

Florida Department of Environmental Protection CITIZEN SUPPORT ORGANIZATION 2024 LEGISLATIVE REPORT (pursuant to Section 20.058 Florida Statutes)

Citizen Support Organization (CSO) Name:	
Mailing Address:	
Telephone Number:	
Website Address (required if applicable):	

Check to confirm your Code of Ethics is posted conspicuously on your website.

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.

YOUR MISSION AND LAST CALENDAR YEAR'S PROGRAM ACCOMPLISHMENTS:

CSO's Mission: (Consistent with your Articles and Bylaws)

Describe Last Calendar Year's Results Obtained: <u>Brag!</u> (List or discuss the past calendar year's accomplishments and contributions. Cite specific support from last calendar year's Annual Program Plan.)

Describe the CSO's Plans for the Next Three Calendar Years:

CSO's LAST CALENDAR YEAR STATISTICS:

Total Number of CSO General Membership:

Total Number of Board of Directors:

Total Volunteer Hours for the Board of Directors (From VSys - Work with your parks' volunteer manager):

PARK & CSO RELATIONSHIP:

Do not duplicate by describing accomplishments and contributions in the summary. <u>Brag</u> in the above Results Obtained. Below, describe the <u>relationship</u>.

Park Manager's Comments on the CSO & Park Relationship and Support:

Provide your perspective on

- Changing developments of the park provided by the CSO.
- Effectiveness of the organization in fulfilling their purpose to support the park(s).
- Effectiveness of the Board of Directors in completing their Annual Program Plan.
- The relationship between the park and CSO. What went well? Are there areas of improvement?

CSO President's Comments on the CSO & Park Relationship and Support:

Provide your perspective on the relationship between the park and CSO. What went well? Are there areas of improvement?

SUMMARIZE FINANCIAL ACTIVITY FOR LAST CALENDAR YEAR, DIRECT PARK(S) SUPPORT & REVENUES:

Program Services are costs related to providing your organizations' programs or services in accordance with your mission. Describe and provide expenses that <u>directly support the park(s)</u>. For established nonprofit organizations, program service expenses generally represent most of the overall expenses of the organization. For the last calendar year provide the total \$ for each that apply. Do not use commas.

- Building improvement, construction, or renovations \$
- Cultural resources (e.g., historic structure restoration/ renovation) \$
 - Natural resources (e.g., native plants, natural lands restoration) \$
- Maintenance equipment (e.g., mowers, chippers, blowers, chainsaws) \$
 - Other facilities and landscape maintenance \$
 - Vehicles (e.g., trucks/cars, UTVs, golf carts, accessible devices, etc.) \$
- Amenities (e.g., water fountains, benches, picnic tables, recreational equipment, kiosks etc.) \$
- Park employees or volunteers support (e.g., interns, training, uniforms, awards, or recognition) \$
 - Big ticket visitor center exhibits or interpretation updates \$
 - Park exhibits, displays, signage \$
 - Park publications, brochures, maps, etc. \$
 - Programing/interpretation support material purchases \$
 - Other program services \$

Total Program Service Expenses \$

Visitor Services Revenue are revenues and the sources generated from fundraising on park property. Do not use commas.

- Park gift shops, craft stores, and concession sales \$
- Merchandise sales (e.g., plants, firewood, ice, t-shirts, hats, etc.) \$
- Programs and Special Events (e.g., fundraising workshops, seasonal events, concerts, etc.) \$
 - Vending (e.g., drink machines, penny press, laundry, Wifi, etc.) \$
 - Rentals (e.g., bikes, canoe, kayak, SUPs, etc.) \$
 - In-park donation boxes \$
 - Other visitor services revenue \$
 - Total Visitor Services Revenue \$

NET ASSETS: \$

Organizations end of last year's <u>Total Assets minus Total Liabilities</u>. This is <u>not</u> the above's Visitor Service Revenue minus Program Service Expenses.

CSO AUDIT THRESHOLD:

Last Calendar Year's Total Expenses (including grants) \$

Are the CSO's annual total expenses \$300,000 including grants? Then Section 215.981(2), Florida Statute requires an independent CPA audit using Government Audit Standards (U.S. GAO Yellow Book). The audit is **due by September 1** (9 months after the CSO's calendar year ends) to the Florida Auditor General and to the Department.

CONFIRM ATTACHMENTS:

Code of Ethics

The most recent Internal Revenue Service (IRS) Form 990, 990-EZ, or 990-N receipt. All IRS Form 990's must be <u>complete</u> with Part III Program Service and <u>all</u> appropriate Schedules (A, O, and others as appropriate). If filing an IRS extension, attach the IRS 8868 receipt and the most recent complete 990 and schedules.

2024 CSO Legislative Report Acknowledgment

This information is complete to the best of my knowledge pursuant to Section 20.058 Florida Statutes

frey L. Forbes ___, CSO President Signature: Printname: Jeffrey L. Forbes Friends of Paynes Prairie Inc. , Inc. Date:<u>5-30-24</u> Signature: ller _, Park Manager Print name: Hon Date:__

FOPP Code of Ethics – Adopted by the board September 2014

FRIENDS OF PAYNES PRAIRIE INC. CODE OF ETHICS

PREAMBLE

- (1) It is essential to the proper conduct and operation of Friends of Paynes Prairie Inc. (herein "FOPP") 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 FOPP 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 FOPP board members, officers, and employees.

1. Prohibition of Solicitation or Acceptance of Gifts

No FOPP 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 FOPP board member, officer, or employee would be influenced thereby.

2. Prohibition of Accepting Compensation Given to Influence a Vote

No FOPP 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 FOPP board member, officer, or employee was expected to participate in his or her official capacity.

3. Salary and Expenses

No FOPP board member or officer shall be prohibited from voting on a matter affecting his or her salary, expenses, or other compensation as a FOPP board member or officer, as provided by law.

FOPP Code of Ethics – Adopted by the board September 2014

4. Prohibition of Misuse of Position

A FOPP 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 FOPP 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 FOPP board or office or who is employed by a FOPP may not personally represent another person or entity for compensation before the governing body of the FOPP 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 FOPP employee and a FOPP board member at the same time.

8. Requirements to Abstain From Voting

A FOPP 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 FOPP 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 FOPP 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 FOPP Code of Ethics

Failure of a FOPP 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 FOPP to observe the Code of Ethics may result in the Florida Department of Environmental Protection terminating its Agreement with the FOPP.



Short Form Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2023	
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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.

Depa Interr	rtment o 1al Rever	of the Treasury nue Service	Go to www.irs.gov/Form990EZ for instructions and the latest	-		Inspection			
			ar year, or tax year beginning 01/01/2023 and en	ding	12/31/20	23			
Bc	heck if ap	oplicable:	C Name of organization	DE		entification number			
	Address c	hange	FRIENDS OF PAYNES PRAIRIE INC		5	9-2968338			
	lame cha	ange		oom/suite E T	elephone n				
	nitial retur	1	100 Savannah Blvd		35	2-377-6329			
=	inal retur Mended	n/terminated	aroup Exe	mption					
=		n pending	Micanopy, FL 32667		lumber				
G A	ccount	ting Method:	🗸 Cash 🔲 Accrual Other (specify):	H Cheo	k 🖾 if the	organization is not			
I W	/ebsite	www.prai	riefriends.org			ach Schedule B			
			.ck only one) — 🗹 501(c)(3) 🔲 501(c) () (insert no.) 🔲 4947(a)(1) or [] 527 (Forr	n 990).				
ΚF	orm of	organization:	Corporation Trust Association Other:	2					
LΑ	dd line:	s 5b, 6c, and '	7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more	e, or if total asse	ets				
(Par	t II, coli	umn (B)) are \$	500,000 or more, file Form 990 instead of Form 990-EZ		· · \$	110,425			
Pa	art I	Revenue	e, Expenses, and Changes in Net Assets or Fund Balances	(see the inst	ructions	for Part I)			
		Check if	the organization used Schedule O to respond to any question in t	his Part I .		<u> [7]</u>			
	1	Contributio	ns, gifts, grants, and similar amounts received 🛒 문		. 1	19,804			
	2	Program se	ervice revenue including government fees and contracts 💫 🥍 .		. 2	0			
	3	Membershi	p dues and assessments		. 3	6,080			
	4	Investment	income		. 4	1,171			
	5a	Gross amo	unt from sale of assets other than inventory		0				
	b	Less: cost	or other basis and sales expenses		0				
	с	Gain or (los	ss) from sale of assets other than inventory (subtract line 5b from line	5a)	. 5 c	0			
	6	Gaming and	d fundraising events:						
le	а		s income from gaming (attach Schedule G if greater than 000)						
Revenue	b			ontributions					
ev	5		aising events reported on line 1) (attach Schedule G if the	oninbutions					
Ē			h gross income and contributions exceeds \$15,000) 6b	2,8	10				
	с		t expenses from gaming and fundraising events 6c						
	d		e or (loss) from gaming and fundraising events (add lines 6a and 6	b and subtrac	rt l				
		line 6c) .			· 6d	2,819			
	7a	Gross sales	s of inventory, less returns and allowances	80,5	1988-046-647				
	b		of goods sold	32,2					
	с		t or (loss) from sales of inventory (subtract line 7b from line 7a)		. 7c	48,301			
	8		nue (describe in Schedule O)			0			
	9		nue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8			78,175			
	10		similar amounts paid (list in Schedule O)		. 10	20,350			
	11	Benefits pa	id to or for members		. 11	3,054			
Se	12	-	her compensation, and employee benefits		. 12	0			
Expenses	13	Professiona	al fees and other payments to independent contractors		. 13	7,358			
be	14	Occupancy	/, rent, utilities, and maintenance		. 14	553			
ũ	15	Printing, pu	ublications, postage, and shipping		. 15	159			
	16	Other expe	nses (describe in Schedule O) .See Schedule O, Statement 1	<u></u>	. 16	5,820			
_	17		nses. Add lines 10 through 16			37,294			
s	18		deficit) for the year (subtract line 17 from line 9)			40,881			
set	19		or fund balances at beginning of year (from line 27, column (A)) (m	nust agree wit	h 🔣				
As		end-of-yea	r figure reported on prior year's return)			215,608			
Net Assets	20	Other chan	ges in net assets or fund balances (explain in Schedule O)	<u> </u>	. 20	0			
z	21	Net assets	or fund balances at end of year. Combine lines 18 through 20		. 21	256,489			
For	Paper	work Reducti	ion Act Notice, see the separate instructions. Cat. No.	. 106421		Form 990-EZ (2023)			

Form	990-EZ (2023)					Page 2
Pa	rt II Balance Sheets (see the instructions t	for Part II)				
	Check if the organization used Schedule	,	nv question in this	Part II		
			1	(A) Beginning of year	-	(B) End of year
22	Cash, savings, and investments			215,608	22	256,272
23	Land and buildings				23	0
24	Other assets (describe in Schedule O)				24	217
25	— · · ·	· · · · · · ·		215,608		256,489
26	Total liabilities (describe in Schedule O)				26	230,403
27	Net assets or fund balances (line 27 of column	(B) must agree wit	h line 21)	215,608		256,489
Par						200,405
- ar	Check if the organization used Schedule					Expenses
What	t is the organization's primary exempt purpose?			<u>.</u>		quired for section
				ANX STRA		(c)(3) and 501(c)(4) anizations; optional for
	ribe the organization's program service accompli- neasured by expenses. In a clear and concise m				-	ers.)
	ons benefited, and other relevant information for ea					,
	We supported the park management program of Pay		State Dark Me nurch	hoboon bose		
	equipment, rented needed equipment, paid for repair			-**		
	(Continued on Schedule O. Statement 2)		- AN S	IVESTOCK		
	(Grants \$ 20,149) If this amount	includes foreign gra	nts check here		28a	a 0
29				· · · · 🗀	200	<u> </u>
			<u></u>			
	(Grants \$) If this amount	includes foreign gra	nts, chéck here		2 9a	
30		с. 			200	1
			<u>}</u>			
		the second s	7			
	(Grants \$) If this amount	includes foreign gra	ints, check here		3 0a	
31	Other program services (describe in Schedule O)				000	
•.			ints, check here		31a	
32	Total program service expenses (add lines 28a t				32	
Pari						
	Check if the organization used Schedule					
			(c) Reportable		T	
		(b) Average	compensation	(d) Health benefits, contributions to employe	e (e)	Estimated amount of
	(a) Name and title	hours per week devoted to position	(Forms W-2/1099-MISC/ 1099-NEC)	benefit plans, and		other compensation
	\sim	· · · · · · · · · · · · · · · · · · ·	(if not paid, enter -0-)	deferred compensation		
Jeffr	ey Forbes	8.00	0		0	0
	ident 🦯					
	nie Bobroff	4.00	0	·-··	0	0
	president					
Jame	es P Ross	3.00	0		0	0
Treas	surer 💫 📉					
Fairli	ie Bagley	4.00	0		0	0
Secr	etary					
Geor	ge DeLoach	4.00	0		0	0
	tor sales					
Bubb	ba Earl Scales	3.00	0		0	0
Direc	ctor membership					
Doro	thy Smiljanich	2.00	0		0	0
Direc	ctor					
Marti	in Main	2.00	0	(0	0
Direc						
-	cia Kromer	2.00	0		0	0
Direc						U U
	a Ruffino	2.00	0		0	0
Direc		2.00	, v		-	0
-	stine Denny	2.00	0		0	0
Direc		2.00	Ŭ		Ĩ	0
		· · · · · · · · · · · · · · · · · · ·	I	· · · · · · · · · · · · · · · · · · ·		

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Form 990-EZ (2023)

Form 99	0-EZ (2023)	Page 3
Part	V 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 Part V 🛛 🗌
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	Yes No 33 ✓
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O. See instructions	34 ✓
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 c	If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O 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 II	35b 35c √
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36 🗸
37а b	Enter amount of political expenditures, direct or indirect, as described in the instructions Did the organization file Form 1120-POL for this year?	0 37b ✓
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee; or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a ✓
b	If "Yes," complete Schedule L, Part II, and enter the total amount involved	
39 a	Section 501(c)(7) organizations. Enter:	
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 4911:0; section 4912:0; section 4955:0	
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	
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line	
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	40e ✓
41	List the states with which a copy of this return is filed:	
42a	· · · · · · · · · · · · · · · · · · ·	352-377-6329
b	Located at: 1807 sw 63 ave, Gainesville, FL 32608 ZIP + 4 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)?	32608 Yes No 42b √
	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 ✓
43	Section 4947(a)(1) homexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 —Check here and enter the amount of tax-exempt interest received or accrued during the tax year	· · · · □
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	Yes No 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	44b ✓
c d	Did the organization receive any payments for indoor tanning services during the year?	44c ✓ 44d
45a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)? 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	45a ✓ 45b ✓

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Form 990-EZ (2023)

Form 99	0-EZ (2023)		Pa	age 4
			Yes	No
46	Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition	1.53		いたが
	to candidates for public office? If "Yes," complete Schedule C, Part I	46	Lange and Parallel and I	1
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 lin	es
50 and 51.	

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

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

50

b If "Yes," was the related organization a section 527 organization? 49b 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 of 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/ 1099-NEC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
None		63 ²⁹		
	. 75	>>> >>		

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

Complete this table for the organization's five highest compensated independent contractors who each received more than 51 \$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
one		
<u></u>		
A A-Y		

Did the organization complete Schedule A? Note: All section 501(c)(3) organizations must attach a 52

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	Signature of officer	Date					
Here	Perran Ross, Treasurer 2						
	Type or print name and title						
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date		heck 🗌 if elf-employed	PTIN	
	Firm's name			Firm's EIN			
coo only	Firm's address				Phone no.		
May the IRS	discuss this return with the pr	eparer shown above? See instructi	ions		[🗌 Yes 🗌 No	

Form 990-EZ (2023)

No

Yes

47

48

49a

SCHEDULE A (Form 990)

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. Attach to Form 990 or Form 990-EZ.

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

2023 Open to Public Inspection

Name of th	ne organization	
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Department of the Treasury Internal Revenue Service

Employer identification number

FRIE	NDS C	OF PAYNES PRAIRIE INC						68338
Par		Reason for Public Cha	······					ons.
The c	•	zation is not a private found		•		-	•	
1		church, convention of church					′0(b)(1)(A)(i).	
2								
3		hospital or a cooperative ho						
4		medical research organizati		onjunction with a hos	oital desc	ribed in s	section 170(b)(1)(A)	(iii). Enter the
-		ospital's name, city, and sta					<u>a Sa</u>	
5		n organization operated for ection 170(b)(1)(A)(iv). (Com		college or university	owned c	or operate	ed by a government	al unit described in
6		federal, state, or local gover						
7		n organization that normally			port from	n a gover	nmental unit or fror	n the general public
		escribed in section 170(b)(1		-	23 24			
8		community trust described	in section 170(b)	(1)(A)(vi). (Complete	Part II.)	SD -		
9		n agricultural research orgar	ization described	l in section 170(b)(1)	(A)(ix) op	erated in	conjunction with a	and-grant college
		university or a non-land-gra	ant college of agr	iculture (see instructio	ons). Enté	fr the nan	ne, city, and state of	f the college or
		niversity:						
10	I [√] Ai	n organization that normally ceipts from activities related	receives (1) more	of its subject to ce	pport fro	m contrit	outions, membership and (2) no more than	tees, and gross
	SL	pport from gross investmer	nt income and uni	related business taxa	ble incon	ie (less s	ection 511 tax) from	businesses
		quired by the organization a		53 × 53× 23			,	
11		n organization organized and			-			
12		organization organized and						
		ne or more publicly supporte e box on lines 12a through 1						
_	_	-					•	•
а		Type I. A supporting orga the supported organizatio						
		supporting organization.					the directors of trust	ees of the
b		Type II. A supporting orga		12.11 1			upported organizati	on(a) by baying
U U		control or management of						
		organization(s). You must				pordonio	and control of man	ugo ino oupportou
с		Type III functionally integ	grated. A support	ting organization oper	rated in c			ally integrated with,
	_	its supported organization	175 S.					
d		Type III non-functionally that is not functionally inte						
		requirement (see instruction						an attentiveness
е		Check this box if the orga	1. N.					
Ŭ		functionally integrated, or						еп, туретп
f	Ente	er the number of supported						
g	Pro	vide the following informatic	n about the supp	orted organization(s).				L
		ne of supported organization	(ii) EIN	(iii) Type of organization	(iv) Is the c	organization	(v) Amount of monetary	(vi) Amount of
				(described on lines 1–10 above (see instructions))		ur governing ment?	support (see instructions)	other support (see instructions)
		Av.					instructionay	indiadonoj
					Yes	No		
(A)								
(B)		·····					· · · · · · · · · · · · · · · · · · ·	
(C)								
(D)								
(E)								
Tota								
		ork Reduction Act Notice, see	the Instructions f	or Form 990 or 990-EZ.		Cat. No.	11285F Sch	edule A (Form 990) 2023

Part		ations Descr	ibed in Sect	ions 170(b)(1	I)(A)(iv) and 1	170(b)(1)(A)(v	i)
	(Complete only if you checked the Part III. If the organization fails to	he box on line o qualify unde	e 5, 7, or 8 of er the tests lis	[•] Part I or if th sted below in	e organizatio lease comple	n failed to qua te Part III)	alify under
Secti	ion A. Public Support	o quanty and		<u>100 0000, p</u>	lease comple		
Caler	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(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	1				$\mathbf{\hat{p}}$	
4	Total. Add lines 1 through 3				(CS)		
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						
	on B. Total Support		<u>_</u>		1		
	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	🖕 (c) 2021	(d) 2022	(e) 2023	(f) Total
7 8	Amounts from line 4 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		\$ <u>`</u>				
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 12	Total support. Add lines 7 through 10 Gross receipts from related activities, etc				· · · ·	12	
13	First 5 years. If the Form 990 is for the		s first, second	, third, fourth,	or fifth tax ye	ar as a section	n 501(c)(3)
0	organization, check this box and stop he			· · · · .	<u></u>		· · · 🗌
	on C. Computation of Public Suppor						
14 15 16a	Public support percentage for 2023 (line 6 Public support percentage from 2022 Sch 33 ¹ / ₃ % support test – 2023. If the organi box and stop here. The organization qua	nedule A, Part I ization did not	II, line 14 check the box	 on line 13, ar	 nd line 14 is 33	14 15 ¹ / ₃ % or more,	
b	33 ¹ / ₃ % support test-2022. If the organization this box and stop here. The organization						
17a	10%-facts-and-circumstances test—20 10% or more, and if the organization me Part VI how the organization meets the organization	eets the facts-	and-circumsta	ances test, che	eck this box a	nd stop here.	Explain in
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organizatio in Part VI how the organization meets the organization	n meets the fa	cts-and-circur	mstances test,	check this box	x and stop her	e. Explain
18	Private foundation. If the organization of instructions						

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

(Complete only if you checked the box on line 10 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.)

Secti	on A. Public Support			on, p.0000 or		,	
Calen	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and membership fees						
_	received. (Do not include any "unusual grants.")	11,504	23,784	29,125	80,898	25,884	171,195
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	28,939	13,469	32,648	39,590	80,551	195,197
3	Gross receipts from activities that are not an unrelated trade or business under section 513	0	0	0	e e e e e e e e e e e e e e e e e e e	X	0
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0	0	0	Ŷ	0
5	The value of services or facilities furnished by a governmental unit to the organization without charge	1,700	1,700	3,078	3,500	3,500	13,478
6	Total. Add lines 1 through 5	42,143	38,953	64,851	123,988	109,935	379,870
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons	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	3,000	8,000	18,000	34,600	11,500	75,100
c	Add lines 7a and 7b	3,000	8,000	18,000	34,600	11,500	75,100
8	Public support. (Subtract line 7c from line 6.)						304,770
	on B. Total Support	y series and s					
	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9	Amounts from line 6	42,143	38,953	64,851	123,988	109,935	379,870
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	32	22	39	722	1,171	1,986
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975) J	0	0	0	0	0
с	Add lines 10a and 10b	32	22	39	722	1,171	1,986
11	Net income from unrelated business activities not included on 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	0	0	0	0
13	Total support. (Add lines 9, 10c, 11, and 12.)	42,175	38,975	64,890	124,710	111,106	381,856
14	First 5 years. If the Form 990 is for the organization, check this box and stop he	organization'	s first, second	, third, fourth,	or fifth tax ye	ar as a sectior	n 501(c)(3)
Secti	on C. Computation of Public Suppor		•	· · · · ·		••••	· · · _
15	Public support percentage for 2023 (line		·	13 column (fi)		15	79.81 %
16	Public support percentage for 2023 (intel Public support percentage from 2022 Sch		-			16	79.81 /0
	on D. Computation of Investment In			<u></u>	<u></u>		17.33 /0
17	Investment income percentage for 2023 (ov line 13 colu		17	0.52 %
18	Investment income percentage for 2020					18	0.32 %
19a	33 ¹ / ₃ % support tests – 2023. If the organ						
b	17 is not more than 33 ¹ / ₃ %, check this box 33 ¹ / ₃ % support tests – 2022. If the organiz	and stop here .	The organizati	on qualifies as a	a publicly suppo	orted organizatio	on 🗸
20	line 18 is not more than 331/3%, check this Private foundation. If the organization di	-	_				

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c 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).
- **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 (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in Part VI.*
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Rart I of Schedule L (Form 990).
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI**.
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in Part VI.*
- **c** Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If "Yes," provide detail in Part VI.*
- **10a** Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If "Yes," answer line 10b below.*
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

Page **4**

Yes No

1

2

3a

Зb

3c

4a

4b

4c

5a

5b

5c

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9a

9b

9c

10a

10b

Schedu	le A (Form 990) 2023		F	Page 5
Part	IV Supporting Organizations (continued)			
11 a	Has the organization accepted a gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?	11a	Yes	No
	A family member of a person described on line 11a above? A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI .	11b 11c		
Secti	on B. Type I Supporting Organizations			
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, 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 officers, 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	Yes	No
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		
Secti	on C. Type II Supporting Organizations			
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	Yes	No
Secti	on D. All Type III Supporting Organizations			
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, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	Yes	No
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 on line 2, above, 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	E Santa E	
Secti	on E. Type III Functionally Integrated Supporting Organizations			
1 a b	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see The organization satisfied the Activities Test. Complete line 2 below. The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity	(see ins	tructi	ions).
2	Activities Test. Answer lines 2a and 2b below.	1030536017	Yes	No
а	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.	2 a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If</i> "Yes," <i>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.</i>	2b		

- 3 Parent of Supported Organizations. *Answer lines 3a and 3b 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? *If "Yes" or "No," provide details in Part VI.*
- **b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in Part VI the role played by the organization in this regard.*

Schedule A (Form 990) 2023

3a

3b

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

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

Secti	ion 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		
Secti	on B—Minimum Asset Amount	1.000	(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):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
с	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 0.015 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 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Secti	ion C-Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 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	Check here if the current year is the organization's first as a non-functiona (see instructions).	ally	integrated Type III supporti	ng organization

	le A (Form 990) 2023				Page 7
Part	V Type III Non-Functionally Integrated 509(a)(3	3) Supporting Organi	zations (continue	d)	I
Sect	ion D—Distributions				Current Year
1	Amounts paid to supported organizations to accomplish			1	
2	Amounts paid to perform activity that directly furthers exe organizations, in excess of income from activity	empt purposes of suppo	orted	2	
3	Administrative expenses paid to accomplish exempt purp	occe of supported orga	nizations	2	
4	Amounts paid to acquire exempt-use assets	loses of supported orga		4	· · · · ·
5	Qualified set-aside amounts (prior IRS approval required-	- nrovide details in Part	VA	5	
6	Other distributions (describe in Part VI). See instructions.	· · · · · · · · · · · · · · · · · · ·	•••	6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to whic	h the organization is res	sponsive	-	
	(provide details in Part VI). See instructions.		192	8	
9	Distributable amount for 2023 from Section C, line 6	·····	~~~	9	
10	Line 8 amount divided by line 9 amount			10	
		(i)	(ii)		(iii)
Secti	ion E—Distribution Allocations (see instructions)	Excess Distributions	Underdistribution Pre-2023	าร	Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6	C			
2	Underdistributions, if any, for years prior to 2023		 A state of the sta		
-	(reasonable cause required—explain in Part VI). See	and the spectrum states			
	instructions.				
3	Excess distributions carryover, if any, to 2023				
а	From 2018			17.1994 19.1994 19.1995	
b	From 2019				
c	From 2020				
d	From 2021				
е	From 2022			1949 (A) 2419 (A)	
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2023 distributable amount				
i	Carryover from 2018 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2023 from				
	Section D, line 7:				
а	Applied to underdistributions of prior years		tion and an address to the second		
b	Applied to 2023 distributable amount				and the second
C	Remainder. Subtract lines 4a and 4b from line 4.	a na managana na mangana na mangana na kana na mangana na kana sa mangana na kana sa mangana na kana sa mangana			
	Remaining underdistributions for years prior to 2023, if				
5	any. Subtract lines 3g and 4a from line 2. For result				
	greater than zero, explain in Part VI. See instructions.			anto caro	
6	Remaining underdistributions for 2023. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in		Manager and States		
·	Part VI. See instructions.			1.95	
7	Excess distributions carryover to 2024. Add lines 3j and 4c.				
8	Breakdown of line 7:				
a	Excess from 2019				
	Excess from 2020				
	Excess from 2021				
	Excess from 2022		<u>en en e</u>		
e	Excess from 2023				
<u> </u>		1999年,高校的新闻的教育,1988年代第二日本部的新闻	化加速率 建筑石 机运动动力的运动中部分运行力 建制制度		 A second s second second s second second s second second se

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Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
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SCHEDULE O (Form 990)

Department of the Treasury

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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 Form 990-EZ.

2023 Open to Public Inspection

OMB No. 1545-0047

do to www.ins.gov/Formsso for the latest information.	Inspection
lame of the organization	Employer identification number
RIENDS OF PAYNES PRAIRIE INC	59-2968338
orm 990-EZ, Part I, Line 10 - Paynes Prairie Preserve State Park program support expenses	
orm 990-EZ, Part II, Line 24 - Cash and Inventory on hand	
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For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

# Schedule O, Statement 1 FRIENDS OF PAYNES PRAIRIE INC Form: Form 990-EZ (2023) EIN: 59-2968338 Part I, Line 16 Page: 1 **Other Expenses Structured Explanation** Description Amount State of the second sec Bank fees and credit card services 2,547 Insurance Directors and officers 947 1,487 Office expense Travel 839 5,820 Total:

#### Schedule O, Statement 2

#### Form: Form 990-EZ (2023)

Page: 2

#### First Program Service Accomplishments Description

FRIENDS OF PAYNES PRAIRIE INC EIN: 59-2968338

Part III, Line 28

#### Description

supplies. We operated a visitors center with volunteer staff, provided operational expenses, inventory. We supported public events and educational programs at the Park. We maintained a website, member services, and social media sites promoting the Park and informing Park visitors.

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