

### Florida Department of Environmental Protection

### CITIZEN SUPPORT ORGANIZATION 2019 LEGISLATIVE REPORT

(pursuant to Section 20.058 Florida Statutes)

Citizen Support Organization (CSO) Name: Friends of the Little Manatee River Park, Inc.
Mailing Address: 215 Lightfoot Road Wimauma, Fl. 33598
Telephone Number: 813-841-4218 Website Address (if applicable): friendsofthelittlemanatee.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.
CSO's Mission: Consistent with Articles and Bylaws
To improve and promote the Little Manatee River State Park.
Description of the CSO's Results Obtained: Expand section as necessary to be complete
During the last fiscal year, the CSO has achieved its mission by holding several events which have raised funds to directly improve the park and its operations. These events have helped to improve attendance in the park and improved the visitor experience.
Description of the CSO's Plans for the Next Three Fiscal Years: Expand section as necessary to be complete
We will continue to hold special events to raise funds to be used to improve the park. We will work with park staff to develop and fund programs to raise community awareness and use of the park while helping to preserve the resource.
<ul> <li>□x CSO's Code of Ethics is attached, and if the CSO has a website the code of ethics is posted conspicuously.</li> <li>□x CSO has attached the most recent Internal Revenue Service (IRS) Form 990, 990-EZ, or 990-N receipt. If filing the 990-N the Department requires the 990 or 990-EZ as a worksheet. All IRS Form 990's must be complete with Part III Program Service and all appropriate Schedules (See attached instructions).</li> </ul>

# Friends of the Little Manatee River Park, Inc. CODE OF ETHICS

#### **PREAMBLE**

- (1) It is essential to the proper conduct and operation of Friends of the Little Manatee River 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 the Little Manatee River 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.

#### Form 990-N

#### **Electronic Notice (e-Postcard)**

OMB No. 1545-2085

Department of the Treasury Internal Revenue Service

for Tax-Exempt Organization not Required to File Form 990 or 990-EZ

2018

D Employee Identification

Number <u>59-3442343</u>

Open to Public Inspection

A For the 2018 Calendar year, or tax year beginning 2018-01-01 and ending 2018-12-31

B Check If available

Terminated for Business
Gross receipts are normally \$50,000 or less

C Name of Organization: FRIENDS OF LITTLE MANATEE

RIVER PARK INC

18001 S US HIGHWAY 301, WIMAUMA, FL, US, 33598

E Website:

FriendsoftheLittleManatee.org

F Name of Principal Officer: Brian E Ruddefroth

18001 S US HIGHWAY 301, WIMAUMA, FL, US, 33598

Privacy Act and Paperwork Reduction Act Notice: We ask for the information on this form to carry out the Internal Revenue laws of the United States. You are required to give us the information. We need it to ensure that you are complying with these laws.

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 valid OMB 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 administration of any Internal Revenue law. The rules governing the confidentiality of the Form 990-N is covered in code section 6104.

The time needed to complete and file this form and related schedules will vary depending on the individual circumstances. The estimated average times Is 15 minutes.

Note: This image is provided for your records only. Do Not mall this page to the IRS. The IRS will not accept this filing via paper. You must file your Form 990-N (e-Postcard) electronically.

# 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

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.

ini	ternal Rev	venue Service	► Go to www.irs.gov/Form990EZ for instructions and the latest in	formation.		Inspection				
A	For th	e 2018 calenda	ar year, or tax year beginning , 2018, and en			00				
		applicable:		, 20 D Employer identification number						
	Address	s change		-344234						
	Name c		Friends of the Little Manatee River Park, INc.  Number and street (or P.O. box, if mall is not delivered to street address) Room/	suite E Tol	E Telephone number					
$\vdash$	Initial re		L 10							
-	1	lum/terminaled ed return			841-4218					
E	Contract Con	ion pending	City or town, state or province, country, and ZIP or foreign postal code Wirnauma, Florida 33598		oup Exem <sub>l</sub>	otion				
G		nting Method:			ımber 🕨					
	Websit		✓ Cash			ne organization is <b>no</b>				
			ALC TO THE PROPERTY OF THE PRO			h Schedule B				
K	Form	f organization:		7 (Form	990, 990-E	Z, or 990-PF).				
L	Add line	es 5b. 6c. and 1	☐ Corporation ☐ Trust ☐ Association ☐ Other							
(Pa	art II. co	olumn (B)) are \$	7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or 500,000 or more, file Form 990 instead of Form 990-EZ	if total asset	S					
III:	art I	Revenue	Expenses and Observation 1990-EZ	×. × × ×	▶ \$					
Har.	21117	Chook if	e, Expenses, and Changes in Net Assets or Fund Balances (se	e the instru	actions fo	or Part I)				
-	1 1	Contribution	the organization used Schedule O to respond to any question in this	Part I		🛭				
	1	Contributio	ns, gifts, grants, and similar amounts received .		1	714.05				
	2	Program se	rvice revenue including government fees and contracts		2					
	3	Membershi	o dues and assessments .	# # F W	3	160.00				
	4	Investment	income	8 8 8 88	4					
	5a	Gross amou		100						
	b	Less: cost of		2000						
	C	Gain or (los:	0.000.000.00	5c						
	6	Gaming and fundraising events:								
đ	а	Gross income from gaming (attach Schedule G if greater than								
n			\$15,000)							
Revenue	b									
Ä		from fundra		1000						
			gross income and contributions exceeds \$15,000)   6b	11089.62	2					
	C	Less: direct	7887.87	1710/03000						
	d	Net income	d subtract	100000						
	1	line oc)		6d	3201.75					
	7a	Gross sales	of inventory, less returns and allowances	5281.47	The state of the s	0201.70				
	b	Less: cost o	f goods sold	3756.60	100 A 2000 P					
	C	Gross profit	or (loss) from sales of inventory (Subtract line 7b from line 7a)	2 ID 25 BI	7c	1524.87				
	8	Other revenu	ue (describe in Schedule O)		8	1015.00				
	9	I otal reveni	ue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8		9	6615.67				
	10	Grants and s	similar amounts paid (list in Schedule O)		10	0013.01				
	11	Benefits paid	to or for members		11					
es	12	Salaries, oth	er compensation, and employee benefits		12					
SU:	13	Professional	fees and other payments to independent contractors		13					
Expenses	14	Occupancy,	rent, utilities, and maintenance	5 5 5 N	14					
ш	15	Printing, pub	lications, postage, and shipping	1 5 5 5						
	16	Other expens	9 9 3 3	15	2000 44					
	17	Total expen	ses (describe in Schedule O)		16	3090.41				
S	18	Excess or (de	eficit) for the year (Subtract line 17 from line 9)		17	3090.41				
Net Assets	19	iver assets o	ir fund balances at beginning of year (from line 27, column (A)) (must s	aroo with	18	3525.26				
ASS		end-of-year t	igure reported on prior year's return)	gree with	9101/gs					
et	20	Other change	es in net assets or fund balances (explain in Schedule O) .		19					
Z		Net assets of	8 885 BE DE	20						
		, 200010 01	fund balances at end of year. Combine lines 18 through 20		21					

P	art II	Balance Sheets (see the instruction	is for Part II)				Page
		Check if the organization used Sched	ule O to respond to	any question in thi	e Part II		
00				- 7 december in the	(A) Beginning of year	-	(B) End of year
22 23	Cas	h, savings, and investments	* * * * * * * *		23961.22		27486.4
24	Land	d and buildings	* * * * * * * *		10001122	23	21400,4
25	Total	er assets (describe in Schedule O)		* * * 1 * 5		24	
26	Tota	al assets .	5 5 5 5 10 (6) (6)	* * * * * *		25	
27	Not	Il liabilities (describe in Schedule O)				26	-
-	rt III	assets or fund balances (line 27 of colur	nn (B) must agree w	ith line 21)		27	27486.4
		Statement of Program Service Acco	mplishments (see	the instructions for	Part III)		
Wha	at is the	Check if the organization used Schedu organization's primary exempt purpose?	To support and leave	any question in this	s Part III	(D.	Expenses
Des	cribe th	e organization's program and	To support and impi	ove the Little Manatee	River State Park	501(c	ired for section (3) and 501(c)(4)
as r	neasure	e organization's program service accomp d by expenses. In a clear and concise refited, and other relevant information for	dishments for each	of its three largest	program services,	organ	izations; optional for
pers	ons ber	refited, and other relevant information for	each program title	ne services provide	d, the number of	others	s.)
28							T
	Held se	veral fundraising events to provide funds for ne	eded park improvemen	and support Over 6	700		
	people	attended the events and gained an increased a	ppreciation for the park	na and support. Over s		14	
	(Grants	\$\$ ) If this amou	nt includes foreign g	ants check here		00	W000 00
29		AND STATE AND A SECURITION OF				28a	7887.87
	Provide	materials and support for park community outr	each programs to incre	ase awareness of the	park.		
		o people attended these programs.	***********				
20	(Grants	\$ ) If this amour	it includes foreign gr	ants, check here	<b>I</b>	29a	86.55
30	Disast					234	00.55
	Direct si	upport for park operational needs, trail mainten	ance, equipment and in	frastructure repair and	enhancement		
					2223		
31	(Grants		t includes foreign gr	ants, check here .	▶□	30a	2711.81
01	(Grants	rogram services (describe in Schedule O)		• • • • • • • • • • • • • • • • • • •	91 St 81 St 55		
32	Total p	ogram service expenses (add lines on				31a	
Part	IV	rogram service expenses (add lines 28a	through 31a)		🕨	32	10686.23
		ist of Officers, Directors, Trustees, and Ke Check if the organization used Schedule	ey Employees (list eac	n one even if not com	pensated—see the ins	struction	ons for Part IV)
			(b) Average	(c) Reportable	(d) Health benefits.		
		(a) Name and title	hours per week	compensation	contributions to employee	(e) Es	timated amount of
2 1 5			devoted to position	(Forms W-2/1099-MISC) (if not paid, enter -0-)	benefit plans, and deferred compensation	othe	er compensation
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Pa	Other Information (Note the Schedule A and personal benefit contract statement requirement instructions for Part V.) Check if the organization used Schedule O to respond to any question in this	s in this Part	ne .	age
33	Did the organization engage in any significant activity not previously reported to the IRS2 If "Yes" provide a		Yes	No
34	detailed description of each activity in Schedule O .  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		,
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		\ \ \
b	If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No." provide an explanation in Schedule O	35b		
	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 pet assets	330		
37a	during the year? If "Yes," complete applicable parts of Schedule N  Enter amount of political expenditures, direct or indirect, as described in the instructions ▶   37a	36		1
b	Did the organization file Form 1120-POL for this year?	37b		1
38a	any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a		<b>V</b>
b	If "Yes," complete Schedule L, Part II and enter the total amount involved	II.S.L.II.	ET YO	
39 a	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on line 9			
b	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 ►			
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		
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, 4955, and 4958	400		
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization			
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 ▶	100		v
42a	control of the	313-841		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over	335	98 Yes	Na
	a infancial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b	103	<b>√</b>
	If "Yes," enter the name of the foreign country ►  See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and			
	Financial Accounts (FBAR).			
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	8380112	SKIPS)
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>v</i> 👀	. •	
44a	The state of the s		Yes I	No
	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a		
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	44a 44b		\ \ \
d	Did the organization receive any payments for indoor tanning services during the year?  If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	44c		<u>/</u>
15a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	44d 45a		<u></u>
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 Form 990-EZ. See instructions			
		45h		-

46	Did the organization engage, directly or to candidates for public office? If "Yes,"	indirectly, in political	campaign activities of	n behalf of or in oppos	sition	Yes	No
Part	Section 501(c)(3) Organization	ns Only		<u> </u>			1
	All section 501(c)(3) organizatio 50 and 51.				he tables t	or lin	es
	Check if the organization used So	chedule O to respor	d to any question in	this Part VI			
47						Yes	No
	Did the organization engage in lobbying year? If "Yes," complete Schedule C, Pa	g activities or have a irt II	section 501(h) election	on in effect during the	tax :		
48	Is the organization a school as described	in section 170/b)(1)(A)	(ii)2 If "Voo." an and let	Schodule E	47		1
49a	of an and organization make any transfers	TO an exempt non-ch	aritable valeted	zation?	. 48 . 49a		1
b 50							
0.0000000	Complete this table for the organization's employees) who each received more that	s five highest comper n \$100,000 of compe			tors, truster	es, an	d ke
		(b) Average		(d) Health benefits.	ie, enter "N	one."	
	(a) Name and title of each employee	hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	contributions to employee benefit plans, and deferred compensation	(e) Estimate other com		
	***************************************						
						-	
	1.	<del>j</del>					
******	····						
	otal number of other employees paid over						
\$	Complete this table for the organization's 100,000 of compensation from the orga (a) Name and business address of each independ	The state of the s	ensated independent one, enter "None."  (b) Type of services		received r		than ——
*****	***************************************						_
*******						-	
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d To	otal number of other independent contract	ctors each receiving o	over \$100,000			-	
_ 0	d the organization complete Schedule	e A? <b>Note</b> : All sec	ction 501(c)(3) organi	zations must attach	а	-	- 2
der pena	Ities of periupy I declare that I have	E 6 0 2 74 . S	· · · · · · · · · · · · · · · · · · ·			☐ No	
, correct	Ities of perjury, I declare that I have examined this re t, and complete. Declaration of preparer (other than of	tum, including accompanyi officer) is based on all infor	ng schedules and statement nation of which preparer has	s, and to the best of my kno	wledge and be	elief, ít i	S
gn	100	1		sary morninge.			
re	Signature of officer			Date	, ,		_
	Brian E. Ruddeforth Treasurer Type or print name and title			7-7-1	9		
id epare	Print/Type preparer's name	Preparer's signature	Date	Check [] il	PTIN		-
e On	ly Firm's name ►	_		self-employe	٥	-	
y the II	Firm's address ►  RS discuss this return with the preparer			Phone no.			-
	RS discuss this return with the preparer s	^			☐ Yes [	No	
4	* Worksheet (	DPY ON 1	y poses		Form <b>990-</b>	<b>Z</b> (20	18)
	FOR T	DE P Pu	Proses				

#### SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

## Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2018

Open to Public Inspection Employer Identification number

Friends of the Little Manatee River Park Inc.			Employer Identification number 59-3442343
Part 1 Line 8: Income from laundry machines	×		
	***************************************	***************************************	
Part 1 Line 16:		H	***************************************
Administrative expenses	\$ 292.05		
Park outreach	\$ 86.55		
Park equipment and infrastructure	\$ 1180.63		
Park direct support expenses	\$ 1531.18	***************************************	
Total	\$ 3090.41	*****************	
***************************************	***************************************		***************************************
		*********	
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#### 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

Department of the Treasury Internal Revenue Service Name of the organization

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

Open to Public Inspection

Frier	nds of the Little Manatee River Park	Inc.				Employer Identificat			
Pa	Reason for Public C	harity Status	All organizations mu	ist comr	alete this	part \ Coo instruct	3442343		
The	organization is not a private fou	ndation because	it is: (For lines 1 through	ah 12 ch	ook only	part.) See instruct	ions.		
1	A church, convention of ch	urches, or assoc	iation of churches des	crihed in	conting :	170/b\/4\/A\/s\			
2	A school described in sect	ion 170(b)(1)(A)(	ii). (Attach Schedule E	(Form 00	300000	170(D)(1)(A)(I).			
3	A nospital of a cooperative	hospital service	organization describer	d in coati	an 470/L	MANGANGO			
4	The state of the s								
	- Than of only, and state.								
5	An organization operated for the benefit of a college or university owned or operated by a governmental unit described is section 170(b)(1)(A)(iv). (Complete Part II.)								
6	A federal, state, or local government	vernment or gove	emmental unit describe	ed in sec	tion 170/	61/41/A1/64			
7	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).  An organization that normally receives a substantial part of its support from a governmental unit or from the general pub described in section 170(b)(1)(A)(vi). (Complete Part II.)								
8	A community trust describe	d in section 170	(b)(1)(A)(vi). (Complete	Part II.)					
9	An agricultural research org or university or a non-land- university:	anization describ grant college of a	ped in <b>section 170(b)(</b> agriculture (see instruc	<b>1)(A)(ix)</b> d tions). En	operated inter the na	ime, city, and state o	of the college or		
10	An organization that normal receipts from activities relat support from gross investmacquired by the organization	ent income and	involated business to	Certain e	xcebtions	, and (2) no more th	nip fees, and gross an 331/3% of its n businesses		
11	I All organization organized a	nd operated exc	lusively to test for pub	lic cofoty	C00 000	Ham 500/-1/41			
12	in organization organized a	nd operated excl	usively for the benefit	of to no	form the	form will make the first	and the second s		
а	Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g  Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B.								
b	Type II. A supporting organization(s). You must	ganization super of the supporting	vised or controlled in c	onnectio	n with ita	supported organizat s that control or mar	ion(s), by having age the supported		
c	Type III functionally inte	grated, A suppo	orting organization one	erated in	connection	on with, and function	ally integrated with,		
d	Type III non-functionally that is not functionally int requirement (see instructional see instructions)	<b>y integrated.</b> A s egrated. The ord	supporting organization	n operate	ed in conn	ection with its suppo	orted organization(s nd an attentiveness		
е	Check this box if the orgatum functionally integrated, or	anization receive	d a written determinati	on from t	the IDC th		e II, Type III		
f	Enter the number of supported	Organizations	odonany integrated su	pporting	organizat	ion.			
g	Provide the following information	on about the sur	norted organization(a)	)\$0 Si 3		8 8 600 00 0 0	* *		
	(i) Name of supported organization	(ii) EIN	(iii) Type of organization		www.co.co.co.co.co.co.co.co.co.co.co.co.co.	T			
		(.,, =	(described on lines 1–10 above (see instructions))	listed in yo	organization our governing ament?	(v) Amount of monetary support (see Instructions)	(vi) Amount of other support (see instructions)		
				Yes	No				
(A)									
(B)									
(C)									
(D)									
(E)									
Tabel						1			

Pa	Support Schedule for Organiza	ations Dosor	ihad in Cast	4700 1/4	14614: 3	were review on	Page	
	(Oompiete only II you checked (I	ie pox on line	55 / or 8 of	Part Lor if the	a organization	failed to aus	)	
	art iii. It the organization fails to	qualify unde	er the tests lis	ted below n	lease comple	ta Part III \	ality under	
Sec	And the ample aupport			tod Bolow, p	case comple	te Fait III.)		
Cal	endar year (or fiscal year beginning in)	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(O Total	
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	80	486	170	225	574	<b>(f)</b> Total	
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf				220	3/4	133	
3	The value of services or facilities furnished by a governmental unit to the organization without charge	639	15000	15000	14763	5283	5068	
4	Total. Add lines 1 through 3	719	15486	15170	14988	5857	52220	
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						52220	
	tion B. Total Support					all as a livery base.		
7	ndar year (or fiscal year beginning in) ▶ Amounts from line 4	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total	
8		719	15486	15170	14988	5857	52220	
0	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources		12					
9	Net income from unrelated business activities, whether or not the business is regularly carried on						170-111-11-1	
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				ALERS DE LES		52220	
12 13	Gross receipts from related activities, etc. ( First five years. If the Form 990 is for the organization, check this box and stop house	organization's	first, second,	third, fourth,	or fifth tax yea	12 ras a section	501(c)(3)	
Sant	and stop liefe	100 000 000 00		n in mana			▶ □	
14	on C. Computation of Public Support	Percentage						
15	Public support percentage for 2018 (line 6,	column (f) divid	ded by line 11,	column (f))	a = u 1	14	100 %	
16a	Public support percentage from 2017 Sche 331/3% support test—2018. If the organization qualification and stop here. The organization qualification support test—2017. If the agrangement test—2017 is the agrangement test—2018 is the agrangement test—	ation did not of	sock the how o	L OF anil as	1' 44' 001	15   3% or more, ch	100 % neck this	
b	a was support test—2017. If the organiza	tion ala not ch	eck a boy on	ling 13 or 160	and line 15 in	201 0/		
17a	this box and <b>stop here</b> . The organization qualifies as a publicly supported organization  10%-facts-and-circumstances test—2018. 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 <b>stop here</b> . Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.							
b	15 is 10% or more, and if the organization Explain in Part VI how the organization meets	<ol> <li>If the organion meets the 'ets the 'facts-</li> </ol>	zation did not 'facts-and-circ and-circumsta	check a box of cumstances" to the check a box of cumstances to the check a box of	on line 13, 16a est, check this	, 16b, or 17a, s box and sto	and line p here.	
18	supported organization <b>Private foundation.</b> If the organization did rinstructions	not check a bo	x on line 13, 16	6a, 16b, 17a, o	r 17b, check th	nis box and see	· · · □	