

Florida Department of Environmental Protection

CITIZEN SUPPORT ORGANIZATION 2018 REPORT

(pursuant to Florida Statute 20.058)

Citizen Support Organization (CSO) Name: Salt Springs Alliance Inc							
N. C. 11. A. 1.1	9353 C						
Mailing Address:	8352 Carolyn Drive, Port Richey, FL 34668						
Telephone Number: _	844-344-4490 Website Address (if applicable):	www.SaltSpringsAlliance.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.

Brief Description of the CSO's Mission: Salt Springs Alliance is the citizen support organization (CSO) for Werner-Boyce Salt Springs State Park. Our goal is; to support our park in the fulfillment of it's mission. This mission, as set forth by the Florida Park Service, is to provide resource based recreation while preserving, interpreting and restoring natural, cultural and historical resources.

Brief Description of the CSO's Results Obtained: The CSO was successful in bring large events to the park to generate income and community awareness. The CSO developed and supplies Maps to the park with information on CSO membership, the park and the trails within the park for community enjoyment, while maintaining positive cash flow.

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

Specific Annual Plan is attached, the CSO will enhance and support the park financially and with volunteers by increasing membership, donations, and events that generate income and community awareness and participation.

- **△ 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 DRAFT as form is not required.

Salt Springs Alliance, Inc. CODE OF ETHICS

PREAMBLE

1It is essential to the proper conduct and operation of Salt Springs Alliance 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.

1It 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 Salt Springs Alliance 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.

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.

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.

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.

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.

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.

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.

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.

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.

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.

This Code of Ethics was approved in a regular meeting of the Salt Springs Alliance board of directors held on August 20, 2014.

Short Form

Return of Organization Exempt From Income Tax

2017

ONLY - not OMB No. 1545-1150 Filed

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Form **990-EZ**

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

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

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

Α	For the	2017 calenda	r year, or tax year beginning January 1 , 20	17, and ending	Dec	ember	31 , 20 17			
В	Check if ap	pplicable:	C Name of organization D Emp		D Emple	oyer ide	entification number			
	Address o	change SALT SPRINGS ALLIANCE INC				20-0543879				
Ц	Name cha					E Telephone number				
H	Initial retu		8352 CAROLYN DRIVE		l	8443444490 X 2				
H	Amended	rn/terminated	City or town, state or province, country, and ZIP or foreign postal code	•	F Grou	Group Exemption				
Ħ		on pending	PORT RICHEY, FL 34668		Num	ber 🕨	•			
-	-	ting Method:	✓ Cash Accrual Other (specify) ►	Н	Check >	▶ ✓ if	the organization is not			
	Website	-	.SALTSPRINGSALLIANCE.COM				nch Schedule B			
J	Fax-exen	npt status (che	ck only one) — ✓ 501(c)(3) ☐ 501(c) () ◄ (insert no.) ☐ 4947(a)() or 527	(Form 99	90, 990	-EZ, or 990-PF).			
			✓ Corporation ☐ Trust ☐ Association ☐ Other							
			7b to line 9 to determine gross receipts. If gross receipts are \$200,000		lassets					
(Pa	rt II, col	umn (B) belov	r) are \$500,000 or more, file Form 990 instead of Form 990-EZ			▶ \$	0			
III:	art I	Revenu	e, Expenses, and Changes in Net Assets or Fund Bala	nces (see the	instruc	tions	for Part I)			
			the organization used Schedule O to respond to any question							
_	1 1		ns, gifts, grants, and similar amounts received			1	468			
	2		ervice revenue including government fees and contracts		07 07	2	0			
	3	_	p dues and assessments	57 97 97 97 97	07 03	3	833			
	4	Investment		Et at at at or	07 07	4	000			
	5a			ia	0					
	b			ib	0	HA				
	C		s) from sale of assets other than inventory (Subtract line 5b fro	277.14	- 0	5c	0			
	6		d fundraising events	ir iirio ou,	87 87	-	9			
	a	•	ome from gaming (attach Schedule G if greater than			100				
ē	"	\$15,000) .								
Revenue	b			o of contribution						
e	"		asing events reported on line 1) (attach Schedule G if the	or continuation	.					
~				ib	2,084	211				
	C			ic	2,004	mil.				
	d		e or (loss) from gaming and fundraising events (add lines 6a		btract	-0.4				
		line 6c) .			34 34	6d	2,084			
	7a	-	s of inventory, less returns and allowances	'a	0		2,004			
	b			'b	0					
	C		t or (loss) from sales of inventory (Subtract line 7b from line 7a)			7c	0			
	8		nue (describe in Schedule O)		6 6	8	0			
	9		nue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8			9	3,385			
	10		similar amounts paid (list in Schedule O)	88866	3 3	10	0,000			
	11		id to or for members		2 2	11	0			
es	12		her compensation, and employee benefits		200	12	112			
Expense	13		al fees and other payments to independent contractors			13	100			
	14		r, rent, utilities, and maintenance			14	0			
	15		blications, postage, and shipping			15	2,614			
	16		nses (describe in Schedule O)			16	2,626			
	17		nses. Add lines 10 through 16			17	5,453			
-	18		deficit) for the year (Subtract line 17 from line 9)			18	-1,568			
ets	19		or fund balances at beginning of year (from line 27, column			T E	-1,500			
Net Assets	.		r figure reported on prior year's return)			19	8,484			
it A	20	•	ges in net assets or fund balances (explain in Schedule O)		1	20	0,404			
R	21		or fund balances at end of year. Combine lines 18 through 20			21	6.016			



Pa	rt II Balance Sheets (see the instructions			5 I. II			
	Check if the organization used Schedul	e O to respond to a		(A) Beginning of year		(B) End of year	
			-		00	1,40,000	
22	Cash, savings, and investments			8,484		6,916	
23	Land and buildings		8 8 8 8 8 8 6 4		23	0	
24	Other assets (describe in Schedule O)				24	0	
25	Total assets			8,484		6,916	
26	Total liabilities (describe in Schedule O)				26	0	
27	Net assets or fund balances (line 27 of colum	in (B) must agree wit	h line 21)	8,484	27	6,916	
Par	t III Statement of Program Service Accor					Expenses	
	Check if the organization used Schedul		ny question in this	Part III 🙃 📙	(Re	equired for section	
Wha	at is the organization's primary exempt purpose?	support state park			501	I(c)(3) and 501(c)(4)	
as n	cribe the organization's program service accomp neasured by expenses. In a clear and concise cons benefited, and other relevant information for e	manner, describe the	of its three largest page services provided	rogram services, , the number of		anizations; optional for ers.)	
28	mullet boat project						
						`	
	(Grants \$ 0) If this amour	nt includes foreign gra	ants, check here .	> 🗆	28	a 1,776	
29	A. S.						
20							

	(Grants \$) If this amour	nt includes foreign gra	ents, check here		29	a	
30					-	-	
30				***********			

	(Grants \$) If this amour	nt includes foreign gr	ants check here	▶ □	30	a	
24	Other program services (describe in Schedule O		anta, check nore:		100	-	
31		nt includes foreign gr			31	a	
20	Total program service expenses (add lines 28a	through 31al	ants, check here		32		
_						11.70	
Fai	List of Officers, Directors, Trustees, and Ko Check if the organization used Schedul				IIIOLI		
	Check if the organization used schedul	(b) Average	(c) Reportable	(d) Health benefits,		A February demonstrated	
	(a) Name and title	hours per week devoted to position compensation (Forms W-2/1099-MIS (if not paid, enter -0			vee (e) Estimated amount of other compensation		
Grec	Abbott						
Pres	sident 2016-2017	4	0		0	0	
	10.77.5.44.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4	***					
		7.7					
*******		100					

_							

-					+		

					-		
		200					
					-		
C.T.T.T.T		or to the					
					_		
		See !					
			THE STATE OF THE S	II.	- 1		



Part	V Other Information (Note the Schedule A and personal benefit contract statement requirements	in th	e	
	instructions for Part V.) Check if the organization used Schedule O to respond to any question in this	Part	_	
00	Diddle	_	Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33		/
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)	34		1
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		1
b	If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b		V
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	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		1
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ► 37a 0		(1)()	
b	Did the organization file Form 1120-POL for this year?	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? .	00	li n	,
b	16/04 The state of the December of the State	38a		✓
39	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on line 9			
b	Gross receipts, included on line 9, for public use of club facilities			
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 \blacktriangleright 0; section 4912 \blacktriangleright 0; section 4955 \blacktriangleright 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	100		Ť
	on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization	AT IN		
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e	// T	1
41	List the states with which a copy of this return is filed ► Florida			
42a		143444		2
b	Located at ► 8352 Carolyn Drive, Port Richey, FL 34668 ZIP + 4 ► At any time during the calendar year, did the organization have an interest in or a signature or other authority over	346	Yes	Na
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b	163	140
	If "Yes," enter the name of the foreign country: ▶	Hire	8 3	
	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) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here	9	Š	▶ □
	and enter the amount of tax-exempt interest received or accrued during the tax year		Yes	No
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a		1
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	S.W	1
c d	Did the organization receive any payments for indoor tanning services during the year?	44c 44d	- 14	1
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		1
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-FZ (see instructions)	AEL		
	Form 990-EZ (see instructions)	45b		





46	Did the organization engage							res	NO
Part '	All section 501(c)(3) 50 and 51.	ganizations organizations	only must answer que	estions 47–49b and	52, and co	mplete the	e tables f		es .
47 48 49a b 50	Did the organization engagyear? If "Yes," complete Scils the organization a school and the organization make a lif "Yes," was the related organization to the organization make a lif "Yes," was the related organization to the organization which is the school of the organization make a lif "Yes," was the related organization make a lif "Yes," was the related organization make a lift "Yes," was the lift "Yes," was the lift "Yes," was the lift "Yes," was the related organization make a lift "Yes," was the lift "Yes," was	e in lobbying a hedule C, Part as described in ny transfers to anization a sec organization's	activities or have a II section 170(b)(1)(A)(an exempt non-chaption 527 organization	section 501(h) election	n in effect of the control of the co	during the	tax 47 48 49a 49b ors, truste	Yes es, an	No /
	(a) Name and title of each emplo	pyee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health contributions benefit plans, comper	to employee and deferred			
NONE									
f 51	Total number of other employs Complete this table for the \$100,000 of compensation	organization's from the organ	s five highest comp nization. If there is n	ensated independent			received		than
NONE									
52	Total number of other indep Did the organization com completed Schedule A penalties of perjury, I declare that I have percet, and complete. Declaration of pi	plete Schedul	le A? Note: All se	ection 501(c)(3) orga	inizations n	best of my k	.► Ye		
Sign Here Paid	Type or print name and	PRESIDENT title	533684d413d3d Charter squeetly on, specimen of the common	ees er to totto to the inferior properties of the committee of the committ	Dat	Check _	if PTIN	-	
Prep Use	II.	h the preparer	shown above? See	instructions		self-emplo	oyed Ye	s 🗆	No