Florida Department of Environmental Protection

CITIZEN SUPPORT ORGANIZATION 2019 LEGISLATIVE REPORT

(pursuant to Section 20.058 Florida Statutes)

	anization (CSO) Name: 12087 SW U.S. Highway	FRIENDS OF ICHETUCKNEE SPRINGS STATE PARK 27, Fort White, FL 32038
Telephone Number:	_(386) 961-9538	Website Address (if applicable):
Statutory Authority Section 20.2551, F.S.		ons; use of property; audit; public records; partnerships. In

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.

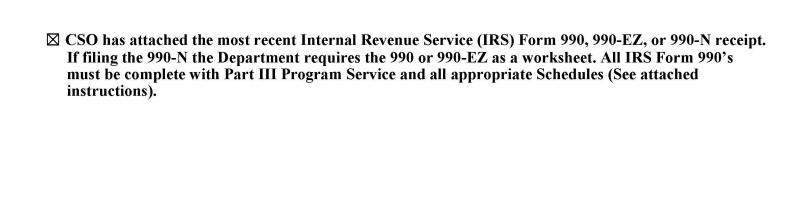
Section 258.015, F.S., Citizen support organizations, use of property; audit. In summary, the statute defines a CSO, requires authorization by the Division of Recreation and Parks, and specifies the use of property. This statute authorizes the Partnerships in Parks (PIP) program for state parks, the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

CSO's Mission: Consistent with Articles and Bylaws CSO is organized and operated for the purpose of conducting programs and activities; raising funds; request and receive grants, gifts and bequests of monies; acquiring, receiving, holding, investing, and administering, in its own name, securities, funds, objects of value, or other property, real or personal; and making expenditures to or for the direct or indirect benefit of the state park system or Ichetucknee Springs State Park.

Description of the CSO's Results Obtained: Expand section as necessary to be complete

Increased membership through public outreach activities at local Chamber of Commerce and other venues. Redesigned the CSO Brochure to publicize programs and promote membership growth. Purchased equipment for park use. Promoted tubing season in conjunction with the park concessionaire. Launched a new Facebook page to promote activities and build membership. Promoted "Iche-Nippy Dip Day" with great success. Attended O'Leno Chili Cook Off with membership drive activities. Established 'Work Saturdays' to assist park staff with projects and park cleanup. Established "Water Lettuce Wednesdays" to assist with the park's management of Water lettuce. Actively seeking funding for capital improvement projects.

Description of the CSO's Plans for the Next Three Fiscal Years: Expand section as necessary to be complete Continue to build membership and promote volunteerism. Seek funding for capital improvement projects. Continue to support park events and the LIFE program. Continue to promote and establish park events to drive visitation during off peak seasons.



Friends of Ichetucknee Springs CSO Code of Ethics

FRIENDS OF ICHETUCKNEE SPRINGS STATE PARK CODE OF ETHICS

PREAMBLE

- (1) It is essential to the proper conduct and operation of Friends of Ichetucknee Springs State Park (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 Ichetucknee Springs State Park 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.

Friends of Ichetucknee Springs CSO Code of Ethics

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.

6/14/2019F

e Fostcard View F

Electronic NoticeRe-Postcerd) F

OMB No. 1545 2085

Department of the Treasury Internal Revenue Service F for Tex-Exempt Organization not Required to File Form 800 or 990-EZ F

2018

Open to ublic inspection F

A. or the 2016 Calendar year, or tax year beginning 2016-01-01 and ending 2016-12-31 F

F

B Check if evaligible
Terminated for Business

Proces receipts are normally \$50,000 or laws F

C Name of Organization: <u>FRIENDS OF ICHEHUCIONEE</u> F SPRINGS CITIZENS SUPPORT ORGANIZATION FOR D Employee Identification F Number <u>68-3488844</u>

6732 SW County Road 248, Leke City, FL, US, 32924

E Website: F

F Name of Principal Officer: Imme Johannesen F 8732 SW County Road 248,

Leke City, FL, US, 32825

Privacy Act and Peperwork Reduction Act Notices Welesk for the information on this form to carry out the Internal Revenue lews of the United States. F You are required to give us the information. We need it to ensure that you are complying with these lews. F

The organization is not required to provide information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a F valid CMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the F administration of any internal Revenue law. The rules governing the confidentiality of the Form 990-N is covered in code section 8104. F

The time needed to complete and file this form and related schedules will very depending on the inclvidual circumstances. The estimated everage times F is 16 minutes.

Note: This image is provided for your records only. Do Not mall this page to the IRS. The IRS will not accept this filling via paper. You must file F your Form \$80 N (a Postcard) electronically. F

WOBKING COPY

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)

2018

OMB No. 1545-1150

Department of the Treasury Internal Revenue Service ▶ Do not enter social security numbers on this form as it may be made public.
 ▶ Go to www.irs.gov/Form990EZ for instructions and the latest information.

Open to Public Inspection

A F	or the	2018 calend	ar year, or tax year beginning , 2018, ar	nd ending			, 20		
_	PARK COTTON				D Emp	Employer identification number			
	Address c	Friends of Ichetucknee Springs State Park				59-3480044			
						Telephone number			
	nitial retu	m	12087 SW U.S. Highway 27			386-961-9538			
	Final return/terminated City or town, state or province, country, and ZIP or foreign postal code					F Group Exemption			
	Amended	return on pending	Fort White, FL 32038		Nur	Number >			
S		ting Method:	Cash Accrual Other (specify)	Н	Check	▶ ☐ if the	organization is not		
	/ebsite	Control of the Contro				to attach			
			eck only one) — ☐ 501(c)(3) ☐ 501(c) () ◀ (insert no.) ☐ 4947(a)(1) or	527			, or 990-PF).		
			: Corporation Trust Association Other		-				
LA	dd lino	organization	7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or mo	ore, or if tota	assets				
(Par	t II col	umn (B)) are	\$500,000 or more, file Form 990 instead of Form 990-EZ			► s			
_	Service West Control		ie, Expenses, and Changes in Net Assets or Fund Balance				Part I)		
P	art I	Charlei	the organization used Schedule O to respond to any question in	this Part I	motru	0.10110 101	П		
_	-		ons, gifts, grants, and similar amounts received			1	1,255		
	1	Contributi	ons, gitts, grants, and similar amounts received			2	1,200		
	2		ervice revenue including government fees and contracts			3	415		
	3		nip dues and assessments			4	2		
	4	Investmen				7			
	5a		ount from sale of assets other than inventory 5a		_				
	b	Less: cost	or other basis and sales expenses	F-A	-	F-			
	C		5c						
	6	Gaming and fundraising events:							
as	а	Gross income from gaming (attach Schedule G if greater than							
Ž					-2	-			
Revenue	b	Gross inc	office from farial and fine fine fine fine fine fine fine fine	contributio	ns				
Re		from fund	raising events reported on line 1) (attach Schedule G if the						
			ch gross income and contributions exceeds \$15,000) 6b						
	C	Less: dire	ct expenses from gaming and fundraising events 6c	01	L C				
	d		ne or (loss) from gaming and fundraising events (add lines 6a and	6b and su	btract	form.			
		line 6c)				6d			
	7a	Gross sale	es of inventory, less returns and allowances						
	b	Less: cos	t of goods sold						
	C		fit or (loss) from sales of inventory (Subtract line 7b from line 7a) .			7c			
	8		enue (describe in Schedule O)			8			
_	9		enue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8			9	1,672		
	10		d similar amounts paid (list in Schedule O)			10			
	11		aid to or for members			11			
Ses	12		other compensation, and employee benefits			12			
SLIS	13		nal fees and other payments to independent contractors			13	125		
cbe	14		cy, rent, utilities, and maintenance			14			
Expens	15		oublications, postage, and shipping			15	1,269		
	16	Other exp	enses (describe in Schedule O)	1 1 1 1		16	478		
	17	Total exp	enses. Add lines 10 through 16		. >	17	1,872		
S	18		(deficit) for the year (Subtract line 17 from line 9)			18	-200		
Set	19		s or fund balances at beginning of year (from line 27, column (A))						
As		2	ar figure reported on prior year's return)			19			
Net Assets	20	Other changes in net assets or fund balances (explain in Schedule O)			20				
	21	Net asset	s or fund balances at end of year. Combine lines 18 through 20 .			21	-200		

Par	Balance Shee	ts (see the instructions t	for Part II)			_	1 090 2
		anization used Schedule		ny question in this F	Partll		🗆
					A) Beginning of year		(B) End of year
22	Cash, savings, and in	vestments				22	4,104
23	Land and buildings.					23	309
24	Other assets (describ	e in Schedule O)				24	
25	Total assets				300000	25	
26	Total liabilities (desc	ribe in Schedule O)				26	
27		alances (line 27 of column				27	4,413
Part		Program Service Accom			37 17 17 15 15 15 15 15 15 15 15 15 15 15 15 15		2010-00-00-00-00-00-00-00-00-00-00-00-00-
		ganization used Schedule	O to respond to a	ny question in this F	Part III	/Das	Expenses
What	is the organization's pr	imary exempt purpose?		W4 - 215			uired for section c)(3) and 501(c)(4)
as m	easured by expenses.	program service accompli In a clear and concise ma relevant information for ea	anner, describe the	f its three largest preservices provided,	ogram services, the number of	orga	inizations; optional for ers.)
28						*	
	(Grants \$) If this amount	includes foreign gra	ants, check here .	▶ 🗆	28a	t .
29			***************************************				12
			**************	· · · · · · · · · · · · · · · · · · ·			

22	(Grants \$) If this amount	includes foreign gra	ants, check here .	🕨 🗆	29a	1
30							
	/O	V 16 18 2				00-	
	(Grants \$			ints, check here .		30a	<u> </u>
31		(describe in Schedule O)				04	
20	(Grants \$	expenses (add lines 28a	includes foreign gra	ants, check here .		31a	
Par		Directors, Trustees, and Ke				30,000	
Tire in		ganization used Schedule					
3		30.0000	(b) Average	(c) Reportable	(d) Health benefits,	1	
	(a) Name	and title	hours per week devoted to position	compensation (Forms W-2/1099-MISC) (If not paid, enter -0-)	contributions to employ benefit plans, and deterred compensation	1.	Estimated amount of other compensation
Irene	Johannesen				V		
Presi	dent		4				
	ca Morrow					70.00	
Vice	President		4				
Patri	cia Burke				- 300.2		
Secre	etary		4			+	
Lori					100		
Treas			4			-	
	Sinclare						
	d member		4			+	
	Barnard						
Boar	d member		4				
_						+	
*******		***************************************					
7						1	
*****	***************************************						
-						1	
			1				
						1	3 45
			1			-	

Part	Other Information (Note the Schedule A and personal benefit contract statement requirements instructions for Part V.) Check if the organization used Schedule O to respond to any question in this	in the Part	e V.	П
-	Instructions for Part V.) Check if the organization used defreduce of to respond to dry question in the		Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33		1
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O. See instructions	34		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		1
С	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c		1
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		1
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a	Test.		TEACH.
ь	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 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	If "Yes," complete Schedule L, Part II and enter the total amount involved			55
39	Section 501(c)(7) organizations. Enter:	274	1	100
а	Initiation fees and capital contributions included on line 9	150		133
b	Gross receipts, included on line 9, for public use of club facilities	-		1.78
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ ; section 4912 ▶ ; section 4955 ▶;			
	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
C	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization		, 4	
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		1
41	List the states with which a copy of this return is filed ▶			
42a	The organization's books are in care of ▶ Telephone no. ▶			
la.	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		Ves	No
b	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 ▶		-75	Salk!
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		Way .	
С	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		
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		i.	
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a	Yes	No.
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b		1
С	Did the organization receive any payments for indoor tanning services during the year?	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	+	1
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of	NET		
	Form 990-EZ. See instructions	45b		1

orm 990	-EZ (20	118)								Page 4	
									Yes	No	
46	Did th	e organization engage, directly or inc	directly, in political of	campaign activities	on behal	f of or i	in oppositi	ion 📗			
1		ndidates for public office? If "Yes," co		, Part I				. 4	16	1	
Part V	- ;	Section 501(c)(3) Organizations All section 501(c)(3) organizations 50 and 51. Check if the organization used Sch	must answer que				nplete the	table	s for lir	nes	
		offeck if the organization used out	edule o to respond	a to any question	11 011010				Yes	No	
	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								17	1	
	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E								8	1	
		e organization make any transfers to		Marie Marie Company of the Company o					9a	1	
b	If "Ye	s," was the related organization a sec	ction 527 organizati	on?					9b	1	
50	Comp	lete this table for the organization's f	ive highest comper	sated employees (other tha	n office	rs, directo	rs, trus	stees, a	nd key	
	emplo	oyees) who each received more than	\$100,000 of compe	nsation from the or				e, enter	"None.		
	(a) Name and title of each employee		(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MI	contril	henefit plans and deferred		(e) Estin	Estimated amou other compensati		

					+						
			2								
51	Comp	number of other employees paid ove plete this table for the organization's 000 of compensation from the organ	five highest comp	ensated independ	ent contr	actors				e thar	
	(a)	Name and business address of each independe	ent contractor	(b) Type of	(b) Type of service			Compen	sation		
				-		_					
*******					<u> </u>						
				-							
			***************************************	_							
d	Total	number of other independent contra	ctors each receiving	over \$100,000 .							
52	Did t	he organization complete Schedul		ection 501(c)(3) o	rganizatio			ı a .▶□ \	/es 🗌	No	
Inder ne	nalties	of perjury, I declare that I have examined this red d complete. Declaration of preparer (other than	etum, including accompa	nying schedules and sta	tements, an	d to the b	est of my kn	owledge	and belie	f, it is	
Sign	Signature of officer					Date					
Here		Type or print name and title						-			
Paid		Print/Type preparer's name	Preparer's signature		Date Check if self-employed				IN		
Prepa											
Use C	אוחל	Firm's address ▶									

May the IRS discuss this return with the preparer shown above? See instructions

► ☐ Yes ☐ No

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. 2018

Employer identification number

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990 or 990-EZ.

Form 990 for the latest information.

59-348004 Friends of Ichetucknee Springs State Park Line 15: Books and subscriptions \$157.00 Printing and copying \$335.00 Supplies \$778.00 Line 16: Park equipment \$411.00 Travel and meeting \$66.00