	179,296.	0.			FORT MOSE RECONSTRUCTION

Part III Grants and Other Assistance to Domestic Individuals Part III can be duplicated if additional space is needed.	. Complete if the	organization answe	ered "Yes" on Form 9	90, Part IV, line 22.	
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
Part IV Supplemental Information. Provide the information req	uired in Part I, lin	e 2; Part III, column	(b); and any other ac	Iditional information.	
PART I, LINE 2					
FLORIDA STATE PARKS FOUNDATION, INC	C. HAS AN	INTERNAL	COMMITTEE	ТНАТ	
REVIEWS THE GRANT REQUESTS AND EXP	ENDITURES	FOR COMPI	LIANCE WITH	STATED	
REQUIREMENTS.					

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

2023

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service

Name of the organization

Department of the Treasury

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

Employer identification number

59-3207818

FLORIDA STATE PARKS FOUNDATION, INC.

Pa	art I Questions Regarding Compensation			
			Yes	No
1 a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	. 2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	Independent compensation consultant X Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:	_		v
a	Receive a severance payment or change-of-control payment?			X
	Participate in or receive payment from a supplemental nonqualified retirement plan?	4-		X
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		_^
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
Ĭ	contingent on the revenues of:			
а	The organization?	5a		Х
	Any related organization?	5b		Х
-	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
а	The organization?	6a		Х
	Any related organization?	6b		Х
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7		Х
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	. 8		Х
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2023

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

	(B) Breakdown of V	V-2 and/or 1099-MIS	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)	
(A) Name and Title	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990	
(1) JULIA WOODWARD (i)	164,920.	5,000.	0.	8,496.	26,815.	205,231.	0.	
CEO (iii		0.	0.	0.	0.	0.	0.	
(i)								
(ii								
(i)								
(ii								
(i)								
(ii								
(i)								
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(ii								
(i)								
(ii								
(i)								
(ii								
(i)								
(ii								
(i)								
(ii								
(6)								
(ii								
(i) (ii								
(i)								
(i) 								
(i)								
(ii								
(i)								
(i)								
(ii								

SCHEDULE O (Form 990)

Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

2023 Open to Public Inspection

OMB No. 1545-0047

Internal Revenue Service

Name of the organization

FLORIDA STATE PARKS FOUNDATION, INC.

Employer identification number 59-3207818

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: OTHER PROGRAM SERVICES INCLUDE TRANSPORTATION FOR SCHOOL CHILDREN TO STATE PARKS FOR FIELD TRIPS, RECOGNIZING PARK VOLUNTEERS, AND HOSTING VISITS FOR STATE LEGISLATIVE LEADERS TO PARKS IN THEIR DISTRICT. EXPENSES \$ 58,649. INCLUDING GRANTS OF \$ 34,659. REVENUE \$ 0. FORM 990, PART VI, SECTION B, LINE 11B: FORM 990 AND ACCOMPANYING SCHEDULES ARE PREPARED BY AN INDEPENDENT ACCOUNTING FIRM. FORM 990 AND ACCOMPANYING SCHEDULES ARE REVIEWED BY THE CHIEF EXECUTIVE OFFICER FOR ACCURACY. ALL QUESTIONS AND ISSUES ARE RESOLVED WITH THE INDEPENDENT ACCOUNTING FIRM PRIOR TO FILING WITH THE INTERNAL REVENUE SERVICE CENTER. FORM 990, PART VI, SECTION B, LINE 12C: THE CONFLICT OF INTEREST POLICY IS TO BE SIGNED ANNUALLY BY THE BOARD OF DIRECTORS, OFFICERS AND MEMBERS OF A COMMITTEE WITH BOARD DELEGATED POWERS. ANY CONFLICTS OR POTENTIAL CONFLICTS ARE RESOLVED BY THE CHAIRMAN OF THE BOARD. FORM 990, PART VI, SECTION B, LINE 15: CEO RAISES ARE SUBJECT TO EXECUTIVE COMMITTEE APPROVAL. THE CEO HAS THE AUTHORITY TO SET THE SALARY PACKAGES FOR ALL OTHER EMPLOYEES.

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION MAKES ITS THREE MOST CURRENT YEARS OF FORM 990 AND ITS

FORM 1023 AVAILABLE UPON REQUEST. NO OTHER DOCUMENTS ARE MADE AVAILABLE TO

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

Schedule O (Form 990) 2023