



Florida Department of Environmental Protection

CITIZEN SUPPORT ORGANIZATION

2015 REPORT

(pursuant to Florida Statute 20.058)

Citizen Support Organization (CSO) Name: Friends of Franklin County State Parks, Inc.

Mailing Address: 1900 E. Gulf Beach Drive, St. George Island, FL 32328

Telephone Number: 850-323-1433 Website Address (if applicable): www.fofcsp.org

Statutory Authority:

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

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

Brief Description of the CSO's Mission:

To generate and employ additional resources and support of and in the best interests of Friends of Franklin County State Parks, Inc. (CSO) through, among other events and activities, the following: special work projects, special programs, special events, outreach programs, aid other CSOs, educational activities and communications, special exhibits, interpretive programs, fund raising activities to seek additional funds to augment the recreation area's existing funding in order to maintain, enhance, and expand the park's services to the public.

Brief Description of the CSO's Results Obtained:

Multiple assistance devices purchased for the use by visitors to the parks (OPDMDs, beach wheelchairs, Mobi-Mat); funding of materials for work projects; funding of interpretive supplies for in-park programs and community outreach; purchasing resale items at all three parks; assisting in Volunteer Appreciation Days in District 1; securing donations and protective household items for the Orman House; participation in community events to raise awareness and donations; kayak and canoe rentals; purchasing items for resale. All of these functions have helped to increase awareness and visitation of the three parks and have assisted in the overall experience by those visitors.

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

Expand memberships and involvement in the community; Continue relationship with Franklin County School; Continue to provide resale items and explore additional opportunities; Assist in John Gorrie Museum enhancements including interpretive displays and landscaping; Continue to support the Orman House and Chapman Botanical Gardens including acquiring additional Orman Family heirlooms and seeds and plants for the gardens; Assist in expansion of interpretive center at St. George Island; Purchase large wooden engraved sign for the Orman House; Continue to maintain kayak and canoe rentals; Continue providing equipment and support for all three locations.

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

Friends of Franklin County State Parks, Inc.
CODE OF ETHICS

PREAMBLE

- (1) It is essential to the proper conduct and operation of Friends of Franklin County State Parks, 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 Franklin County State Parks, 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.

Memorandum

Florida Department of Environmental Protection

TO: Carmen C. McDonald, PPDS
District 1 Administration

FROM: Joshua Hodson, Park Manager
St. George Island State Park

DATE: May 20, 2015

SUBJECT: Friends of Franklin County State Parks, Citizen Support Organization

Dear Carmen,

I would like to take this opportunity to advise you of the accomplishments of the Friends of Franklin County State Parks (FoFCSP) during the abbreviated 2014 fiscal year between July 1-December 31, 2014.

- FoFCSP continue to benefit all of the units managed under the administration of St. George Island State Park; St. George Island State Park, John Gorrie State Museum, Orman House Historic State Park.
- Sales of retail items, ice and firewood and the rental of canoes and kayaks continue to be profitable.
- Two new canoes and supplies were purchased.
- The CSO continues to cover the maintenance costs of the Beach Scoots OPDMD.
- The CSO purchased three stainless steel grill for use at the beach use area pavilions.
- The CSO purchased a sea turtle interpretive sign that was erected at the #8 pulloff near the campground.
- The CSO purchased two toolboxes for the back of two Ford Ranger trucks.
- The CSO purchased materials to assist in the remodeling of the Ranger breakroom.
- The CSO purchased materials to rebuild the canoe and kayak rack.
- The CSO purchased other interpretive supplies including geocaching supplies and reference books.
- The CSO paid for a promotional video for the John Gorrie Museum which was aired at the Florida Inventor's Hall of Fame in Tampa.
- The CSO continues to support the Coffee in the Campground interpretive series and other interpretive programs.
- The CSO continued its partnership with the Franklin County High School Woodshop Class where the CSO purchases the materials and the class builds picnic tables which are used at all three parks.
- The CSO purchased seeds and plants for the Orman House and the Chapman Botanical Gardens.

The CSO continues to care about and enhance all three of our parks. It is filled with concerned and dedicated city and community leaders. Their appreciation of the parks and willingness to contribute will ensure a successful partnership for many years to come.

JH/jh

"More Protection, Less Process"

Printed on Recycled Paper

FRIENDS OF FRANKLIN COUNTY STATE PARKS

1900 EAST GULF BEACH DRIVE

ST. GEORGE ISLAND, FL 32328

PHONE: (850) 927-2111

Joshua Hodson, Park Manager

St. George Island State Park

1900 East Gulf Beach Drive

St. George Island, FL 32328

Dear Joshua,

Attached is the Friends of Franklin County State Parks, Inc. (FoFCSP) annual financial report for the abbreviated fiscal year 2014 from July 1, 2014 through December 31, 2014.

For the abbreviated fiscal year 2014 we received \$13,580 in net sales, \$1,411 in contributions (mostly from donation boxes), \$50 from memberships and \$1,252 in other revenue. We provided the parks with nearly \$33 for maintenance expenses, \$5,785 for visitor service enhancements, and supplied an additional \$4,450 for other miscellaneous projects and expenses.

The FoFCSP are excited about the potential enhancements of the three parks this year. Projects may include but are not limited to: purchasing additional kayaks for rent, continuing the partnership with the Franklin County School woodshop class, establishing an additional ice sales point at Camphost site #35, assisting with boardwalk renovations at the Sugar Hill Beach Use Area in order to accommodate the Beach Scoot electric mobility device, assisting with enhancing and promotion of interpretive efforts at St. George Island, assisting with landscaping and interpretation at the John Gorrie Museum, enhancing the Orman House and with additional signage, and also purchasing plants and supplies for the Chapman Gardens.

We are looking forward to continuing our partnership with St. George Island State Park, the Orman House Historic State Park and the John Gorrie State Museum during fiscal year 2015.

Sincerely,



John Hockman, President

Friends of Franklin County State Parks

Forms 990 / 990-EZ Return Summary

For calendar year 2014, or tax year beginning **07/01/14** , and ending **12/31/14**

**Friends of Franklin County State
Parks Inc.** **13-4211243**

Net Asset / Fund Balance at Beginning of Year		<u>91,494</u>
Revenue		
Contributions	<u>1,411</u>	
Program service revenue	<u>50</u>	
Investment income	<u>48</u>	
Capital gain / loss	<u></u>	
Fundraising / Gaming:		
Gross revenue	<u></u>	
Direct expenses	<u></u>	
Net income	<u></u>	
Other income	<u>13,580</u>	
Total revenue		<u>15,089</u>
Expenses		
Program services	<u></u>	
Management and general	<u></u>	
Fundraising	<u></u>	
Total expenses		<u>12,460</u>
Excess / (deficit)		<u>2,629</u>
Changes		<u>-266</u>
Net Asset / Fund Balance at End of Year		<u><u>93,857</u></u>

Client Copy

Reconciliation of Revenue

Total revenue per financial statements	<u></u>
Less:	
Unrealized gains	<u></u>
Donated services	<u></u>
Recoveries	<u></u>
Other	<u></u>
Plus:	
Investment expenses	<u></u>
Other	<u></u>
Total revenue per return	<u><u></u></u>

Reconciliation of Expenses

Total expenses per financial statements	<u></u>
Less:	
Donated services	<u></u>
Prior year adjustments	<u></u>
Losses	<u></u>
Other	<u></u>
Plus:	
Investment expenses	<u></u>
Other	<u></u>
Total expenses per return	<u><u></u></u>

	Beginning	Ending	Differences
Assets	<u>91,494</u>	<u>93,857</u>	
Liabilities	<u></u>	<u></u>	
Net assets	<u>91,494</u>	<u>93,857</u>	<u>2,363</u>

Miscellaneous Information

Amended return _____

Return / extended due date 05/15/15

Failure to file penalty _____

CHANGE IN ACCOUNTING PERIOD

Form **990-EZ**

Short Form
Return of Organization Exempt From Income Tax
 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-1150

2014

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

A For the 2014 calendar year, or tax year beginning **07/01/14**, and ending **12/31/14**

B Check if applicable:

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

C Name of organization
Friends of Franklin County State Parks Inc.

Number and street (or P.O. box, if mail is not delivered to street address) Room/suite
PO Box 144

City or town, state or province, country, and ZIP or foreign postal code
Eastpoint FL 32328

D Employer identification number
13-4211243

E Telephone number
850-866-5068

F Group Exemption Number ▶

G Accounting Method: Cash Accrual Other (specify) ▶

H Check if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

I Website: ▶ **www.fofcsp.org**

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

K Form of organization: Corporation Trust Association Other

L Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ ▶ \$ **23,068**

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)

Check if the organization used Schedule O to respond to any question in this Part I

		1	2	3	4	5a	5b	5c	6a	6b	6c	6d	7a	7b	7c	8	9	10	11	12	13	14	15	16	17	18	19	20	21					
Revenue	1	Contributions, gifts, grants, and similar amounts received																												1,411				
	2	Program service revenue including government fees and contracts																																
	3	Membership dues and assessments			See Statement																										50			
	4	Investment income																													48			
	5a	Gross amount from sale of assets other than inventory																																
	b	Less: cost or other basis and sales expenses																																
	c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)																																
	6	Gaming and fundraising events																																
	a	Gross income from gaming (attach Schedule G if greater than \$15,000)																																
	b	Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)																																
c	Less: direct expenses from gaming and fundraising events																																	
d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)																																	
7a	Gross sales of inventory, less returns and allowances																															20,307		
b	Less: cost of goods sold																															7,979		
c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)																															12,328		
8	Other revenue (describe in Schedule O)																															1,252		
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 ▶																															15,089		
Expenses	10	Grants and similar amounts paid (list in Schedule O)																														10,358		
	11	Benefits paid to or for members																																
	12	Salaries, other compensation, and employee benefits																																
	13	Professional fees and other payments to independent contractors																																
	14	Occupancy, rent, utilities, and maintenance																																
	15	Printing, publications, postage, and shipping																																15
	16	Other expenses (describe in Schedule O)																															2,087	
17	Total expenses. Add lines 10 through 16 ▶																															12,460		
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)																															2,629	
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)																															91,494	
	20	Other changes in net assets or fund balances (explain in Schedule O)																															-266	
	21	Net assets or fund balances at end of year. Combine lines 18 through 20 ▶																															93,857	

For Paperwork Reduction Act Notice, see the separate instructions.

Form **990-EZ** (2014)

Part II Balance Sheets (see the instructions for Part II)

Check if the organization used Schedule O to respond to any question in this Part II

	(A) Beginning of year		(B) End of year
22 Cash, savings, and investments	91,494	22	93,857
23 Land and buildings	0	23	
24 Other assets (describe in Schedule O)	0	24	
25 Total assets	91,494	25	93,857
26 Total liabilities (describe in Schedule O)	0	26	0
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	91,494	27	93,857

Part III Statement of Program Service Accomplishments (see the instructions for Part III)

Check if the organization used Schedule O to respond to any question in this Part III

Expenses
(Required for section 501(c)(3) and 501(c)(4) organizations; optional for others.)

What is the organization's primary exempt purpose?

See Schedule O

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

28 1) Park Maintenance	(Grants \$ 33) If this amount includes foreign grants, check here <input type="checkbox"/>	28a	33
29 2) Park Equipment	(Grants \$ 4,540) If this amount includes foreign grants, check here <input type="checkbox"/>	29a	4,540
30 3) Enhance Visitor Experience	(Grants \$ 5,785) If this amount includes foreign grants, check here <input type="checkbox"/>	30a	5,785
31 Other program services (describe in Schedule O)	(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	31a	295
32 Total program service expenses (add lines 28a through 31a)		32	10,653

Part IV List of Officers, Directors, Trustees, and Key Employees (list each one even if not compensated — see the instructions for Part IV)

Check if the organization used Schedule O to respond to any question in this Part IV

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
John Hockman President	2.00	0	0	0
Lowell Thomas Treasurer	4.00	0	0	0
Pam Prince Secretary	2.00	0	0	0
Stanley Colvin Director	2.00	0	0	0
Elaine Rosenthal Director	2.00	0	0	0

Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V

33 Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O
34 Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)
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)?
35b If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O
35c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N
37a Enter amount of political expenditures, direct or indirect, as described in the instructions
37b Did the organization file Form 1120-POL for this year?
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?
38b If "Yes," complete Schedule L, Part II and enter the total amount involved
39 Section 501(c)(7) organizations. Enter:
39a Initiation fees and capital contributions included on line 9
39b Gross receipts, included on line 9, for public use of club facilities
40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911; section 4912; section 4955
40b 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
40c Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958
40d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization
40e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T
41 List the states with which a copy of this return is filed
42a The organization's books are in care of
42b 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)? If "Yes," enter the name of the foreign country:
42c At any time during the calendar year, did the organization maintain an office outside the U.S.? If "Yes," enter the name of the foreign country:
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year
44a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ
44b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ
44c Did the organization receive any payments for indoor tanning services during the year?
44d If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O
45a Did the organization have a controlled entity within the meaning of section 512(b)(13)?
45b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)

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46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I

	Yes	No
46		X

Part VI Section 501(c)(3) organizations only

All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51.

Check if the organization used Schedule O to respond to any question in this Part VI

47 Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II

	Yes	No
47		X

48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

48		X
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49a Did the organization make any transfers to an exempt non-charitable related organization?

49a		X
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b If "Yes," was the related organization a section 527 organization?

49b		
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50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

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

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

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

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

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

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

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

Sign Here: *Lowell Thomas* Signature of officer, Date: 5-14-2014, Lowell Thomas Treasurer

Paid Preparer Use Only: Print/Type preparer's name: Ralph C. Roberson CPA, Preparer's signature: *Ralph C. Roberson*, Date: 05/14/15, Check if self-employed, PTIN: P00149032, Firm's name: Roberson & Associates, P.A., Firm's address: 116A Sailors Cove Dr Port Saint Joe, FL 32456-1890, Firm's EIN: 59-3721216, Phone no.: 850-653-1090

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

SCHEDULE A
(Form 990 or 990-EZ)

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.

OMB No. 1545-0047

2014

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization

**Friends of Franklin County State
Parks Inc.**

Employer identification number

13-4211243

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 11, check only one box.)

- 1 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.)
- 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
- 4 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:
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 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).
- 7 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.)
- 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 9 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.)
- 10 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 in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g.
 - a **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, Section A and B.
 - 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.
 - 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.
 - d **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.
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
- f Enter the number of supported organizations
- g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4.						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
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						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

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Section C. Computation of Public Support Percentage

14 Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2013 Schedule A, Part II, line 14	15	%
16a 33 1/3% support test—2014. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
b 33 1/3% support test—2013. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
17a 10%-facts-and-circumstances test—2014. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
b 10%-facts-and-circumstances test—2013. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions <input type="checkbox"/>		

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.
If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	7,042	6,219	7,137	4,065	1,411	25,874
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	18,845	24,494	27,062	21,511	21,609	113,521
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5	25,887	30,713	34,199	25,576	23,020	139,395
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						139,395

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9 Amounts from line 6	139,395	139,395	139,395	139,395	139,395	139,395
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	131	115	97	100	48	491
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	131	115	97	100	48	491
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)	26,018	30,828	34,296	25,676	23,068	139,886

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

Section C. Computation of Public Support Percentage

15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f))	15	99.65%
16 Public support percentage from 2013 Schedule A, Part III, line 15	16	99.50%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2013 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests—2014. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support tests—2013. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.		
4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organization added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990).		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.		
b Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.		
c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.		
10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below.		
b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)		

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Part IV Supporting Organizations (continued)

		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b	A family member of a person described in (a) above?		
c	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.		
		11a	
		11b	
		11c	

Section B. Type I Supporting Organizations

		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		
		1	
		2	

Section C. Type II Supporting Organizations

		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		
		1	

Section D. All Type III Supporting Organizations

		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		
		1	
		2	
		3	

Section E. Type III Functionally-Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):		
a	<input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c	<input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2	Activities Test. Answer (a) and (b) below.		
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	Yes	No
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.		
3	Parent of Supported Organizations. Answer (a) and (b) below.		
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.		
		2a	
		2b	
		3a	
		3b	

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

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

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount		(A) Prior Year	Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions).		

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

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	
4	Amounts paid to acquire exempt-use assets	
5	Qualified set-aside amounts (prior IRS approval required)	
6	Other distributions (describe in Part VI). See instructions.	
7	Total annual distributions. Add lines 1 through 6.	
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9	Distributable amount for 2014 from Section C, line 6	
10	Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1 Distributable amount for 2014 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2014 (reasonable cause required-see instructions)			
3 Excess distributions carryover, if any, to 2014:			
a			
b			
c			
d			
e From 2013			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2014 distributable amount			
i Carryover from 2009 not applied (see instruction)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2014 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2014 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2014, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions).			
6 Remaining underdistributions for 2014. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions).			
7 Excess distributions carryover to 2015. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a			
b			
c			
d Excess from 2013 . . .			
e Excess from 2014 . . .			

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SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

2014

Open to Public Inspection

▶ Attach to Form 990 or 990-EZ.

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

Department of the Treasury
Internal Revenue Service

Name of the organization

**Friends of Franklin County State
Parks Inc.**

Employer identification number

13-4211243

Form 990-EZ, Part I, Line 8 - Other Revenue

Description	Amount
Sales from vending machines	\$ 1,252
Total	\$ 1,252

Form 990-EZ, Part I, Line 10 - Grants

Name and Addresses of grant donees:

St George Island State Park located on St. George Island FL;
Orman House, John Gorrie Museum, Chapman Botanical Garden, and
Three Servicemen Plaza, all located in Apalachicola, FL.

Date of Gifts: July - December 2014; Desc. of Property and

Class of Activity provided in the supplemental sheet (Cont'd) listing
specific grants provided. Summary information provided below:

Total of the grants provided: \$10358 - (See supplemental sheet for
further breakdown of the grants particulars).

Form 990-EZ, Part I, Line 16 - Other Expenses

Description	Amount
Sale of Inventory	
Sales taxes	\$ 1,373
Expenses	
Office supplies	\$ 146
Website	\$ 295
Merchant fees	\$ 273
Total	\$ 2,087

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Name of the organization

Friends of Franklin County State

Employer identification number

13-4211243

Form 990-EZ, Part I, Line 20 - Other Changes in Net Assets or Fund Balances

Description

Amount

Prior year balance correction	\$ -266
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Form 990-EZ, Part III - Primary Exempt Purpose

Raise funds to support the Franklin County, Florida State Parks.

Supplement the Park's operating budgets.

1) Park Maintenance

2) Park Equipment

Form 990-EZ, Part I, Line 10 - Grants (additional details by specific item)

Class of Activity: Park Maintenance

Kayak repairs	\$33	Subtotal Park Maintenance	\$33
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Class of Activity: Park Equipment purchased

2x Truck Tool Boxes	\$500;	Padlocks	\$272;
---------------------	--------	----------	--------

Volunteer Uniforms	\$514;	Miscellaneous	\$58;
--------------------	--------	---------------	-------

Building Materials	\$3196
--------------------	--------

Subtotal Park Equipment	\$4540
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Class of Activity: Visitor Experience Enhancements

Interpretive Books	\$339;	Interpretive supplies	\$112;
--------------------	--------	-----------------------	--------

Refreshments	\$161;	3x Metal Grills	\$1332;
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2x Canoes	\$2296;
-----------	---------

Sea Turtle Signage	\$1045;
--------------------	---------

Gorrie Museum video	\$500
---------------------	-------

Subtotal Visitor Enhancements	\$5785
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Federal Statements

Form 990-EZ, Part I, Line 3 - Membership Dues and Assessments

<u>Description</u>	<u>Amount</u>
Membership dues	\$ 50
Total	<u>\$ 50</u>

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FRFCOSTPARK Friends of Franklin County State
13-4211243
FYE: 12/31/2014

Federal Statements

Schedule A, Part III, Line 1(e)

Description	Amount
Contributions	\$ 1,411
Total	\$ 1,411

Schedule A, Part III, Line 2(e)

Description	Amount
Membership dues	\$ 50
Sales from vending machines	1,252
Sale of Inventory	20,307
Total	\$ 21,609

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Schedule A, Part III, Line 1(e)

Description	Amount
Total	\$ 48
	\$ 48

Citizen Support Organization Statement of Accomplishments and Goals

This statement is part of the Citizen Support Organization's (CSO's) Annual Financial Report (see Chapter 5: Section 7) of the 2014 CSO Handbook. The primary purpose of the Annual Financial Report is to provide a summary of the most relevant information to the Department and Division, and to meet the common interests of donors, members, creditors, and others who provide resources to the not for profit organization. Report the accomplishments for the CSO's past fiscal year and goals for the upcoming year.

Name of the CSO Friends of Franklin County State Parks, Inc.

CSO Address P.O. Box 144, Apalachicola, FL 32320

A summary of CSO accomplishments from the period of July 1 through December 31, 2014 is as follows:

Estimated Total Volunteer Hours 200 **Total Membership** 57

List of CSO Board Members

John Hockman, President
1033 East Gorrie Drive, St. George Island, FL 32328
(256) 453-4117
jehockman@gmail.com

Lowell Thomas, Treasurer
P.O. Box 968, Apalachicola, FL 32320
(850) 866-5068
ldthomas@coasttocoastresearch.com

Pamela Prince
465 West Pine Ave., St. George Island, FL 32328
pprince@mchsi.com

Stanley Colvin, Board Member
824 West Bayshore Drive, St. George Island, FL 32328
(850) 559-1263
scolvin@fairpoint.net

Elaine Rosenthal
225 West 8th. Street, St. George Island, FL 32328
(850) 323-1008
elaine@mchsi.com

Summary of Accomplishments

- Sales of retail items, firewood and ice have been profitable.
- Rentals of the kayaks and canoes are still well received and profitable.
- Snack and soda machines at each of the beach use areas are profitable.
- The CSO is still covering the costs of maintaining the Beach Scoots.
- The CSO covered the costs of the Coffee in the Campground interpretive series and other interpretive programs.
- Continuation of an annual project with the Franklin County High School woodshop class where the CSO purchases the supplies, the woodshop class builds picnic tables which are used at all three parks.
- Purchased two canoes for rentals
- Purchased two tool boxes for Ford Ranger trucks
- Purchased building materials for Ranger Break room and a new kayak/canoe rack
- Purchased a sea turtle interpretive sign for #8 pull off
- Paid for John Gorrie Museum promotional video
- Purchased interpretive supplies including books, coffee in the campground supplies, and geocaching supplies
- Purchased three stainless steel grills for the beach use area pavilions
- Netted \$13,580 in merchandise sales, kayak rentals, firewood and ice sales.
- Received \$1,411 in donations.
- Received \$50 from membership dues.
- Provided the parks with \$33 for maintenance expenses, \$4,450 on equipment and \$5,785 on Visitor Service enhancements.

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

- Become more involved in the community.
- Continue to collect contributions from CSO members and park visitors.
- Expand membership.
- Continue to expand CSO sponsored programs.
- Continue partnership with Franklin County School woodshop class.
- Continue to expand support for all units managed by St. George Island State Park.
- Continue to sell firewood, ice, merchandise and renting kayaks and canoes at St. George Island.
- Add additional ice sales point at campsite #35
- Pay for ramp modifications at Sugar Hill Beach Use Area in order to accommodate new electric mobility device.
- Assist in enhancements of John Gorrie Museum displays.
- Assist in landscaping plans at the John Gorrie Museum in cooperation with the Trinity Church.
- Enhance wedding potential at the Orman House
- Develop and purchase a large sign for the front lawn of the Orman House State Park.
- Continue to purchase plants, soil and seeds for the Chapman Botanical Gardens.
- Assist with development and installation of a carnivorous plant garden within Chapman Gardens.
- Replace 1/2 of kayaks each year
- Purchase 300 feet of Mobi-Mat to be installed at the #8 pull off near the campground.

Citizen Support Organization Statement on Value of Contributed Services

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

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

Park Name: St. George Island/John Gorrie Museum/Orman House

Park Address: 1900 E. Gulf Beach Drive, St. George Island, FL 32328

Name of the CSO: Friends of Franklin County State Parks, Inc.

A summary of contributed services from the period of July 1, 2014 through December 31, 2014 is as follows:

Park Staff Support

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

The park contributed a total of \$ 4,704.37 in staff support services to the CSO.

Park Facilities Support

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

The CSO received a total of \$ 0 in park facilities support.

In-Kind Support

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

The CSO received a total of \$500 in in-kind support services.

List of Program Services

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

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

Program Service Description: Coffee in the Campground and other interpretive programs supplies; 34 weekly programs given serving 855 visitors.

Total Expense \$451.00
Total Revenue \$0.00

Program Service Description: John Gorrie Museum State Park promotional video. Video shown at the Florida Inventor's Hall of Fame and shared on website and Facebook.

Total Expense \$500.00
Total Revenue \$0.00

Program Service Description: _____

Total Expense \$0.00
Total Revenue \$0.00

Program Service Description: _____

Total Expense \$0.00
Total Revenue \$0.00

Program Service Description: _____

Total Expense \$0.00
Total Revenue \$0.00

Total Program Services

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

CSO total program service expenses \$951.00
CSO total program service revenues \$0.00