



Florida Department of Environmental Protection

CITIZEN SUPPORT ORGANIZATION

2015 REPORT

(pursuant to Florida Statute 20.058)

Citizen Support Organization (CSO) Name: Natural Bridge Historical Society, Inc.

Mailing Address: 815 East 7th Avenue, Tallahassee, FL 32303

Telephone Number: 850-222-6192 Website Address (if applicable): http://www.nbhscso.com

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:

Pursuant to the Bylaws, which are on file with the Florida Department of Environmental Protection, the purpose of the Natural Bridge Historical Society, Inc. is to act as a non-profit corporation which will function as a Citizen Support Organization, as such organizations is defined and regulated by the FDEP or other agency which comes to substitute it, in order to generate and deploy additional resources in support of and in the best interests of the Natural Bridge Battlefield Historic State Park with special emphasis on capital improvements to preserve, maintain, enhance and expand the historical attributes and physical facilities of the park.

Brief Description of the CSO's Results Obtained:

Funded and hosted the annual reenactment of the Battle of Natural Bridge, which in 2015 was the 150th anniversary of the battle.

Funded and hosted the annual National Public Lands day at Natural Bridge.

Partially funded the replication of the bronze eagle which is displayed atop the Natural Bridge Battlefield monument.

Funded the installation of the replica bronze eagle to the Natural Bridge Battlefield monument.

Funded the purchase of a rifle to allow staff to conduct resource management hunts to remove exotic feral hogs from Natural Bridge and other parks in the Tallahassee-St. Marks Administration.

Funded the purchase of landscape materials including plants, sod and mulch to beautify the grounds of the park.

Funded the purchase of materials needed to build a replica fence that will be installed around the Natural Bridge Battlefield monument.

Awarded a \$6,200 Leon County Tourist Development Council General Special Events Grant for the purpose of marketing the 2015 150th Anniversary Battle of Natural Bridge Reenactment.

Recruited volunteers and participated in the University of West Florida's Phase I archaeological research project on the battlefield and earthworks at the park.

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

Continue funding and hosting the annual Battle of Natural Bridge Reenactments.

Continue funding and hosting the annual National Public Lands Day.

Seek additional grant funding to support, advertise and market the annual reenactment of the Battle of Natural Bridge and support additional capital improvements at the park.

Assist in conducting additional archaeological and historical research at the park.

Identify and implement the steps necessary to provide ADA access to the park's interpretive center (Rakestraw House), including installation of the wheel chair lift.

- 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**

NATURAL BRIDGE HISTORICAL SOCIETY, INC.

CODE OF ETHICS

PREAMBLE

- (1) It is essential to the proper conduct and operation of Natural Bridge Historical Society, 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 Natural Bridge Historical Society, 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**

June 22, 2015

**TO: Danny Jones, Bureau Chief
Florida Park Service District 1**

**THROUGH: Carmen C. McDonald, Park Program Development Specialist
Florida Park Service District 1**

**FROM: Rob Lacy, Park Manager *RL*
Tallahassee/St. Marks Administration**

**SUBJECT: Natural Bridge Historical Society, Inc.
Annual Financial Report**

I would like to take this opportunity to advise you of the accomplishments of the Natural Bridge Historical Society, Inc. During their fiscal year 2014, members of this CSO group assisted park staff in the further development and refinement of the re-enactment which took place February 28 through March 2, 2014. The attending crowds were treated to a delightful educational opportunity. The CSO members provided interpretive and educational programs to about 2,780 in attendance for the 3 day event. These programs provided visitors with a glimpse into what it was like to be a soldier during the American Civil War and an interpretive look at the battle that took place in 1865.

The CSO continues to support the restoration of the battlefield monument and the grounds around it. The board has partnered with the park to pursue grants and other fund raising opportunities to provide funding for the eagle restoration, fence restoration and marketing grants for the 150th anniversary reenactment which took place in 2015.

The CSO continued its partnership with the park to participate in National Public Lands Day in September 2014. The park and CSO recruited volunteers to clean up the river sink and the grounds surrounding the river.

The Annual Report provided to me by this organization was well prepared, complete and contained all information required for filing. Should you have any questions, please contact me at (850) 922-6007 or at Rob.Lacy@dep.state.fl.us

**Cc/enc: Natural Bridge Historical Society, Inc.
Park File
CSO President Cover Letter
Annual Report**

Natural Bridge Historical Society, Inc.

Citizen Support Organization



"Lest we forget"

Board of Directors

William Gifford, President 850-574-3792
Chris Ellrich, Vice President 850-321-0950
Robert L. Trapp, Secretary/Treasurer 850-222-6192
John Boger, Director 386-963-3654
Mark Rominger, Director 850-877-1263
Drew Bell, Director (386) 647-6946
Jim Willenbrink, Director (850) 656-9001

Please address all correspondence to:

Natural Bridge Historical Society, Inc.
c/o Robert L. Trapp, Registered Agent
815 East 7th Avenue
Tallahassee, Florida
32303
btrapp@nbhscso.com

May 25, 2015

Re: 2014 CSO Financial Report

Mr. Rob Lacy, Park Manager
Tallahassee-St Marks Administration
Lake Jackson Mounds Archaeological State Park
3600 Indians mounds Rd.
Tallahassee Fl. 32303

Dear Mr. Lacy:

Much of 2014 was spent in anticipation of and preparation for the 150th anniversary of the Battle of Natural Bridge in March 2015. The CSO worked in conjunction with the Park's management to apply for state and local grants and seek other funding to support the anniversary event. The Park Service was awarded a Visit Florida grant which was used to produce a new road sign, posters, and pamphlets; the CSO was awarded a Visit Florida grant which was used to advertise the event in national and local publications, radio spots, and a road sign in Macon, Georgia. The CSO provided funds for the purchase of sod and landscaping plants to enhance the Park grounds. The CSO also funded the production of special medallions commemorating the 150th anniversary to be given to participants, used as honorariums, and made available to the public.

Since its removal in 2011, the restoration and replacement of the eagle sculpture atop the historic battlefield monument has been a top priority. At our 2013 summer meeting, the NBHS Board of Directors voted unanimously to take action to seek the necessary funding to restore the eagle. Working with Park Staff, the CSO began the application process for a Small Matching Historic Preservation Grant from the Division of Historical Resources (FDHR). If awarded, funds under the grant would have been available in 2016 with the CSO contributing 25% in matching funds. In order to support the matching required by the grant, a special fund raising drive was initiated at the 2014 reenactment of the Battle of Natural Bridge which raised over \$1200 in individual donations and \$2,300 in donations from organizations. As the filing date for the grant approached, however, we were greatly pleased when District I management decided to provide internal funding for the project. This meant that a bronze replica of the eagle sculpture could be fabricated and installed in time for the 150th anniversary event. The new sculpture was dedicated on March 8, 2015 in a joint ceremony of the Anna Jackson Chapter of the United Daughters of the Confederacy (the original sponsors of the monument), the Florida Park Service, and the Natural Bridge Historical Society, Inc. The CSO provided a total of \$8,000 of the total project costs.

Other program services provided during the year included: the purchase of a rifle for use by Park Staff for varmint control; the purchase of material for construction of an architectural iron fence to surround and protect the battlefield monument; and many, many work day hours splitting fire wood and clearing new camping spaces for use at the annual reenactment.

In the area of long term goals, the CSO continues to support the following:

- Pursuit of additional land acquisitions which would expand the Natural Bridge Battlefield Historic State Park. Of particular concern are the lands surrounding the park formerly owned by the St Joe Company but recently sold to the Mormon Church. The CSO would like to be kept informed of negotiations by the State for the purchase of these lands. In the interim, we will continue to seek permission from the owners on an annual basis to use the areas that we have been permitted to use in the past for parking and modern camping at the annual reenactment of the Battle of Natural Bridge.
- Improvements necessary to provide special needs access to the Rakestraw House including installation of the electrical/mechanical wheel chair lift which was purchased by the CSO in 2009.
- Pursuit of additional resources, including grants and donations, to support the annual reenactment of the Battle of Natural Bridge, additional historic interpretive exhibits and materials at the Park, as well as capital improvements to the park.

In closing, we wish to thank our partners at the Park Service who have provided total support for our CSO activities. We look forward to continuing to work together to make the Natural Bridge Battlefield Historic State Park one of the premier parks in North Florida.

Sincerely,

A handwritten signature in cursive script, appearing to read "William F. Gifford".

William F. (Buzz) Gifford, President

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	39174.57	22 42211.22
23 Land and buildings	0	23 0
24 Other assets (describe in Schedule O)	1072.32	24 1072.32
25 Total assets	40246.89	25 43283.54
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)	40246.89	27 43283.54

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

What is the organization's primary exempt purpose? Citizen Support Organization

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.

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

28 <u>2014 Reenactment of the Battle of Natural Bridge</u> <u>Organize and host event</u> <u>Attracted a large number of visitors to the park</u> (Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	28a	3230.65
29 <u>Promoted and helped fund restoration of historic eagle sculpture atop battlefield monument</u> (Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	29a	8000
30 <u>Landscaping, improvements to Park grounds, and varmint control</u> (Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	30a	1451.46
31 Other program services (describe in Schedule O) (Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	31a	
32 Total program service expenses (add lines 28a through 31a)	32	

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
<u>William Gifford, President</u>	10	0	0	0
<u>Chris Ellrich, Vice President</u>	1.25	0	0	0
<u>Robert Trapp, Secretary/Treasurer</u>	10	0	0	0
<u>Mark Rominger, Director</u>	0.25	0	0	0
<u>John Boger, Director</u>	1	0	0	0
<u>Drew Bell, Director</u>	0.25	0	0	0
<u>Jim Willenbrink, Director</u>	0.25	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

Table with columns for question number, question text, and Yes/No checkboxes. Rows include questions 33 through 45b regarding organizational activities, financial reporting, and controlled entities.

	Yes	No
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	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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

	Yes	No
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	<input type="checkbox"/>	<input checked="" type="checkbox"/>
48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	<input type="checkbox"/>	<input checked="" type="checkbox"/>
49a Did the organization make any transfers to an exempt non-charitable related organization?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b If "Yes," was the related organization a section 527 organization?	<input type="checkbox"/>	<input type="checkbox"/>

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 **None**

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 **None**

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	Signature of officer _____ Robert Trapp, Treasurer	Date _____ 6/16/2015
	Type or print name and title	

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	Firm's name	Firm's EIN			
	Firm's address	Phone no.			

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

OMB No. 1545-0047

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

2014

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

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

Name of the organization Natural Bridge Historical Society, Inc.	Employer identification number 59-3583214
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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, Sections 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"/>						

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.")	30170.91	8118.25	4390.52	5653.05	8514.65	56847.38
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	508.50	419.50	241.40	320.25	330.50	1820.15
3 Gross receipts from activities that are not an unrelated trade or business under section 513	0	0	0	0	0	0
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0	0	0	0	0
5 The value of services or facilities furnished by a governmental unit to the organization without charge	8440.00	25750.00	8002.00	6000.00	16178.00	64370.00
6 Total. Add lines 1 through 5	39119.41	34287.75	12633.92	11973.30	25023.15	123037.53
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	0	0	0	0	0	0
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	0	0	0	0	0	0
8 Public support (Subtract line 7c from line 6.)						123037.53

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	39119.41	34287.75	12633.92	11973.30	25023.15	123037.53
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	457.88	28.90	473.72	76.25	141.67	1178.42
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	0	0	0	0	0	0
c Add lines 10a and 10b	457.88	28.90	473.72	76.25	141.67	1178.42
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	0	0	0	0	0	0
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	0	0	20.00	0	0	20.00
13 Total support. (Add lines 9, 10c, 11, and 12.)	39577.29	34316.65	13107.64	12049.55	25164.82	124235.95
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 ► <input type="checkbox"/>						

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 %
16 Public support percentage from 2013 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f))	17	0.95 %
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? <i>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.</i>		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.</i>		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
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)? <i>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.</i>		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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 organizations 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).</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
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))? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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)? <i>If "Yes," answer (b) below.</i>		
b	Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

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?	11a	
b A family member of a person described in (a) above?	11b	
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 .	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.	1	
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.	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?	1	
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).	2	
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.	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.		Yes	No
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.	2a		
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.	2b		
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 .	3a		
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.	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			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).			

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 instructions)			
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			

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

Department of the Treasury
Internal Revenue Service

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.

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

OMB No. 1545-0047

2014

**Open to Public
Inspection**

Name of the organization

Natural Bridge Historical Society, Inc.

Employer identification number

59-3583214

FORM 990-EZ, PART I, LINE 16 - OTHER EXPENSES

DESCRIPTION	AMOUNT
PUBLIC EDUCATION	\$69.07
CAPITAL PROJECTS	\$2,255.67
TOTAL	\$2,324.74



e-Postcard

file your electronic IRS Form 990-N

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Form 990-N (e-Postcard) Submitted

NATURAL BRIDGE HISTORICAL SOCIETY INC

59-3583214

2014 IRS Form 990-N (e-Postcard)

1/1/2014 - 12/31/2014

Congratulations, your Form 990-N (e-Postcard) has been submitted to the IRS.

Once the IRS receives and processes your e-Postcard (usually within 30 minutes), you will receive an email indicating whether your e-Postcard was accepted or rejected. If accepted, you are done for the year. If rejected, the e-filing receipt email will contain instructions on how to correct the problem.

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Questions or problems regarding this web site should be directed to [Tech Support](#)

Concerned about your privacy? Please view our [privacy](#) policy.

This website is best viewed with Microsoft Internet Explorer 6.0+ or Mozilla Firefox with a screen resolution of 1024 X 768.

Last modified: April 9, 2015.

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: Natural Bridge Battlefield Historical State Park

Park Address: 3600 Indian Mounds Road, Tallahassee, FL 32303

Name of the CSO: Natural Bridge Historical Society, Inc.

A summary of contributed services from the period of January 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 \$ 16,178 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 \$ 55,450 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: Conducting the annual Battle of Natural Bridge Reenactment for public education. The event made \$689.

Total Expense \$3,019.00
Total Revenue \$3,708.00

Program Service Description: Capital improvement support for Natural Bridge Battlefield Historic State Park including materials for facilities, landscaping materials and equipment.

Total Expense \$1451.00
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 \$	<u>4,470.00</u>
CSO total program service revenues \$	<u>3,708.00</u>

Statement of Accomplishments and Goals

Fiscal Year: 2014

Name of Citizen Support Organization: Natural Bridge Historical Society, Inc.

Address: 815 East 7th Avenue
Tallahassee, Florida 32303

Estimated Volunteer Hours:

Total Volunteer Hours: 1200 hours

Total Membership: 35, including clubs and other organizations with members

Please attach a list of Citizen Support Organization Board Members.

William (Buzz) Gifford, President
1310 Francisco Drive
Tallahassee, Florida 32303
850-574-3792
bgifford@nbhscso.com

Chris Ellrich, Vice President
3154 Folsom Road
Tallahassee, Florida 32312
(850) 321-0950
cellrich@nbhscso.com

Robert L. Trapp, Secretary Treasurer
815 East 7th Avenue
Tallahassee, Florida 32304
850-222-6192
btrapp@nbhscso.com

John Boger, Director
3101 208th Street
Lake City, Florida 32024
(386) 963-3654
jboger@nbhscso.com

Mark Rominger, Director
8265 Greenmont Avenue
Tallahassee, FL 32308
850-877-1263
mrominger@nbhscso.com

Jim Willenbrink, Director
900 Riggins Road
Apartment 621
Tallahassee, FL 32311
(850) 656-9001
jimsbrink@comcast.net

Drew Bell, Director
7538 N.W. CR.251
Mayo, FL 32066
386-294-2932
dbell657@windstream.net

Provide a summary of accomplishments. (Attach additional pages as needed)

- Provided planning and volunteer services for the 2015 150th anniversary and 38th annual reenactment of the Battle of Natural Bridge.
- Awarded Visit Florida and Visit Tallahassee grants to promote the 2015 event.
- Provided \$8,000 in matching funds for the replacement of the eagle sculpture atop the battlefield monument.
- Provided fund for sod and landscaping plants at the Park.
- Spent many, many work day hours splitting wood and clearing new camping spaces for the annual reenactment.
- Provided funds for the purchase of a rifle for Park Service use in varmint control.
- Provided funds to purchase materials for an architectural iron fence to protect the battlefield monument.

- Uncrated and tested the electro-mechanical ADA lift for eventual installation at the Rakestraw House.

Provide a summary of goals for the upcoming year. (Attach additional pages as needed)

- Develop and implement a plan for future use of the expanded Park properties, including but not limited to: expansion of the annual March reenactment of the Battle of Natural Bridge, installation of the ADA lift in the Rakestraw House to facilitate public use of the facility, and implementation of CSO recommendations for interpretative exhibits, signage, and kiosks based on the ESI survey results.
- Identify and pursue additional grant opportunities in cooperation with the Park Service.
- Continue to work with African American volunteers to encourage their participation in the annual reenactment of the Battle of Natural Bridge to enhance the historical authenticity of the event.
- Continue to work with the new owners of the St Joe properties surrounding the Park for additional parking and camping space for the annual reenactment and other events on site.
- Continue to stress the importance of State negotiations with private land owners to purchase remaining portions of the original battlefield.
- Seek additional sources of funding to support CSO goals and programs for the Park, through individual and corporate solicitations.



Florida Department of Environmental Protection

CSO ANNUAL PROGRAM PLAN

Required Signatures: Adobe Signature

Name of CSO: Natural Bridge Historical Society

For CSO Fiscal Year: 2014

	Description of Annual Projects	Resources Needed	Sources of Resources	Agency Approval Needed Y/N
1	Plan for the 150th Anniversary Battle of Natural Bridge Reenactment, March	Staff assistance, some funding	Park staff, park budget	Y
2	Restore and re-mount the monument's eagle.	Funding, Staff assistance, equipment,	Grant and fundraising solicitations, park staff,	Y
3	Apply for grant funding for event marketing and promotional funds.	Staff assistance	Park staff	Y
4	Fund architectural drawings for permitting the Rakestraw House ADA	Certified Architect/Engineer to	CSO member	Y
5	Partner with the park to conduct another National Public Lands	Staff assistance, boat, volunteers	Park staff, park boat, recruit volunteer help	Y
6				
7				
8				
9				
10				

Submitted by CSO President: _____

Date: _____

Park Manager Approval: _____

Date: _____



Florida Department of Environmental Protection

CSO ANNUAL PROGRAM PLAN

Required Signatures: Adobe Signature

Name of CSO: Natural Bridge Historical Society

For CSO Fiscal Year: 2015

	Description of Annual Projects	Resources Needed	Sources of Resources	Agency Approval Needed Y/N
1	Plan for the 150th Anniversary Battle of Natural Bridge Reenactment, March	Staff assistance, some funding	Park staff, park budget, CSO budget	Y
2	Recreate and re-mount the monument's eagle.	Funding, Staff assistance, equipment,	Grant and fundraising solicitations, park staff,	Y
3	Apply for grant funding for 2016 event marketing and promotional funds.	Staff assistance	Park staff	Y
4	Fund architectural drawings for permitting the Rakestraw House ADA	Certified Architect/Engineer to	CSO member	Y
5	Partner with the park to conduct another National Public Lands	Staff assistance, boat, volunteers	Park staff, park boat, recruit volunteer help	Y
6				
7				
8				
9				
10				

Submitted by CSO President: _____

Date: _____

Park Manager Approval: _____

Date: _____