

Florida Department of Environmental Protection

CITIZEN SUPPORT ORGANIZATION 2014 REPORT

IMPLEMENTATION OF COMMITTEE SUBSTITUTE SENATE BILL 1194

Citizen Support Organization (CSO) Name: Citizens for the St. Sebastian Preserve, Inc.

Mailing Address: 1000 Buffer Preserve Dr. Fellsmere, FL 32948

Telephone Number: (321) 961-1884 Website Address (if applicable): www.nbbd.com/npr/cpa

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:

To provide both financial and volunteer support to the Park.

Brief Description of the CSO's Results Obtained:

The CSO's Annual Horseback Poker Ride in November 2013 raised two thousand dollars for the Park. The CSO has helped buy park equipment, supplies for equestrian projects, supplies for prescribed fire management and helped fund Scrub Jay and Red-Cockaded Woodpecker research.

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

The CSO goal for the next three years will be to continue providing financial and volunteer support to the Park as needed.

- **x** Copy of the CSO's Code of Ethics attached
- X 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

Citizens for the St. Sebastian Preserve, Inc. CODE OF ETHICS

PREAMBLE

- (1) It is essential to the proper conduct and operation of Citizens for the St. Sebastian Preserve, Inc. (herein "CSO") that its board members, officers, and employees be independent and impartial and that their position not be used for private gain. Therefore, the Florida Legislature in Section 112.3251, Florida Statute (Fla. Stat.), requires that the law protect against any conflict of interest and establish standards for the conduct of CSO board members, officers, and employees in situations where conflicts may exist.
- (2) It is hereby declared to be the policy of the state that no CSO board member, officer, or employee shall have any interest, financial or otherwise, direct or indirect, or incur any obligation of any nature which is in substantial conflict with the proper discharge of his or her duties for the CSO. To implement this policy and strengthen the faith and confidence of the people in Citizen Support Organizations, there is enacted a code of ethics setting forth standards of conduct required of Citizens for the St. Sebastian Preserve, Inc. board members, officers, and employees in the performance of their official duties.

STANDARDS

The following standards of conduct are enumerated in Chapter 112, Fla. Stat., and are required by Section 112.3251, Fla. Stat., to be observed by CSO board members, officers, and employees.

1. Prohibition of Solicitation or Acceptance of Gifts

No CSO board member, officer, or employee shall solicit or accept anything of value to the recipient, including a gift, loan, reward, promise of future employment, favor, or service, based upon any understanding that the vote, official action, or judgment of the CSO board member, officer, or employee would be influenced thereby.

2. Prohibition of Accepting Compensation Given to Influence a Vote

No CSO board member, officer, or employee shall accept any compensation, payment, or thing of value when the person knows, or, with reasonable care, should know that it was given to influence a vote or other action in which the CSO board member, officer, or employee was expected to participate in his or her official capacity.

3. Salary and Expenses

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

4. Prohibition of Misuse of Position

A CSO board member, officer, or employee shall not corruptly use or attempt to use one's official position or any property or resource which may be within one's trust, or perform official duties, to secure a special privilege, benefit, or exemption.

5. Prohibition of Misuse of Privileged Information

No CSO board member, officer, or employee shall disclose or use information not available to members of the general public and gained by reason of one's official position for one's own personal gain or benefit or for the personal gain or benefit of any other person or business entity.

6. Post-Office/Employment Restrictions

A person who has been elected to any CSO board or office or who is employed by a CSO may not personally represent another person or entity for compensation before the governing body of the CSO of which he or she was a board member, officer, or employee for a period of two years after he or she vacates that office or employment position.

7. Prohibition of Employees Holding Office

No person may be, at one time, both a CSO employee and a CSO board member at the same time.

8. Requirements to Abstain From Voting

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

9. Failure to Observe CSO Code of Ethics

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

Form **990-EZ**

Short Form Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No. 1545-1150 2012

Open to Public

Department of the Treasury Internal Revenue Service

Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions). All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000 at the end of the year may use this form.

Inspection

► The organization may have to use a copy of this return to satisfy state reporting requirements. A For the 2012 calendar year, or tax year beginning 2012, and ending . 20 C Name of organization B Check if applicable: D Employer identification number Address change Citizens for the St. Sebastian Preserve Inc. 20-0910984 Name change Number and street (or P.O. box, if mail is not delivered to street address) E Telephone number Initial return 1000 Buffer Preserve Drive 321-953-5005 Terminated City or town, state or country, and ZIP + 4 F Group Exemption Amended return Number > Application pending Felesmere, FL 32049 H Check ▶ ☐ if the organization is not Accrual Other (specify) Website: ▶ required to attach Schedule B (Form 990, 990-EZ, or 990-PF) J Tax-exempt status (check only one) —

501(c)(3) 501(c) () ◀ (insert no.) ☐ 4947(a)(1) or 527 if the organization is not a section 509(a)(3) supporting organization or a section 527 organization and its gross receipts are normally not more than \$50,000. A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcard) may be required (see instructions). But if the organization chooses to file a return, be sure to file a complete return. 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, line 25, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ 284 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... 2177 2 Program service revenue including government fees and contracts 2 3 3 Membership dues and assessments 235 4 Investment income 4 5a 5a Gross amount from sale of assets other than inventory Less: cost or other basis and sales expenses Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) . 5c Gaming and fundraising events 6 Gross income from gaming (attach Schedule G if greater than Revenue 6a 2177 of contributions Gross income from fundraising events (not including \$ from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000) . . . 2022 Less: direct expenses from gaming and fundraising events . . . 6c 284 Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract 6d 1738 7a Gross sales of inventory, less returns and allowances 52 7b Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) . 7c 52 8 Other revenue (describe in Schedule O) 8 9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 9 4202 10 Grants and similar amounts paid (list in Schedule O) . 10 Benefits paid to or for members 11 11 12 Salaries, other compensation, and employee benefits . 12 Professional fees and other payments to independent contractors . 13 13 14 14 Occupancy, rent, utilities, and maintenance 15 Printing, publications, postage, and shipping 15 16 16 17 Total expenses. Add lines 10 through 16 . 17 5446 Excess or (deficit) for the year (Subtract line 17 from line 9) 18 18 -1244 Net Assets 19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with 19 11931

11931

20 21

Other changes in net assets or fund balances (explain in Schedule O) . . .

Net assets or fund balances at end of year. Combine lines 18 through 20

20

Part	Other Information (Note the Schedule A and personal benefit contract statement requirement	s in th	ne		
	instructions for Part V) Check if the organization used Schedule O to respond to any question in this	Part	٧ .	. 🗆	
		r	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)				
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business	34		√	
L.	activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a 35b		✓	
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 III	35c		1	
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		143		
ь 38а	Did the organization file Form 1120-POL for this year?	37b 38a		1	
b	If "Yes," complete Schedule L, Part II and enter the total amount involved				
39	Section 501(c)(7) organizations. Enter:		100 100 100		
a	Initiation fees and capital contributions included on line 9				
40a	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 ▶ ; section 4912 ▶ ; section 4955 ▶				
b	Section 501(c)(3) and 501(c)(4) 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				
С	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on	40b			
	organization managers or disqualified persons during the year under sections 4912, 4955, and 4958				
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization		4.5		
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			
41	List the states with which a copy of this return is filed ▶				
42a	The organization's books are in care of ▶ Telephone no. ▶				
	Located at ► ZIP + 4 ►				
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)?	42b	Yes	No √	
	If "Yes," enter the name of the foreign country: ► See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank		100		
	and Financial Accounts.				
c	At any time during the calendar year, did the organization maintain an office outside the U.S.?	42c		✓	
43	If "Yes," enter the name of the foreign country: ► Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 —Check here		. 1	▶ □	
	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	440	Yes	No	
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	44a 44b			
С	Did the organization receive any payments for indoor tanning services during the year?	440 44c		1	
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	44d		→	
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		1	
45b	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)	45b		✓	

Form 990	D-EZ (2012)					F	age 4	
	Did the organization engage, directly					Yes	No	
	to candidates for public office? If "Y		C, Part I		· · 46			
Part V				50				
	All section 501(c)(3) organiza	ations must answer qu	estions 47–49b and	52, and complete	the tables t	for lin	es	
	50 and 51							
	Check if the organization use	d Schedule O to respon	d to any question in t	this Part VI	· · · · · · · · · · · · · · · · · · ·	<u> </u>	. 🗸	
			==			Yes	No	
	Did the organization engage in lobby year? If "Yes," complete Schedule C		section 501(h) election		he tax		1	
48	Is the organization a school as descri	bed in section 170(b)(1)(A)	(ii)? If "Yes." complete	Schedule E	48	†	1	
	Did the organization make any transf		•		49a	 -	1	
	If "Yes," was the related organization	•	•		49b		- -	
	Complete this table for the organization				l		d key	
	employees) who each received more		· -				_	
	cinpleyeed, who eden received more			(d) Health benefits,	T T	-		
	(a) Name and title of each employee paid more than \$100,000	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	contributions to employ benefit plans, and defend compensation		(e) Estimated amount of other compensation		
			ļ	Compensation	-			
-								
			+					
				 				
f	Total number of other employees pa	id over \$100,000	▶					
51	Complete this table for the organization	ation's five highest comp	ensated independent	contractors who ea	ach received	more	than	
	\$100,000 of compensation from the	organization. If there is n	one, enter "None."					
(a) Name and address of each independent contractor paid more than \$100,000			(b) Type of serv	vice	(c) Compensation			
		——————————————————————————————————————						
			7					
d	Total number of other independent of	contractors each receiving	over \$100,000	>				
	Did the organization complete Scheo	•	· ·	and 4947(a)(1)				
	nonexempt charitable trusts must at		.	s and 4347 (a)(1)	. ▶ ☐ Yes	· 🕖	Nο	
	enalties of perjury, I declare that I have examine- rect, and complete. Declaration of preparer (oth				/ knowledge and	a bellet,	IT IS	
	61400	Carl		1111	22 / 20	, 13		
Sign	Signature of Officer	C. CA.		Date	ex lac	<i>)</i> • • • •	,	
Here		road The	SWET		•			
11010	Type or print name and title	TOBELL THE	Sicret					
D	Print/Type preparer's name	Preparer's signature	Da	ate	PTIN			
Paid		,		Check self-em	☐ if [
Prepa			<u> </u>					
Use C		<u> </u>		Firm's EIN ▶				
May the	Firm's address ► e IRS discuss this return with the pre	narer shown above? See	instructions	Phone no.	. ▶ ☐ Yes	. [7.	No	
Tridy till	o ir io allocado allo fotalli mini nie bie	Paror Silowii above: See		<u> </u>	· - 🗀 168	<u>. L_l</u>	40	

Schedule O

St. Sebastian River Preserve State Park 1000 Buffer Preserve Drive Fellsmere, Florida 32948 (321) 953-5005

Other Expenses:

Equipment & supplies	\$2775
Threatened or Endangered Species	2296
Volunteer Recognition	91

\$5162