Florida Department of Environmental Protection

CITIZEN SUPPORT ORGANIZATION
2017 REPORT
(pursuant to Florida Statute 20.058)

Citizen Support Organization (CSO) Name: Friends of Talbot Islands State Parks, Inc.

Mailing Address: 12157 Heckscher Drive, Jacksonville, FL 32226

Telephone Number: 904-277-4352 Website Address (if applicable): www.talbotislands.com

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 support the seven parks that make up Talbot Islands State Parks financially and with volunteer efforts.

Brief Description of the CSO’s Results Obtained:
The year 2016 was a difficult year for Friends of Talbot Islands State Parks, Inc. With the sudden resignation of our president, the Board two remaining Board members had only 5 months of experience with the organization. At year’s end, however, the 2 remaining Board members recruited 3 additional Board members who are also very enthusiastic and engaged in growing the organization in 2017.

Brief Description of the CSO’s Plans for Next Three Fiscal Years:
We intend to make a greater impact by forming collaborations with other organizations whose objectives are similar to ours — examples of those being the Timucuan Parks Foundation, Florida Native Plant Society, and Keep Nassau Beautiful. We expect that these collaborations will provide some knowledge we do not explicitly have in house and will provide funding for educational publications and resources that will enhance our general support of the Parks.

In planning for the next two years, we have focused ourselves on two elements —

1) Increasing the amount of funds available to support our Parks. We are evaluating several fund-raising possibilities for future years so that we can begin planning and staging for those event(s). In addition, in the current year, we are adding to items that can be sold at the Ranger station as a means of having a more immediate impact on our revenue.

2) Increasing the number of members we have. Our problems with membership have a great deal to do with our location — on either side of the Parks, there is a considerable drive required to get to meetings and events in the Parks. We have two distinct areas from which to draw members and that will require two membership efforts. So we are devising strategies for friend-raiser events that will appeal to both sides of the Park.

☒ 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
PREAMBLE

(1) It is essential to the proper conduct and operation of Friends of Talbot Islands State Parks (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 insubstantial 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 Friends of Talbot Islands State Parks 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.
**Form 990-EZ**

**Return of Organization Exempt From Income Tax**

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.

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

### A. For the 2016 calendar year, or tax year beginning , 2016, and ending , 2020

<table>
<thead>
<tr>
<th>Field</th>
<th>Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>C Name of organization</td>
<td>Friends of Talbot Islands State Parks, Inc</td>
</tr>
<tr>
<td>E Telephone number</td>
<td>904-277-4352</td>
</tr>
<tr>
<td>H Check if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)</td>
<td></td>
</tr>
</tbody>
</table>

### B. Check if applicable:

- Address change
- Name change
- Initial return
- Final return/nondeductible
- Amended return
- Application pending

### D. Employer Identification number

| Number and street (or P.O. box, if mail is not delivered to street address) |
| Floor suite |
| 12157 Heckscher Dr |
| Jacksonville, FL 32226 |

### I. Website: [www.talbotislands.com](http://www.talbotislands.com)

### J. Tax-exempt status (check only one) — [☐] 501(c)(3) [☐] 501(c)(4) [☐] 501(c)(5) [☐] 501(c)(6) [☐] 4947(a)(1) or [☐] 527

### K. Form of organization: ☐ Corporation ☐ Trust ☐ Association ☐ Other

### L. Add lines 5b, 6a, and 7b to line 9 to determine gross receipts. If gross receipts are $200,000 or more, or if total assets (Part II, column (G) 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.

<table>
<thead>
<tr>
<th>Revenue</th>
<th>Expenses</th>
<th>Net Assets</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Contributions, gifts, grants, and similar amounts received</td>
<td>10. Grants and similar amounts paid (list in Schedule O)</td>
<td>18. Excess or (deficit) for the year (Subtract line 17 from line 9)</td>
</tr>
<tr>
<td>2. Program service revenue including government fees and contracts</td>
<td>11. Benefits paid to or for members</td>
<td>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)</td>
</tr>
<tr>
<td>3. Membership dues and assessments</td>
<td>12. Salaries, other compensation, and employee benefits</td>
<td>19. Other changes in net assets or fund balances (explain in Schedule O)</td>
</tr>
<tr>
<td>4. Investment income</td>
<td>13. Professional fees and other payments to independent contractors</td>
<td>20. Net assets or fund balances at end of year. Combine lines 18 through 20</td>
</tr>
<tr>
<td>5a. Gross amount from sale of assets other than inventory</td>
<td>5b. Less: cost or other basis and sales expenses</td>
<td>21. Net assets or fund balances at end of year. Combine lines 18 through 20</td>
</tr>
<tr>
<td>5c. Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)</td>
<td>6d. Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)</td>
<td>☐</td>
</tr>
<tr>
<td>6a. Gross income from gambling (attach Schedule G if greater than $15,000)</td>
<td>6b. Less: direct expenses from gambling and fundraising events</td>
<td>7a. Gross sales of inventory, less returns and allowances</td>
</tr>
</tbody>
</table>

For Paperwork Reduction Act Notice, see the separate instructions.
45 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I ................. 46 Yes No

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 taxable year? If "Yes," complete Schedule C, Part II ................................. 47 Yes

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

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

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 (Form W-2/1099-MISC)
(d) Health benefits, contributions to employee benefit plans, and deferred compensation
(e) Estimated amount of other compensation

None

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 .................................

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

Signature of officer

WORKSHEET ONLY

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 address ▶
Firm's EIN ▶
Phone no.

May the IRS discuss this return with the preparer shown above? See instructions ................................. 53 Yes No

Form 990-EZ (2016)
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. 

[Choose Yes or No] Yes ☐ No ☑

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).

[Choose Yes or No] Yes ☐ No ☑

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)?

[Choose Yes or No] Yes ☐ No ☑

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.

[Choose Yes or No] Yes ☐ No ☑

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.

[Choose Yes or No] Yes ☐ No ☑

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.

[Choose Yes or No] Yes ☐ No ☑

37a. Enter amount of political expenditures, direct or indirect, as described in the instructions.

[Enter Amount] 

37b. Did the organization file Form 1120-POL for this year?

[Choose Yes or No] Yes ☐ No ☑

38a. Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?

[Choose Yes or No] Yes ☐ No ☑

b. If “Yes,” complete Schedule L, Part II and enter the total amount involved.

[Enter Amount] 

39. Section 501(c)(7) organizations. Enter:

a. Initiation fees and capital contributions included on line 9.

[Enter Amount] 

b. Gross receipts, included on line 9, for public use of club facilities.

[Enter Amount] 

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.

[Choose Yes or No] Yes ☐ No ☑

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.

[Enter Amount] 

d. Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization.

[Enter Amount] 

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.

[Choose Yes or No] Yes ☐ No ☑

41. List the states with which a copy of this return is filed:

Florida

42a. The organization’s books are in care of ☐ Margaret Bellucci Telephone no. ☐ 604-277-4352

Located at ☐ 12157 Hecksher Dr, Jacksonville, FL ZIP + 4 ☐ 32212-2528

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).

[Choose Yes or No] Yes ☐ No ☑

c. At any time during the calendar year, did the organization maintain an office outside the United States?

[Choose Yes or No] Yes ☐ No ☑

43. Section 4947(a)(1) nonexempt 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.

[Choose Yes or No] 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.

[Choose Yes or No] 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.

[Choose Yes or No] Yes ☐ No ☑

c. Did the organization receive any payments for indoor tanning services during the year?

[Choose Yes or No] Yes ☐ No ☑

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.

[Choose Yes or No] Yes ☐ No ☑

45a. Did the organization have a controlled entity within the meaning of section 512(b)(13)?

[Choose Yes or No] Yes ☐ No ☑

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).

[Choose Yes or No] Yes ☐ No ☑
## 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.

<table>
<thead>
<tr>
<th></th>
<th>(A) Beginning of year</th>
<th>(B) End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>22</td>
<td>Cash, savings, and investments</td>
<td>39,402</td>
</tr>
<tr>
<td>23</td>
<td>Land and buildings</td>
<td>23</td>
</tr>
<tr>
<td>24</td>
<td>Other assets (describe in Schedule O)</td>
<td>24</td>
</tr>
<tr>
<td>25</td>
<td>Total assets</td>
<td>39,402</td>
</tr>
<tr>
<td>26</td>
<td>Total liabilities (describe in Schedule O)</td>
<td>26</td>
</tr>
<tr>
<td>27</td>
<td>Net assets or fund balances (line 27 of column (B) must agree with line 21)</td>
<td>39,402</td>
</tr>
</tbody>
</table>

## 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.

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

**What is the organization's primary exempt purpose?** Provide financial and volunteer support to 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.

28 Volunteer appreciation: provide funds to allow park to thank volunteers for their efforts during the year

(Grants $ ) If this amount includes foreign grants, check here □ □ 28a 695

29

(Grants $ ) If this amount includes foreign grants, check here □ □ 29a

30

(Grants $ ) If this amount includes foreign grants, check here □ □ 30a

31 Other program services (describe in Schedule O)

(Grants $ ) If this amount includes foreign grants, check here □ □ 31a

32 Total program service expenses (add lines 28a through 31a) 695

## 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.

<table>
<thead>
<tr>
<th>Name and title</th>
<th>Average hours per week devoted to position</th>
<th>Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)</th>
<th>Health benefits, contributions to employee benefit plans, and related compensation</th>
<th>Estimated amount of other compensation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Corey Dettermann, President</td>
<td>5</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Margaret Bellucci, Treasurer</td>
<td>5</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Elizabeth Guthrie, Secretary</td>
<td>5</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>
Supplemental Information to Form 990 or 990-EZ

Friends of Talbot Islands State Park, Inc.

Page 1, Line 16, Other expenses:

- Internet related fees: $205
- Banking fees: $90
- Postage & delivery: $18
- Marketing, including fundraisers: $887
- Sales tax: $1,199
- Misc exp: $233
Exempt Organizations Select Check
990-N (e-Postcard) filer Information

Tax Period:
2015 (10/01/2015 - 09/30/2016)

Employer Identification Number (EIN):
59-3467037

Legal Name:
FRIENDS OF TALBOT ISLANDS STATE PARKS INC

Mailing Address:
PO Box 16982
Fernandina Beach, FL 32035
United States

Doing Business As:

Gross receipts not greater than:
$50,000

Organization has terminated:
No

Principal Officer's Name and Address:
Margaret Bellicci
PO Box 16982
Fernandina Beach, FL 32035
United States

Website URL:

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 2008
Tax Year 2009
Tax Year 2010
Tax Year 2011
Tax Year 2014

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