



Florida Department of Environmental Protection
CITIZEN SUPPORT ORGANIZATION
2020 LEGISLATIVE REPORT
(pursuant to Section 20.058 Florida Statutes)

Citizen Support Organization (CSO) Name: Friends of O'leno, INC

Mailing Address (required): P.O. Box 2879, High Springs, FL 32655

Telephone Number (required): 386-454-1863 Website Address (required if applicable): friendsofoleno.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*

It is our mission to support O'Leno State Park and River Rise Preserve State Park by fundraising, conducting recreational and educational events, by promoting academic and archeological research, and by helping to maintain and preserve natural, cultural & historical resources.

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

Friend's of O'leno runs 3 very successful fundraisers every year as well as selling firewood and mementos to park visitors. We then use those funds to buy much needed equipment for the parks & support the animals at the Nature Center. We are also currently funding the restoration of the Nature Center at O'leno. We are expanding our membership, with new members taking leadership roles, this brings a new energy and new ideas to a long standing CSO that has been supporting it's parks for close to 40 years!

Description of the CSO's Plans for the Next Three Fiscal Years: *Expand section as necessary to be complete*

Friend's of O'leno plans to continue it's tradition of support for O'leno & River Rise State Parks. Our meetings & fundraisers have been limited so far this year due to the pandemic but we are having Zoom meetings and hope that we will have a more solid view of the future by year's end.

- CSO's Code of Ethics is attached, and if the CSO has a website the code of ethics is posted conspicuously.**
- 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). If filing an IRS extension, attach the IRS 8868 receipt and most recent 990 and schedules.**

Model CSO Code of Ethics – June 2014

Friends of O’Leno, Inc. CODE OF ETHICS

PREAMBLE

- (1) It is essential to the proper conduct and operation of the Friends of O’Leno, 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 the Friends of O’Leno, 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.

Model CSO Code of Ethics – June 2014

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 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.

Adopted August 15, 2014.

Short Form

Return of Organization Exempt From Income Tax

2019

Open to Public Inspection

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form, as it may be made public.

▶ Go to www.irs.gov/Form990EZ for instructions and the latest information.

Department of the Treasury
Internal Revenue Service

A For the 2019 calendar year, or tax year beginning , 2019, and ending , 20

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization <input checked="" type="checkbox"/> Friends of O'lono, Inc	D Employer identification number <input checked="" type="checkbox"/> 593035729
	Number and street (or P.O. box if mail is not delivered to street address) <input checked="" type="checkbox"/> Room/suite P.O. Box 2879	E Telephone number 386-454-1853
	City or town, state or province, country, and ZIP or foreign postal code High Springs, FL 32655	F Group Exemption Number ▶ <input checked="" type="checkbox"/>
	G Accounting Method: <input type="checkbox"/> Cash <input type="checkbox"/> Accrual Other (specify) ▶ _____	

I Website: ▶ friendsofolono.org

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

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

K Form of organization: Corporation Trust Association Other _____

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

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)
 Check if the organization used Schedule O to respond to any question in this Part I

Revenue	1	Contributions, gifts, grants, and similar amounts received	1	
	2	Program service revenue including government fees and contracts	2	.00
	3	Membership dues and assessments	3	834.92
	4	Investment income	4	.00
	5a	Gross amount from sale of assets other than inventory	5a	.00
	b	Less: cost or other basis and sales expenses	5b	.00
	c	Gain or (loss) from sale of assets other than inventory (subtract line 5b from line 5a)	5c	.00
	6	Gaming and fundraising events:		
	a	Gross income from gaming (attach Schedule G if greater than \$15,000)	6a	.00
	b	Gross income from fundraising events (not including \$.00 of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	6b	11,582.76
c	Less: direct expenses from gaming and fundraising events	6c	6,186.81	
d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d	5395.95	
	7a	Gross sales of inventory, less returns and allowances	7a	9,200.00
	b	Less: cost of goods sold	7b	5,462.30
	c	Gross profit or (loss) from sales of inventory (subtract line 7b from line 7a)	7c	3,737.70
	8	Other revenue (describe in Schedule O)	8	313.30
	9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 ▶	9	10,927.90
Expenses	10	Grants and similar amounts paid (list in Schedule O)	10	.00
	11	Benefits paid to or for members	11	.00
	12	Salaries, other compensation, and employee benefits <input checked="" type="checkbox"/>	12	.00
	13	Professional fees and other payments to independent contractors <input checked="" type="checkbox"/>	13	92.22
	14	Occupancy, rent, utilities, and maintenance	14	108.99
	15	Printing, publications, postage, and shipping	15	141.77
	16	Other expenses (describe in Schedule O) <input checked="" type="checkbox"/>	16	3,933.71
17	Total expenses. Add lines 10 through 16 ▶	17	4,271.69	
Net Assets	18	Excess or (deficit) for the year (subtract line 17 from line 9)	18	6,342.91
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	10,839.15
	20	Other changes in net assets or fund balances (explain in Schedule O)	20	
	21	Net assets or fund balances at end of year. Combine lines 18 through 20 ▶	21	17,206.35

**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.

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

OMB No. 1545-0047

2019

**Open to Public
Inspection**

Name of the organization

Friends Of O'leno, Inc

Employer identification number

593035729

Line 8 - Other Income

Park Host Laundry Fees (Restricted Fund).	175.00
Recycle Receipts (Restricted Fund- Park Equipment)	68.58
Coins Returned (from old cash boxes)	15.72
Community Bag (Through Winn Dixie)	54.00
Total Other Income	\$313.30

Line 16 - Other Expenses

Park Support - Nature Center	1,718.15
Park Support - Halloween Decorations	221.54
Admin - Post Office - Second Key for Box	9.00
Admin - Post Office - Box Renewal	150.00
Admin - Florida State Parks Foundation Membership	100.00
Admin - Office Supplies.	126.20
Advertisement - Lake City Reporter Visitor's Guide	723.00
CSO Equipment - Grill	169.00
CSO Expense - Volunteer T-Shirts	433.94
CSO Functions - Catering	234.20
Florida State Sales Tax	48.68
Total Other Expenses	\$3,933.71

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	10,839.15	22 17,206.35
23 Land and buildings		23
24 Other assets (describe in Schedule O)		24
25 Total assets	10,839.15	25 17,206.35
26 Total liabilities (describe in Schedule O)		26
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	10,839.15	27 17,206.35

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? Support O'leno and River Rise State Parks

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

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

28 All Income and Expense directly relates to support of O'leno and River Rise State Parks. No grants given. No persons benefited other than visitors to the parks.		
29 (Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	28a	
30 (Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	29a	
31 Other program services (describe in Schedule O) (Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	30a	
32 Total program service expenses (add lines 28a through 31a)	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
Joanna Young, President 940 SW Roberts Ave Fort White FL 32038	5			
Nancy Hutchings, Vice President 129 SW Santucknee Terr Fort White FL 32038	5			
Mildred Russin, Secretary 25705 NW 173rd Ave High Springs FL 32643	5			
June Sager, Treasurer 18974 NW 242 St. High Springs FL 3264	10			
Karen McLain, Membership Secretary 655 SE Diamondback Gln High Springs FL 32643-1536	10			
Cathy Falconer, Director 254 SW Serenity Gln, High Springs 32643	5			
Ed Bisch, Director PO Box 840, Bell FL 32619	10			
Deborah Darwin, Director 258 SE Cataldo Gln, High Springs, 32643	5			
Bob Mardis, Director 362 SW Carmine Way, Ft. White, 32038	5			
Robin Politowicz, Director 5K Organizer 740 NE 10th Pl Gainesville 32601	1			
Dru Travis, Director 15337 NW 214th Ter, High Springs FL 32643	3			

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

		Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O		
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O. See instructions		
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?		
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		
c	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III		
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N		
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions <input type="text" value="37a"/>		
b	Did the organization file Form 1120-POL for this year?		
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee; or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?		
b	If "Yes," complete Schedule L, Part II, and enter the total amount involved <input type="text" value="38b"/>		
39	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on line 9 <input type="text" value="39a"/>		
b	Gross receipts, included on line 9, for public use of club facilities <input type="text" value="39b"/>		
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 <input type="text"/> ; section 4912 <input type="text"/> ; section 4955 <input type="text"/>		
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		
c	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 <input type="text"/>		
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization <input type="text"/>		
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T		
41	List the states with which a copy of this return is filed <input type="text"/>		
42a	The organization's books are in care of <input type="text"/> Telephone no. <input type="text"/> Located at <input type="text"/> ZIP + 4 <input type="text"/>		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country <input type="text"/> See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	Yes	No
c	At any time during the calendar year, did the organization maintain an office outside the United States? If "Yes," enter the name of the foreign country <input type="text"/>		
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year <input type="text" value="43"/>		
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ		
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		
c	Did the organization receive any payments for indoor tanning services during the year?		
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		
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		

	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	46	

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	47	
48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	48	
49a Did the organization make any transfers to an exempt non-charitable related organization?	49a	
b If "Yes," was the related organization a section 527 organization?	49b	

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

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

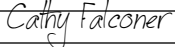
51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and business address of each independent contractor	(b) Type of service	(c) Compensation

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

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

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

Sign Here	 Signature of officer	Verified by PDFFiller <small>06/17/2020</small>	Date 6/17/2020
	Cathy Falconer, Director 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**