



Florida Department of Environmental Protection

CITIZEN SUPPORT ORGANIZATION

2015 REPORT

(pursuant to Florida Statute 20.058)

Citizen Support Organization (CSO) Name: North Florida Springs Alliance

Mailing Address: 15 Old Tram Rd, Moultrie, GA 31768

Telephone Number: 229-873-0889 Website Address (if applicable): www.northfloridaspringsalliance.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:

The North Florida Springs Alliance supports Florida's parks with the enhancement of park facilities, assists with park management, and the promotion of park activities.

Brief Description of the CSO's Results Obtained:

- 1) The North Florida Springs Alliance was awarded CSO of the year in District 2. The Interpretative Trail at Wes Skiles Peacock Springs State Park received two awards – the best long-term project for District 2 and also State-wide.
- 2) Maintained the 1 mile Interpretive Trail with educational kiosks and overlook in Wes Skiles Peacock Springs SP.
- 3) Enhanced several parks with maintenance/repair of tank benches, walkways, changing rooms, and anti-slip treads.
- 4) Conducted special events such as an Annual Skills Workshop and ECO-Day.
- 5) Supported cave fauna monitoring for park management and for research. Also, we did do some educational outreach on the fauna count data at a couple workshops and through email correspondence.
- 6) Assisted the NACD Conservation Chair in implementing fauna counts outside the NFSA scope.
- 7) Received corporate donation from the Florida Wildlife Foundation which was used to purchase a second HydroLab for water testing.
- 8) Purchased supplies and equipment for parks maintenance.
- 9) Performed educational outreach with exhibitions and public speaking events (such as NACD Annual Seminar, NSSCDS Workshop, Springs Celebration at O'leno State Park, REACT at Cave Excursions in Luraville).
- 10) Maintained underwater guide lines in parks allowing cave diving.

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

- 1) Staff/personnel development
- 2) Events /exhibits
- 3) Support fauna counts and water quality surveys
- 4) Trail maintenance – improve signage
- 5) Fundraising
- 6) Increase membership
- 7) Increase community involvement and outreach
- 8) Budgetary needs of the park

- 9) Web site development
- 10) Increase NFSA activities at all parks
- 11. Increase membership participation
- 12. Newsletter development
- 13. Routine Line assessment
- 14. ADA support of parks
- 15. Improve marketing

- ☒ **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**

North Florida Springs Alliance

CODE OF ETHICS

PREAMBLE

- (1) It is essential to the proper conduct and operation of North Florida Springs Alliance (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 North Florida 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.

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.

Adopted by the NFSA board July 18th 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, at one time, both a CSO employee and a CSO board member at the same time.

8. Requirements to Abstain From Voting

A CSO board member or officer shall not vote in official capacity upon any measure which would affect his or her special private gain or loss, or which he or she knows would affect the special gain or any principal by whom the board member or officer is retained. When abstaining, the CSO board member or officer, prior to the vote being taken, shall make every reasonable effort to disclose the nature of his or her interest as a public record in a memorandum filed with the person responsible for recording the minutes of the meeting, who shall incorporate the memorandum in the minutes. If it is not possible for the CSO board member or officer to file a memorandum before the vote, the memorandum must be filed with the person responsible for recording the minutes of the meeting no later than 15 days after the vote.

9. Failure to Observe CSO Code of Ethics

Failure of a CSO board member, officer, or employee to observe the Code of Ethics may result in the removal of that person from their position. Further, failure of the CSO to observe the Code of Ethics may result in the Florida Department of Environmental Protection terminating its Agreement with the CSO.

Short Form

OMB No. 1545-1150

Form **990-EZ**

Return of Organization Exempt From Income Tax

2014

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

Open to Public Inspection

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

▶ Information about Form 990-EZ and its instructions is at www.irs.gov/form990.

Department of the Treasury
Internal Revenue Service

A For the 2014 calendar year, or tax year beginning , 2014, and ending , 20

B Check if applicable:

- ☐ Address change
☐ Name change
☐ Initial return
☐ Final return/terminated
☐ Amended return
☐ Application pending

C Name of organization

North Florida Springs Alliance

Number and street (or P.O. box, if mail is not delivered to street address)

12087 SW US 27

City or town, state or province, country, and ZIP or foreign postal code

Fort White, FL 32038

D Employer identification number

83-0496195

E Telephone number

704-299-0733

F Group Exemption

Number ▶

G Accounting Method: ☒ Cash ☐ Accrual Other (specify) ▶

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

I Website: ▶ northfloridaspringsalliance.org

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) below) 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	8428.78
	2	Program service revenue including government fees and contracts	2	
	3	Membership dues and assessments	3	4487.95
	4	Investment income	4	
	5a	Gross amount from sale of assets other than inventory	5a	
	b	Less: cost or other basis and sales expenses	5b	
	c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	0
	6	Gaming and fundraising events		
	a	Gross income from gaming (attach Schedule G if greater than \$15,000)	6a	0
	b	Gross income from fundraising events (not including \$ 0 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	0
c	Less: direct expenses from gaming and fundraising events	6c	0	
d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d	0	
7a	Gross sales of inventory, less returns and allowances	7a	286	
b	Less: cost of goods sold	7b	88	
c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	198	
8	Other revenue (describe in Schedule O)	8		
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 ▶	9	12434.72	
Expenses	10	Grants and similar amounts paid (list in Schedule O) SEE PART III	10	9867.75
	11	Benefits paid to or for members	11	
	12	Salaries, other compensation, and employee benefits	12	
	13	Professional fees and other payments to independent contractors	13	634.20
	14	Occupancy, rent, utilities, and maintenance	14	
	15	Printing, publications, postage, and shipping	15	2203.37
	16	Other expenses (describe in Schedule O)	16	
	17	Total expenses. Add lines 10 through 16 ▶	17	12705.32
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	(270.60)
	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	19203.27
	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	18932.67

For Paperwork Reduction Act Notice, see the separate instructions.

Cat. No. 106421

Form **990-EZ** (2014)

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	19203.27	22
23 Land and buildings		23
24 Other assets (describe in Schedule O)		24
25 Total assets		25
26 Total liabilities (describe in Schedule O)		26
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	19203.27	27 18932.67

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? CSO Florida State Parks

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

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

28 TAG Grant to purchase a second hydro unit for fauna counts which gather data on aquifer health and trends		
(Grants \$ 8428.27) If this amount includes foreign grants, check here <input type="checkbox"/>	28a	9867.75
29 Built Benches at Madison State Park providing a safe area for divers to handle their gear		
(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	29a	972.37
30 Annual Workshop to promote awareness of park benefits and advanced skills for cave diving		
(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	30a	857.95
31 Other program services (describe in Schedule O)		
(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	31a	
32 Total program service expenses (add lines 28a through 31a)	32	11698.07

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
Kelly Jessop Chair	10	0	0	0
Jim Womble Secretary	10	0	0	0
Jon Bernot Director at Large	10	0	0	0
Bobby Franklin Director at Large	10	0	0	0
Jerry Murphy Director at Large	10	0	0	0
Linda Rennaker Strait Director at Large	10	0	0	0
Sandy Robinson Director at Large	10	0	0	0

Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V ☐

	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 ▶ 37a 0		
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 38b		
39 Section 501(c)(7) organizations. Enter:		
a Initiation fees and capital contributions included on line 9 39a		
b Gross receipts, included on line 9, for public use of club facilities 39b		
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		✓
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 ▶		
d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization ▶		
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 ▶ <u>Florida</u>		
42a The organization's books are in care of ▶ <u>Robert Franklin</u> Telephone no. ▶ <u>704-299-0733</u> Located at ▶ <u>445 Melbourne Ln, Spartanburg SC</u> ZIP + 4 ▶ <u>29301</u>		
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: ▶ 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 U.S.? If "Yes," enter the name of the foreign country: ▶		
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 ▶ 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)		✓

- 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

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

Part VI Section 501(c)(3) organizations only

All section 501(c)(3) organizations must answer questions 47–49b and 52, and complete the tables for lines 50 and 51.

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

- 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

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

- 48** Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

48		<input checked="" type="checkbox"/>
-----------	--	-------------------------------------

- 49a** Did the organization make any transfers to an exempt non-charitable related organization?

49a		<input checked="" type="checkbox"/>
------------	--	-------------------------------------

- 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
None				

f Total number of other employees paid over \$100,000 **0**

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

(a) Name and business address of each independent contractor	(b) Type of service	(c) Compensation
None		

d Total number of other independent contractors each receiving over \$100,000 **0**

- 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

Date

Robert Franklin

Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name

Preparer's signature

Date

Check ☐ 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



Exempt Organizations Select Check[Exempt Organizations Select Check Home](#)990-N (*e-Postcard*) filer Information

Tax Period:

2014 (01/01/2014 - 12/31/2014)

Employer Identification Number (EIN):

83-0496195

Legal Name:

NORTH FLORIDA SPRINGS ALLIANCE

Mailing Address:4124 Bess Rd
Jacksonville, FL 32277
United States**Doing Business As:****Gross receipts not greater than:**

\$50,000

Organization has terminated:

No

Principal Officer's Name and Address:Kelly Jessop
1019 Harrold Ave
Americus, GA 31709
United States**Website URL:**www.northfloridaspringalliance.org/

Related 990-N (*ePostcard*) Filings:

If the organization has filed additional Forms 990-N (*e-Postcards*), link(s) to additional *e-Postcard* filings are displayed below. Click on the link(s) to see the information included in those filing(s).

[Tax Year 2013](#)[Return to Search Results](#) [Return to Search Page](#)

Suwannee River State Park
3631 201st Path
Live Oak, Florida 32060
(386) 362-2746

This Value of Contributed Services is provided by the staff of Wes Skiles Peacock Springs, Madison Blue Spring, Lafayette Blue Springs, Troy Springs, and Suwannee River State Parks, Division of Recreation and Parks, Department of Environmental Protection.

A summary of contributed services to North Florida Springs Alliance, Inc. for the period of January 1, 2014 to December 30, 2014 is as follows:

Staff Support:

The park contributed a total of \$ 769.10 in staff support services to North Florida Springs Alliance, Inc.

Staff support, including the time management spends at citizen support organization functions and activities, and park staff support of special events.

Cost of Park Facilities:

The cost of park facilities was \$70.00 to support the North Florida Springs Alliance, Inc.

The **costs of park facilities** which are normally rented for functions, and which are provided at no cost to the citizen support organization. The formula utilizes the current fee schedule for determining value.

Cost of Park Revenue:

The park fees waived for special events was \$186.00 in support of North Florida Springs Alliance, Inc.

Costs of park revenue when entrance fees are waived for special events. These shall be based on the \$2.00 per head fees as established for groups. Utilize the current fee schedule for determining value.

Total Value of Contributed Services: \$1,025.10