Florida Department of Environmental Protection



CITIZEN SUPPORT ORGANIZATION 2018 REPORT (pursuant to Florida Statute 20.058)

Citizen Support Organization (CSO) Name: <u>Friends of Fort Clinch, Inc.</u> Mailing Address: <u>2601 Atlantic Ave., Fernandina Beach, FL 32034</u> Telephone Number: <u>904-277-7233</u> Website Address (if applicable): <u>N/A</u>

Statutory Authority:

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

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

Brief Description of the CSO's Mission:

To support the State park Mission of providing resource based recreation while preserving, interpreting, and restoring the natural and cultural resources of Fort Clinch State Park through fund raising and grant acquisition.

- A. Provide support for restoration projects at Historic Fort Clinch
- B. Provide support for special events and educational programming
- C. To obtain tools and equipment to assist park rangers and volunteers in their duties
- D. To expand and improve the Parks renowned living history programs and to support any other activities, programs, or events which are designed to meet the additional areas of park needs identified by the park manager.

Brief Description of the CSO's Results Obtained:

- Supported 18 1st Weekend and special events by providing meals for living historians.
- Held 5 Board meetings and annual meeting.
- Joined Friends of Florida Parks which provides resources and liability insurance for Board.
- Revised membership directory by culling non-current members and making it more efficient.
- Developed completely new CSO records filing system with volunteer leadership
- Purchased new cannon carriage for Parrott Rifle.
- Supported Volunteer recognition luncheons.
- Maintained 2 AIFBY Chamber memberships (Friends and Park).
- Supported volunteers on special projects, hurricane clean-up activities, Emory University students.
- Supported Olustee trip for Regiment from Ft. Clinch
- Upgraded electric service for new washers/dryers we added for volunteers/resident staff use.
- Supplied water for Ranger station for campers/visitors.
- Kept Sutlery stocked.
- Purchased Mahindra UTV with assistance from grant.
- Hosted District II Citizen Support Org, (CSO) meeting.
- Supported Kid's Fishing Clinic.
- Facilitated corporate and private rentals of Fort for special events.
- Purchased and dedicated Civilian Conservation Corp Statue. Raised private matching funds (50% of project) for statue, benches, kiosk, flagpole, sod, fetch, bricks/pedestal, electric, and dedication reception.
- Hosted Amelia River Cruise and Bronze Man Race (cancelled due to hurricane) as statue fundraiser.
- Paid for upgrade to campground fish cleaning station
- Represented Friend of Ft. Clinch, Inc. at Wild Amelia Festival with information table.
- Purchased kayaks and supplies for new Park kayaking program.
- Purchased period uniforms for Rangers who act as living historians in Fort.
- Purchased lumber for Fort repairs.
- Collected Chris Hackney memorial donations and used such to purchase bench materials for staff to install additional benches throughout Park.
- Participated in statewide Park Manager/CSO meeting in Winter Park.
- Purchased Penny Press located in Visitor Center.
- Purchased banner to promote CSO/Friends of Fort Clinch, Inc.

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

- Continue to support the extensive living history and nature based programming.
- Continue to support volunteer efforts in interpreting the life of a Union soldier by funding interpretation materials and selected group meals for overnight volunteers.
- Support the funding of the ongoing restoration efforts of Historic Fort Clinch through supporting grant applications and providing matching funds when feasible.
- Continue to support special events including First Weekend Union and Confederate Garrisons, Spanish American War event, WWII event, History of the Soldier, Olustee weekend and Annual Kids Fishing Clinic.
- Enhance the CCC Statue project by completing a "history" of the project pictorial notebook for visitors to peruse.
- Continue to host private special events as a significant fund-raising source for the CSO and to promote access and exposure to the Florida State Park system.
- Continue to participate in the Wild Amelia annual expo and explore other organizations for opportunities to promote the park.
- Fund materials for bicycle wash.
- Continue to obtain tools/equipment to assist park staff and volunteers complete their duties safely and efficiently which helps them provide quality resource based recreational activities while preserving, interpreting and restoring natural and cultural resources.
- Assist park in updating interpretive signage in selected areas throughout the park.
- Review and update membership categories and practices.
- Actively promote memberships and communicate activities and accomplishments more effectively with members via website and Facebook.
- Increase press releases sent to local media regarding CSO opportunities and programs.
- Complete a new website with the capability of accepting electronic payments for Friends of Ft. Clinch memberships.
- Develop and adopt a new logo to include in all publications and media.
- Continue ongoing work in updating and keeping the filing system current. Explore electronic filing systems.
- Offer Starry Night Astronomy star gazing programs each year.
- Amend the ByLaws.
- Offer an "Adopt a Turtle" Program to help further educate people about sea turtles while also earning funds to assist with the turtle watch park program.
- Purchase 3" ordinance rifle w/non-firing tube for interpretation.
- Work with Old Town Fernandina volunteers to help upgrade the signage in The Plaza Park as well as support their plans to offer guided walking tours of The Plaza Park and Old Town Fernandina. Include additional materials regarding The Plaza Park in the Ranger Station.

- X Copy of the CSO's Code of Ethics attached (Model provided; see CSO 2014 instructions)
- X Certify the CSO has completed and provided to the Department the organization's most recent Internal Revenue Service (IRS) Form 990, 990-EZ, or 990-N/Annual Financial Statement

FOFCSP, Inc. Code of Ethics – September, 2014

Friends of Fort Clinch State Park Inc. CODE OF ETHICS

PREAMBLE

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

STANDARDS

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

1. Prohibition of Solicitation or Acceptance of Gifts

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

2. Prohibition of Accepting Compensation Given to Influence a Vote

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

3. Salary and Expenses

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

4. Prohibition of Misuse of Position

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

5. Prohibition of Misuse of Privileged Information

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

6. Post-Office/Employment Restrictions

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

7. Prohibition of Employees Holding Office

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

8. Requirements to Abstain From Voting

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

9. Failure to Observe CSO Code of Ethics

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

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	0		similar amounts paid (list in Schedule O)			
	1	Benetits pa	d to or for members	• • 11		
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	6	Other expe	nses (describe in Schedule O)	16		76,550
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e 1	9	Net assets	with			
Net Assets			figure reported on prior year's return)			79,885
<u>t</u> 2	20		es in net assets or fund balances (explain in Schedule O)			
4 1 4	21	Net assets	or fund balances at end of year. Combine lines 18 through 20	. 🕨 21		58,662

Pa	990-EZ (2017)					Page
	art II Balance Sheets (see the instructions					
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22	Cook polyings and investments		-	(A) Beginning of year		(B) End of year
22	Cash, savings, and investments		0 61 63 DB 266 766	79,885	22	58,62
24	Other assets (describe in Schedule O)	*****	• • • • • • • •		23	
25				79,885		58,62
26	Total liabilities (describe in Schedule O)				26	30,02
27	Net assets or fund balances (line 27 of column			79,885		58,66
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Par Don I Jim N Cand Vanc Rob I Sand Chris Sand Chris Amy	List of Officers, Directors, Trustees, and Key Check if the organization used Schedule (a) Name and title Hughes, President McCannell, Vice-President McCannell, Vice-President Mace Michelson, Treasurer Fishburn, Secretary Pfluger, Member Ira Baker-Hinton, Membership Coordinator Baker-Hinton, Membership Coordinator Baker, Member Fishburn, Member Fishburn, Member	P Employees (list each O to respond to an (b) Average hours per week devoted to position 8 4 1 1 1 4 0 1 1 1 1 1 1 1 1 1 1 1	n one even if not comp ny question in this (c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Densated—see the in Part IV (d) Health benefits, contributions to employe benefit plans, and deferred compensation	32 struc 	Estimated amount o

Form 990-EZ (2017)

Form 9	90-EZ (2017)		F	age 3
Part				
	instructions for Part V.) Check if the organization used Schedule O to respond to any question in this	s Part		
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a		Yes	No
55	detailed description of each activity in Schedule O	33		1
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed	33		1
•••	copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the			
	change on Schedule O (see instructions)	34		1
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business			
	activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		1
b	If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b		$\overline{\checkmark}$
С	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice,			1225
36	reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets	35c		1
00	during the year? If "Yes," complete applicable parts of Schedule N	36		1
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions	30		<u> </u>
b	Did the organization file Form 1120-POL for this year?	37b		1
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were		1	
	any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? .	38a		1
b				
39	Section 501(c)(7) organizations. Enter:	1.5		1. Sec.
a b	Initiation fees and capital contributions included on line 9 39a Gross receipts, included on line 9, for public use of club facilities 39b			
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:		12.2	12 - I
	section 4911 ► ; section 4912 ► ; section 4955 ►			FEUS
b	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958			
	excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year			
	that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		1
С	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912,	1944		
	4955, and 4958			
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line		15. N.	
	40c reimbursed by the organization		1.	
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter	200		H in
	transaction? If "Yes," complete Form 8886-T	40e		1
41 42a	List the states with which a copy of this return is filed			
420	The organization's books are in care of ► Telephone no. ► Located at ► ZIP + 4 ►			
b	Located at ► ZIP + 4 ► At any time during the calendar year, did the organization have an interest in or a signature or other authority over		Yes	No
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b		1
	If "Yes," enter the name of the foreign country: ►	5-14		1
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Einangial Accounts (ERAR)			
~	Financial Accounts (FBAR).	40		
c	At any time during the calendar year, did the organization maintain an office outside the United States? . If "Yes," enter the name of the foreign country: ►	42c		<u> </u>
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 —Check here	S 24	а П	
	and enter the amount of tax-exempt interest received or accrued during the tax year	940 (B).	14	
			Yes	No
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be			
Ŀ	completed instead of Form 990-EZ	44a	_	1
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	144		
с	Did the organization receive any payments for indoor tanning services during the year?	44b 44c		1
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an			
	explanation in Schedule O	44d		1
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		\checkmark
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the	2026		
	meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)	451	161	1
-		45b		V

Form	990-	EZ ((2017)
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	90-EZ (2017)						Page
	Did the eventineties are a divertine of					Yes	No
6	Did the organization engage, directly or in	nairectly, in political (campaign activities on	behalf of or in opposi	tion	1000	
	to candidates for public office? If "Yes," of		, Part I		• 46	I	1
aπ	VI Section 501(c)(3) organizations						
	All section 501(c)(3) organization	s must answer que	estions 47-49b and	52, and complete th	e tables t	for lin	es
	50 and 51.		11 520				1.50
	Check if the organization used Sc	hedule O to respond	d to any question in t	his Part VI		6 <u>, 6</u> 24	<u> </u>
_						Yes	No
17	Did the organization engage in lobbying	activities or have a	section 501(h) electio	n in effect during the	tax		
	year? If "Yes," complete Schedule C, Par						1
8	Is the organization a school as described in						1
9a	Did the organization make any transfers to an exempt non-charitable related organization?				. 49a		
20							
b	If "Yes," was the related organization a se	ection 527 organization	on?		. 49b		V
	If "Yes," was the related organization a se Complete this table for the organization's	ection 527 organization five highest comper	on?	er than officers, direct	. 49b ors, truste	es, an	↓ d ke
b	If "Yes," was the related organization a se	ection 527 organization five highest comper	on?	er than officers, direct	. 49b ors, truste	es, an	d ke
b	If "Yes," was the related organization a se Complete this table for the organization's employees) who each received more thar	ection 527 organization five highest comper the \$100,000 of comper (b) Average	on?	er than officers, direct nization. If there is non (d) Health benefits,	. 49b ors, truste e, enter "N	es, an None."	
b	If "Yes," was the related organization a se Complete this table for the organization's	ection 527 organization five highest comper a \$100,000 of comper (b) Average hours per week	on?	er than officers, direct nization. If there is non	. 49b ors, truste e, enter "N (e) Estimate	es, an Vone." ed amou	unt o
b	If "Yes," was the related organization a se Complete this table for the organization's employees) who each received more thar	ection 527 organization five highest comper the \$100,000 of comper (b) Average	on?	er than officers, direct nization. If there is non (d) Health benefits, contributions to employee	. 49b ors, truste e, enter "N (e) Estimate	es, an Vone." ed amou	unt of
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b	If "Yes," was the related organization a se Complete this table for the organization's employees) who each received more thar	ection 527 organization five highest comper a \$100,000 of comper (b) Average hours per week	on?	er than officers, direct nization. If there is non (d) Health benefits, contributions to employee benefit plans, and deferred	. 49b ors, truste e, enter "N (e) Estimate	es, an Vone." ed amou	unt of
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b	If "Yes," was the related organization a se Complete this table for the organization's employees) who each received more thar	ection 527 organization five highest comper a \$100,000 of comper (b) Average hours per week	on?	er than officers, direct nization. If there is non (d) Health benefits, contributions to employee benefit plans, and deferred	. 49b ors, truste e, enter "N (e) Estimate	es, an Vone." ed amou	unt of

\$100,000 of compensation from the organization. If there is none, enter "None."

(a)	Name and business address of each independ	ent contractor	(b) Туре of	service	(c) Cor	npensation

d Total	number of other independent contra	ctors each receiving	over \$100,000 .	. ►		
52 Did comp	the organization complete Schedu pleted Schedule A	le A? Note: All se	ction 501(c)(3) o	rganizations mu	ust attach a	√Yes 🗋 No
Under penalties	of perjury, I declare that I have examined this re d complete. Declaration of preparer (orner than	eturn, including accompany	ving schedules and stat	ements, and to the h	pest of my knowle	
Sign	Signature of officer	_		Date		
Here	Don Hughes - Friends of Fort Clinc Type or print name and title		July 2	2018		
Paid Preparer	Print/Type preparer's name	Preparer's signature		Date	Check if self-employed	PTIN

Firm's name Firm's EIN ► Use Only
 Firm's address ►

 May the IRS discuss this return with the preparer shown above? See instructions
 Phone no. Yes No 4

Preparer

SCHEDULE O (Form 990 or 990-EZ)	Supplemental Information to Form 990 or 990 Complete to provide information for responses to specific questio Form 990 or 990-EZ or to provide any additional information.	ns on	OMB No. 1545-0047
Department of the Treasury Internal Revenue Service	 Attach to Form 990 or 990-EZ. Go to www.irs.gov/Form990 for the latest information. 		Open to Public Inspection
Name of the organization		Employer identific	
Friends of Fort Clinch, Ir	10.	59	-3126070
Line 16: Other Expenses	i		
Cannon Carriage: 9,400	.00		
Program Support - Livin	g History Weekends, Uniforms: 3,706.14		
Kayak Program: 696.84			
Volunteer Support meeti	ngs, hurricane clean-up: 441.30		
Volunteer Laundry Upgr	ades: 1215.00		
Memberships in Chambe	er of Commerce and Friends of FL State Parks: 490.00		
Office supplies, banner,	web fee, stamps: 481.60		
Bottled water and Sutler	y supplies: 791.98		
Kids Fishing Clinic - 638	.47		
Penny Press shared reve	enue & purchase: 3,480.00		
Sales tax: 1,578.50			
Board & District meeting	s & Board name tags/shirts: 936.70		
Utility Vehicle: 11,626.00)		
Materials for Repairs: 3,	117.96		
Civilian Conservation Co	prp Statue Project: 27,886.99		
Rental Costs: 9,425.00			
Bronze Man Race Refund	ds: 612.50		
Bank Fees: 24.73			
TOTAL: \$76,549.71 (Ro	unded to \$76,550 in schedule A)		

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