

Florida Department of Environmental Protection

CITIZEN SUPPORT ORGANIZATION 2015 REPORT

(pursuant to Florida Statute 20.058)

Citizen Support Organization (CSO) Name: Friends of Torreya State Park

Mailing Address: 2576 NW Torreya Park Rd., Bristol, FL 32321

Telephone Number: 850-557-1536 Website Address (if applicable):

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 generate and employ additional resources and support of and in the best interest of Torreya State Park. Through; Events, Community Support, Additional aid and support, Education, Interpretive Support and Visitor Support.

Brief Description of the CSO's Results Obtained:

Multi-Year Events, Purchased supplies for Historic Gregory House, Provided Washer and Dryer for campers, Firewood for campers, ice for campers, staff support to park management, Native Plant Arboretum for park visitors, Technology support for park

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

Continue Native Plant Arboretum, purchase additional interpretive information for Arboretum and CCC/Gregory House; Continue Annual Candlelight Tour Event, Continue Firewood for campers, Continue ICE and Laundry Support for campers, Continue to support park management ideas and needs criteria.

- ☑ 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

Model CSO Code of Ethics – June 2014

Accepted July, 16 2014 Friends of Torreya State Park CODE OF ETHICS

PREAMBLE

- (1) It is essential to the proper conduct and operation of Friends of Torreya State Park (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 Friends of Torrey State Park 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

Model CSO Code of Ethics – June 2014

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.

Memorandum

December 12, 2014

TO: Danny Jones, Bureau Chief

District 1 Administration

THROUGH: Carmen McDonald, PPDS

District 1 Administration

FROM: Steven Cutshaw, Park Manager

Torreya State Park

SUBJECT: Annual Financial Report for Friends of Torreya State Park, Inc.

Please accept the attached Friends of Torreya State Park, Inc. annual financial report for their fiscal year 2013-2014

The CSO continued to stay true to their mission of supporting Torreya State Park. The Friends continue to assist with species mapping, monitoring and management. The following is a list of the fantastic accomplishments the Friends have accomplished this year. They continue to provide great community outreach for the park.

Planned, coordinated and implemented the 22nd Annual Candlelight Tour Event.

Planned and implemented several interpretive hikes.

Provided firewood for campgrounds.

Surveyed / mapped Torreya Trees.

Worked diligently on the native plant arboretum.

"They may be small in number but they are mighty in power".

cc: file

Friends of Torreya State Park 2576 NW Torreya Park Rd Bristol, FL 32321

January 1, 2015

Park Manager Steven Cutshaw 2576 NW Torreya Park Rd Bristol, FL 32321

Dear Mr. Cutshaw:

Pleased find attached the 2013-2014 Annual Financial Statements for the Friends of Torreya State Park, Inc.

Our Citizen Support Organization (CSO) has achieved several objectives this fiscal year. Highlights are as follows:

- -Planned, coordinated and implemented the 25th Annual Candlelight Tour Event
- -Provided firewood for campgrounds
- -Provided laundry facilities for campground.
- -Rare Species Monitoring/Research
- -Community Outreach
- -Purchased computer printers, copiers and furniture for use in the park

In the coming year, the CSO has the following goals:

- -Continue CCC Event
- -Conduct community involvement programs
- -Provide services to visitors
- -Support ecological restoration activities
- -Conduct rare species monitoring
- -Create native garden at Gregory House parking area

Sincerely,

Bill Anderson, Treasurer

Financial Report Florida Park Service Citizens Support Organization

Organization's Name: Friends of Torreya State Park, Inc.

Fiscal Year: 2013-2014

Statement of Assets & Liabilities Resulting from Cash Transactions

Year ended	2013-2014	2012-2013
Assets		
Cash:	0.00	0.00
Checking Amount	1,405.48	1844.79
Cash on hand:	0.00	0.00
Savings:	4,533.48	7000.00
Money Market:	0.00	0.00
Property:	0.00	0.00
Other:	0.00	0.00
Total Assets:	5,938.96	8,844.79
Liabilities and Net Assets		
Liabilities		
Debt		
Total Liabilities	0.00	0.00
Net Assets		
Unrestricted		
Total Available for operations	5,938.96	8,844.79

State of Cash Receipts, Expenditures and Scholarships Paid

Unrestricted net assets	Totals
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Receipts and other support	Operations	Long Term	Unrestricted net assets	Restricted net asset	2013-2014	2012-2013
Receipts and other support						
Contributions (Donations)	4159.95	0.00	0.00	0.00	4159.95	4187.50
Membership Dues	0.00	0.00	0.00	0.00	0.00	0.00
Special Events Programs	525.00	0.00	0.00	0.00	525.00	0.00
Net Special Events Programs	0.00	0.00	0.00	0.00	0.00	0.00
Governmental Support	0.00	0.00	0.00	0.00	0.00	0.00
Savings Interest	6.18	0.00	0.00	0.00	6.18	
Total receipts and other Supp	ort 4684.95	0.00	0.00	0.00	4684.95	4187.50
Disbursements						
Program services	372.44	0.00	0.00	0.00	372.44	239.04
Management and General	7855.79	0.00	0.00	0.00	7855.79	4499.64
Total Disbursements	8228.23	0.00	0.00	0.00	8228.23	4738.68
Govt Support Change in Val			0.00	0.00	0220.23	1 730.00
Change in net assets	uc 0.00	•				
Net assets at beginning of ye	ar				9476.09	9396.38
Net asset correction, beginning					7470.07	7370.30
Net assets at the end of the ye	•				5938.99	8845.25

Financial Report	Florida Pa	ırk Service	Citizen Support Organization		
Statement of Functional Expenses	Supporting	Services		Totals	
	Program Services	Total Program Services	ManagementMembership & General Fundraising Development	Total Supporting Services 2013-2014	2012-2013
Personnel expenses					
Direct expenses Materials, supplies, equipment & rentals	7751.65	0.00	0.00	7751.65	2423.98
Food, entertainment & meals	449.68	0.00	0.00	449.68	429.21
Office expenses	0.00	0.00	0.00	0.00	0.00
Miscellaneous	0.00	0.00	0.00	0.00	0.00
Total direct expenses	8201.33	0.00	0.00	8201.33	4708.63
Total expenses before depreciation	8201.33	0.00	0.00	8201.33	4708.63
Total expenses after depreciation	8201.33	0.00	0.00	8201.33	4708.63
Total Expenses beginning of year	0.00	0.00	0.00	0.00	0.00
Total Expenses end of year	8201.33	0.00	0.00	8201.33	4708.63

Financial Report	Florida Park Service	Citizen Support Organization
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	Candlelight Tour Event Visitor Support Park Operations Support	Total 2013-2014	2012 2012	
Direct Expenses		2015-2014	2012-2013	
Materials, supplies, equipment, & rentals	4279.53	4279.53	4708.63	
Total direct expenses	4279.53	4279.53	4708.63	
Total Expenses before depreciation	4279.53	4279.53	4708.63	
Total Expenses after depreciation	4279.53	4279.53	4708.63	
Total Expenses beginning of year				
Total Expenses end of year	4279.53	4279.53	4708.63	

^{*}Includes any and all purchases or services which support visitor services
**Includes any and all purchases or services which support the general operation of the park

Financial Statement Disclosures

(1) Organization

Friends of Torreya State Park, Inc. (the Friends) is a not for profit organization incorporated under the laws of a tax exempt organization under the Internal Revenue Code. A copy of the official registration and financial info from the Division of Consumer Services by calling toll free 1-800-435-7352 within the State. Registration does approval or recommendations by the State. The Friends of Torreya State Park, Inc. is funded primarily from donations within the state of Florida. These contributions are used to fund activities and projects at Torreya State Park.

(2) Basis of accounting and presentation

(A) Basis of Accounting

The accompanying financial statements have been prepared on the modified cash basis.

(B) Basis of Presentation

Unrestricted Net Assets - \$5938.99

Temporarily Restricted Net Assets - N/A

Permanently Restricted Net Assets - N/A

(C) Present CSO financial polices, below, are some suggestions but not an exhaustive list:

Section 1. The fiscal year for Friends of Torreya State Park shall begin on July 1st and end on June 30th.

Section 2. The Board of Directors shall designate a bank or banks as the depository for the corporation funds.

Section 3. The Board shall adopt policies and procedures governing the control and expenditure of corporation Section 4. The Board of Directors may authorize an officer or employee to enter into any contract or execute a: of the corporation, and such authority shall be general or confined to specific instances. Unless so authorized no officer or employee shall have the power or authority to bind the Corporation.

(3) Value of Contributed Services

A summary of contributed services from Torreya State Park is as follows:

	2013-2014	2012-2013
Staff support	1,000	1,000
Park facilities	500	500
Park admission waived fees	500	500_
	\$2,000	\$2,000

Statement of Accomplishments and Goals Fiscal year 2013-2014

Name of Citizen Support Organization: Friends of Torreya State Park, Inc.

Address: 2576 NW Torreya Park Road City, State, Zip: Bristol, FL 32321

Estimated Volunteer Hours: 700 Total Membership: 5

Current list of Citizen Support Organization Board Members:

President Bob Gilley 7720 Lake Seminole Rd Sneads, FL 32460

Secretary Pam Anderson 6963 NW Torreya Park Rd Bristol, FL 32321 (850)643-2799 (home) Banderson@Nettally.com

Vice President Manning Miller P.O. Box 1155 Bristol, FL 32321 millermd@fairpoint.net

Treasurer
Bill Anderson
6963 NW Torreya Park Rd
Bristol, FL 32321
(850)643-2799 (home)
B.aoderson@Nettally.com

Summary of accomplishments:

Planned, coordinated and implemented the 25th Annual Candlelight Tour Event.

Provided firewood for campgrounds.

Provided laundry facilities for campground.

Rare Species Monitoring/Research

Community Outreach

Purchased air conditioner for barracks office

Summary of goals for the upcoming year:

Continue Event

Conduct community involvement programs

Provide services to visitors

Create native garden at Gregory House parking area

Memorandum

June 16, 2015

TO:

Danny Jones, Bureau Chief

District 1 Administration

THROUGH: Carmen C. McDonald, PPDS

District 1 Administration

FROM:

Steven Cutshaw, Park Manager

Torreya State Park

SUBJECT:

Annual Financial Report for Friends of Torreya State Park, Inc.

Please accept the attached Friends of Torreya State Park annual report for year 2014

The CSO continued to stay true to their mission of supporting Torreya State Park. The Friends continue to assist with species mapping, monitoring and management. The following is a list of the fantastic accomplishments the Friends have accomplished this year:

They continue to provide great community outreach for the park. Planned, coordinated and implemented the 22nd Annual Candlelight Tour Event. Planned and implemented several interpretive hikes. Provided firewood for campgrounds. Surveyed / mapped Torreya Trees

Worked diligently on the native plant arboretum

"They may be small in number but they are mighty in power".

SC

attachments

cc: file

Friends of Torreya State Park

2576 NW Torreya Park Rd Bristol, FL 32321

July 6, 2015

Park Manager, Steven Cutshaw 2576 NW Torreya Park Rd Bristol, FL 32321

Dear Mr. Cutshaw:

Pleased find attached the Financial Statements for the Friends of Torreya State Park, Inc.

Our Citizen Support Organization (CSO) has achieved several objectives this fiscal year. Highlights are as follows:

Planned, coordinated and implemented the Annual Candlelight Tour Event.

Provided firewood for campgrounds.

Provided ice for visitors.

Provided laundry facilities for campground.

Rare Species Monitoring/Research

Community Outreach

Ongoing work on the Native Plant Arboretum at the Gregory House

In the coming year, the CSO has the following goals:

Continue CCC Event
Conduct community involvement programs
Provide services to visitors
Support ecological restoration activities
Conduct rare species monitoring
Assist with other management needs and objectives

Sincerely,

William (Bob) Gilley President, Friends of Torreya State Park

990-EZ

Department of the Treasury

FOR DEP USE ONLY Short Form

Return of Organization Exempt From Income Tax

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

2011

2014

Open to Public

Inspection

OMB No. 1545-1150

Internal Revenue Service A For the 2014 calendar year, or tax year beginning

Do not enter social security numbers on this form as it may be made public. December 31 . 20 14 C Name effection about Form 990-EZ and its instructions is at www.irs.gov/for เมื่อชื่อployer identification number B Check if applicable: Address change Friends of Torreya State Park, Inc. 03-0443386 Room/suite Name change Number and street (or P.O. box, if mail is not delivered to street address) E Telephone number Initial return 2576 NW Torreya Park Rd 850-643-2799 Final return/terminated City or town, state or province, country, and ZIP or foreign postal code F Group Exemption Amended return Number > Application pending Bristol, Florida, 32321 ✓ Cash Accrual Other (specify) H Check ▶ ☐ if the organization is not G Accounting Method: I 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) (□527) ◀ (insert no.) ☐ 4947(a)(1) or K Form of organization:

✓ Corporation Other Trust Association 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 Contributions, gifts, grants, and similar amounts received . 1 1507.00 Program service revenue including government fees and contracts 2 2 3 3 Membership dues and assessments 4 4 Investment income 2.28 5a 5a Gross amount from sale of assets other than inventory 5b Less: cost or other basis and sales expenses Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) 6 Gaming and fundraising events Gross income from gaming (attach Schedule G if greater than Gross income from fundraising events (not including \$ 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 6c Less: direct expenses from gaming and fundraising events Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract 6d 7a Gross sales of inventory, less returns and allowances 7a Less: cost of goods sold Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) 7c С Other revenue (describe in Schedule O) 8 8 **Total revenue.** Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 9 9 1509.28 10 10 Grants and similar amounts paid (list in Schedule O) 11 Benefits paid to or for members 11 Salaries, other compensation, and employee benefits . . . 12 12 Professional fees and other payments to independent contractors 13 13 Occupancy, rent, utilities, and maintenance 14 14 15 Printing, publications, postage, and shipping 15 16 Other expenses (describe in Schedule O) 16 710.59 17 Total expenses. Add lines 10 through 16 17 710.59 Excess or (deficit) for the year (Subtract line 17 from line 9) 18 18 798.69 Net Assets Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with 19 end-of-year figure reported on prior year's return) 19 5939.40 20 20 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 6738.09

Pa	rt II Balance Sheets (see the instruction			_		
	Check if the organization used Sched	lule O to respond to a	ny question in this			<u> </u>
			-	(A) Beginning of year	-	(B) End of year
22	Cash, savings, and investments			5939.40	23	6738.09
23 24	Land and buildings				24	
25	Total assets				25	
26	Total liabilities (describe in Schedule O) .		: : : : : : t	10	26	
27	Net assets or fund balances (line 27 of colu		h line 21)	5939.40		6738.09
Par	t III Statement of Program Service Acco	omplishments (see t	ne instructions for			
	Check if the organization used Sched		ny question in this	Part III	(D	Expenses
Wha	t is the organization's primary exempt purpose?			<u> </u>		uired for section c)(3) and 501(c)(4)
as n	cribe the organization's program service accomneasured by expenses. In a clear and concise ons benefited, and other relevant information for	manner, describe th			orgar other	nizations; optional for s.)
28						
	(Grants \$) If this amou	unt includes foreign gr	ants, check here .	▶ 🗌	28a	
29						
	(O	unt in alcohol four income	anto abank bara		00-	
30		unt includes foreign gr			29a	
30						
	(Grants \$) If this amou	unt includes foreign gra	ants, check here .	▶ 🗆	30a	
31	Other program services (describe in Schedule (
200.200		unt includes foreign gra			31a	
	Total program service expenses (add lines 28				32	
Par	List of Officers, Directors, Trustees, and I Check if the organization used Sched					
	Check if the organization used Sched		(c) Reportable	(d) Health benefits,		🗆
www.	(a) Name and title	(b) Average hours per week devoted to position	compensation (Forms W-2/1099-MISC (if not paid, enter -0-)		ot	Estimated amount of her compensation
	Gilley					
Presi			()	0	0
	ing Miller President					0
	ila Anderson			,	-	
Secre					0	0
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Part				
	instructions for Part V) Check if the organization used Schedule O to respond to any question in this	Part	1	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	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)	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)?		•	,
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	35a 35b		1
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			
b 38a	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 38b			9.031
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 ▶ ; section 4912 ▶ ; section 4955 ▶			
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		1
С	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed	100		
	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			
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		1
41	List the states with which a copy of this return is filed ► Florida			
42a		350-64		9
-	Located at ► 6963 NW Torreya Park Rd Bristol FL ZIP + 4 ► At any time during the calendar year, did the organization have an interest in or a signature or other authority over	232		
D	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: ▶	420		
	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 U.S.?	42c		✓
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			2.28
			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		✓
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		1
С	Did the organization receive any payments for indoor tanning services during the year?	44c		√
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in School via O	100		
45	explanation in Schedule O	44d		√
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		√
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)	45b		1

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 William D Anderson Treasurer 06/26/2015 Type or print name and title Date Preparer's signature PTIN Print/Type preparer's name Paid Check if self-employed Preparer Firm's name Firm's EIN ▶ Use Only Firm's address ▶ Phone no. May the IRS discuss this return with the preparer shown above? See instructions ☐ Yes ■ No

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2014

Open to Public Inspection

Mairie	of the organization					Employer identification	n number
THE RESERVE OF THE PARTY OF THE	ds of Torreya State Park, Inc.	:	1		1 11 1	03-04	143386
	Reason for Public Cha organization is not a private found						ons.
1	A church, convention of church						
2	☐ A school described in section			1000 111 0	0011011	0(0)(1)(-)(1).	
3	A hospital or a cooperative ho			in sectio i	n 170(b)(1)(A)(iii).	
4	A medical research organization hospital's name, city, and star	on operated in c					(iii). Enter the
5	An organization operated for section 170(b)(1)(A)(iv). (Com		college or university	owned o	or operate	ed by a governmen	tal unit described in
6 7	☐ A federal, state, or local gover ☐ An organization that normally described in section 170(b)(1	receives a subs	stantial part of its sup				m the general public
8	☐ A community trust described			Part II.)			
9	An organization that normally				from con	tributions, members	ship fees, and gross
	receipts from activities relate support from gross investme acquired by the organization a	d to its exempt ent income and	functions—subject to unrelated business	o certain taxable i	exception (ns, and (2) no more less section 511 ta	e than 331/3% of its
10	An organization organized and	d operated exclu	sively to test for publi	c safety.	See sect	ion 509(a)(4).	
11	An organization organized and one or more publicly supporte the box in lines 11a through 11	d organizations of	described in section 5	09(a)(1) c	r section	509(a)(2). See sect	ion 509(a)(3). Check
а	☐ Type I. A supporting organization(sorganization. You must con	s) the power to re	egularly appoint or ele				
b	☐ Type II. A supporting organic control or management of the organization(s). You must control to the organization organization organization organization organization organization organization organization.	ne supporting org	ganization vested in th				
С	☐ Type III functionally integral its supported organization(s)						y integrated with,
d	☐ Type III non-functionally in that is not functionally integr requirement (see instructions	ated. The organi	ization generally must	satisfy a	distributi	ion requirement and	
е	Check this box if the organiz functionally integrated, or Ty						I, Type III
f	Enter the number of supported	organizations .					
g	Provide the following informatio	n about the supp	oorted organization(s).				
	(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	listed in you	organization ur governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			(000	Yes	No		
(A)							
(B)	8						
(C)					3,		
(D)							
(E)							

Par	t II Support Schedule for Organiza	ations Desci	ribed in Sect	ions 170(b)(1)(A)(iv) and	170(b)(1)(A)(v	ri)
	(Complete only if you checked the						
	Part III. If the organization fails to	qualify und	er the tests li	sted below, p	lease comple	ete Part III.)	
	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not				1		
	include any "unusual grants.")						
2	Tax revenues levied for the		1			Ø.	
	organization's benefit and either paid to or expended on its behalf						
_	CONTROL OF THE CONTRO						
3	The value of services or facilities furnished by a governmental unit to the						
	organization without charge						
4	Total. Add lines 1 through 3						
2001							
5	The portion of total contributions by each person (other than a						
	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)						1 6
6	Public support. Subtract line 5 from line 4.						
Sect	ion B. Total Support						
Caler	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7	Amounts from line 4						
8	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						
10	Other income. Do not include gain or						
	loss from the sale of capital assets (Explain in Part VI.)						
44							
11 12	Total support. Add lines 7 through 10 Gross receipts from related activities, etc.	(noo instruction	one)			10	_
13	First five years. If the Form 990 is for th					12	= F01(a)(0)
10	organization, check this box and stop her						
Secti	on C. Computation of Public Suppor		e				
14	Public support percentage for 2014 (line 6			1. column (fl)		14	%
15	Public support percentage from 2013 Sch					15	%
16a	331/3% support test-2014. If the organiz						
	box and stop here. The organization qual						
b	331/3% support test-2013. If the organ	ization did no	t check a box	on line 13 or	16a, and line	15 is 331/3%	or more,
	check this box and stop here. The organi	zation qualifies	s as a publicly	supported org	anization .		. ▶ □
17a	10%-facts-and-circumstances test-20	14. If the orga	nization did no	ot check a box	on line 13, 16	a, or 16b, and I	ine 14 is
	10% or more, and if the organization mee						
	Part VI how the organization meets the "fa	acts-and-circu	mstances" tes	t. The organiza	ation qualifies	as a publicly su	pported
	organization						. ▶ □
b	10%-facts-and-circumstances test-20	13. If the orga	nization did no	ot check a box	on line 13, 16	a, 16b, or 17a.	and line
	15 is 10% or more, and if the organizati	on meets the	"facts-and-cir	rcumstances"	test, check th	is box and sto	p here.
	Explain in Part VI how the organization me	eets the "facts	-and-circumst	ances" test. T	he organizatio	n qualifies as a	publicly
	supported organization	191 (9) (3) (3)					. ▶ □
18	Private foundation. If the organization did						
	instructions						. ▶ 🗆

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

(Complete only if you checked the box on line 9 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.)

Sect	ion A. Public Support	ander the ter	oto notou bon	544, prodoc 00	mpioto i dit i	1.,	
Caler	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and membership fees		•	, ,			9
	received. (Do not include any "unusual grants.")	2,829.67	1,170.78	4,187.50	4,159.95	1,507.00	13,854.90
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	376.00	377.42	0.00	525.00	0.00	1,278.42
3	Gross receipts from activities that are not an unrelated trade or business under section 513					3.33	1,270.12
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf			3			
5	The value of services or facilities furnished by a governmental unit to the organization without charge			2 0			
6 7a	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons .	3,205.67	1,548.20	4,187.50	4,684.95	1,507.00	15,133.32
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		-				
8 8	Add lines 7a and 7b						
Secti	on B. Total Support						15,133.32
	dar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9	Amounts from line 6	3,205.67	1,548.20	4,187.50	4,684.95	1,507.00	
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.	0.00	0.00	0.00	0.00	2.28	15,133.32
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975			3.00	3.00	2.20	2.20
С	Add lines 10a and 10b	0.00	0.00	0.00	0.00	2.28	2.28
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)	3,205.67	1,548.20	4,187.50	4,684.95	1,509.28	15,135.60
14	First five years. If the Form 990 is for the organization, check this box and stop her	е	E 140 PP (E)	l, third, fourth,			
	on C. Computation of Public Suppor			2.40	4114676		
15	Public support percentage for 2014 (line 8					15	99 %
16	Public support percentage from 2013 Sch	edule A, Part II	I, line 15 .			16	99 %
	on D. Computation of Investment Inc						
17	Investment income percentage for 2014 (li		1000			17	%
18	Investment income percentage from 2013					18	<u>%</u>
19a	331/3% support tests—2014. If the organization of the organization						
b	17 is not more than 331/3%, check this box a 331/3% support tests—2013. If the organization	ation did not ch	eck a box on li	ne 14 or line 19	a, and line 16	is more than 33	¹ /3%, and
	line 18 is not more than 331/3%, check this b						
20	Private foundation. If the organization did	not check a b	ox on line 14,	19a, or 19b, ch	neck this box a	nd see instruct	ions ▶ □

Part IV **Supporting Organizations**

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A. D. and F. If you checked 11d of Part I. complete Sections A and D. and complete Part V.)

Section	A.	All	Supporting	Organizations
---------	----	-----	------------	----------------------

organizations)? If "Yes," answer (b) below.

determine whether the organization had excess business holdings.)

200t	ion A All Supporting Organizations	an v	.)	
seci	ion A. All Supporting Organizations		Yes	No
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.	1	100	
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).	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a		
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.	3b		
С	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.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a		
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.	4b		
С	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.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) 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).	5a		
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?	5b		
6 6	Substitutions only. Was the substitution the result of an event beyond the organization's control? Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) 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.	5c		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990).	8		
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.	9a		
	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .	9b		
	Did a disqualified person (as defined in line 9(a)) 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.	9c		
l0a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting			

b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to

10a

10b

Part	IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	the person of th			
	below, the governing body of a supported organization?	11a		
	A family member of a person described in (a) above?	11b		
Sect	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI. ion B. Type I Supporting Organizations	11c		
Occi	on B. Type I Supporting Organizations	-	Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to		162	IVO
	regularly appoint or elect at least a majority of the organization's 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 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		
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.			
Sect	on C. Type II Supporting Organizations	2		
0000	on o. Type it supporting organizations		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		163	IAO
	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		
Secti	on D. All Type III Supporting Organizations			
			Yes	No
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, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?			
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	1		e La compa
~	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	120000	
3	By reason of the relationship described in (2), did the organization's supported organizations have a			13/19/
	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		
Secti	on E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see i	nstruc	tions	:):
а	☐ The organization satisfied the Activities Test. Complete line 2 below.			
b	☐ 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 government entity (s	ee inst	ructio	ns).
2	Activities Test. Answer (a) and (b) below.	Г	Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of	14.5	163	140
1.57	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.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," 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.			
_	The state of the s	2b		
3	Parent of Supported Organizations. <i>Answer (a) and (b) below</i> .			
а	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? <i>Provide details in Part VI.</i>			
h		3a		
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.	3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Or	ganiz	ations	
Check here if the organization satisfied the Integral Part Test as a qualifying other Type III non-functionally integrated supporting organizations must contain the containing of the cont	g trust implet	t on Nov. 20, 1970. See te Sections A through E	instructions. All
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1	7/	
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		
Section B - Minimum Asset Amount		(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):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c 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 1-1/2% 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 .035	6		
7 Recoveries of prior-year distributions	7		***
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 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-functionall instructions).	y-integ	grated Type III supporti	ng organization (see

Part	V Type III Non-Functionally Integrated 509(a)(3	3) Supporting Organi	zations (continued)	
Sect	ion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish	exempt purposes		
2	Amounts paid to perform activity that directly furthers exe			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purp	poses of supported orga	nizations	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)		<u> </u>	
6_	Other distributions (describe in Part VI). See instructions.			
	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which	th the organization is res	ponsive	
9	(provide details in Part VI). See instructions. Distributable amount for 2014 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount	3		
	Ellie 6 amount divided by Ellie 3 amount		(ii)	(iii)
S	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	Underdistributions Pre-2014	Distributable Amount for 2014
1	Distributable amount for 2014 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2014			
	(reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2014:			
a				
b				
c				
d	From 2013			
e f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
9	Applied to 2014 distributable amount			
i	Carryover from 2009 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2014 from Section D, line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2014 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2014, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions).			
6	Remaining underdistributions for 2014. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions).			
7	Excess distributions carryover to 2015. Add lines 3j and 4c.			
8	Breakdown of line 7:			
а				
b				
С				
d	Excess from 2013			
е	Excess from 2014			/Farm 000 at 000 F7) 0014

Schedule A (Form 990 or 990-EZ) 2014						Page	8	
Part VI	Supplemental Part III, line 12.	Information. F Also complete	Provide the ex this part for a	planations rea any additional	quired by Part information. (II, line 10; Part See instructions	II, line 17a or 17b; and s.)	_
								_
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								182

SCHEDULE O (Form 990 or 990-EZ)

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.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990 or 990-EZ.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Friends of Torreya State Park, Inc.	03-0443386
FORM 990-EZ, Part I Line 16 - Other Expenses:	
Non-concession Program \$710.59	
Part V Line 34 - Significant Changes:	n
Change of Accounting Period from Fiscal Year to Calendar Year. By-laws are being amended to ref	lect change and will be provided as
soon as completed.	
	·
*	

Schedule O (Form 990 or 990-EZ) (2014)	Page 2
Name of the organization	Employer identification number
	· a
	•••••
,	

Citizen Support Organization Statement on Value of Contributed Services

This statement reports on services provided to the Citizen Support Organization (CSO) from park staff support and in-kind support for the past fiscal year. The statement is part of the CSO's Annual Financial Report described in Chapter 5: Section 7 of the 2014 CSO Handbook. The primary purpose of the Annual Financial Report is to provide a summary of the most relevant information to the Department and Division, and to meet the common interests of donors, members, creditors, and others who provide resources to the not for profit organization.

This Value of Contributed Services for a park is provided to the CSO by the park or District through the Park Programs Development Specialist. Note, the Division of Recreation and Parks operates on a cash-based method of accounting.

Park Name: Torreya State Park

Park Address: 2576 NW Torreya Park Road, Bristol, FL 32321

Name of the CSO: Friends of Torreya State Park, Inc.

A summary of contributed services from the period of <u>January 1, 2014</u> through <u>December 31, 2014</u> is as follows:

Park Staff Support

The total number of hours contributed in staff support services converted to a monetary amount.

The park contributed a total of \$1,000 in staff support services to the CSO.

Park Facilities Support

The total amount of water, electric, and utility expenses used to support CSO events, concessions, etc.

The CSO received a total of \$1,000 in park facilities support.

In-Kind Support

The CSO receives additional services outside of the park staff contributed hours called in-kind services. In-kind services are a type of charitable giving in which, instead of money, a person contributes some kind of service, good, or commodity. Examples are professional services of a lawyer, accountant, or any professional or the estimated value of a good or commodity.

The CSO received a total of \$0.00 in in-kind support services.

List of Program Services

Federal charitable 501(c)(3) organizations are required to report total expenses and revenue for each program service. According to the IRS, a program service is any activity by the organization which accomplishes its charitable purposes.

For *each* program service provide a description, total expense, and total revenue. For *each* program service description, clearly and concisely describe the accomplishments through

specific measurements such as visitors served, days of an event, number of sessions or events held, publications issued, etc. (add pages as appropriate).

Program Service Description:	Non-concession Program
Total Expense \$710.59 Total Revenue \$0.00	
Program Service Description:	
Total Expense \$0.00 Total Revenue \$0.00	
Program Service Description:	
Total Expense \$0.00 Total Revenue \$0.00	
Total Expense \$0.00 Total Revenue \$0.00	
Program Service Description:	
Total Expense \$0.00 Total Revenue \$0.00	
Total Program Services Provide a total amount for all program	ram expenses and a total amount for all program revenue.
CSO total program service expense CSO total program service revenue	

Citizen Support Organization Statement of Accomplishments and Goals

This statement is part of the Citizen Support Organization's (CSO's) Annual Financial Report (see Chapter 5: Section 7) of the 2014 CSO Handbook. The primary purpose of the Annual Financial Report is to provide a summary of the most relevant information to the Department and Division, and to meet the common interests of donors, members, creditors, and others who provide resources to the not for profit organization. Report the accomplishments for the CSO's past fiscal year and goals for the upcoming year.

Name of the CSO Friends of Torreya State Park, Inc.

CSO Address 2576 NW Torreya Park Road

City, State, Zip Code Bristol. FL 32321

A summary of CSO accomplishments from the period of <u>January 1, 2014</u> through <u>December 31, 2014</u> is as follows:

Estimated Total Volunteer Hours 800

Total Membership 9

Total Volunteer Hours: Include CSO officers, board members, and general members.

Total Membership: The current number of members in good standing at the end of the CSO's fiscal year including officers, board members, and general members. When totaling the number of members in the CSO, typically individuals and corporate members are counted as "one (1)" member. Family, patron, or not for profit organization members are counted as "two (2)" members.

List of CSO Board Members

Attach a current list of board members' and officers' names, addresses, phone numbers, and email addresses in order of position title.

President -

Bob Gilley

7720 Lake Seminole Rd., Sneads, FL 32460

(850) 592-5985

williamgilley@wfeca.net

Vice-President -

Manning Miller

P.O. Box 1155, Bristol, FL 32321

millermd@fairpoint.net

Treasurer -

Bill Anderson

6963 NW Torreya Park Rd., Bristol, FL 32321



Florida Department of Environmental Protection

CSO ANNUAL PROGRAM PLAN

Required Signatures:	Adone Signature	
Name of CSO:	FRIENDS OF TORREYA STATE PARK	

For CSO Fiscal Year: 2014

	Description of Annual Projects	Resources Needed	Sources of Resources	Agency Approval Needed Y/N
1	TORREYA STATE PARK NATIVE PLANT ARBORETUM	POTTING MIX, PLANTS, POTS,	PAM ANDERSON PROPAGATES THE	NO
2	CANDLIGHT TOUR	CHILI, TABLES, CROCKPOTS,	CSO DONATES THE CHILI THEY MAKE,	NO
3	Continue firewood program	Inmate assistance, string, donated wood	TSP, Liberty CI, Grainger	NO
4	Misc. Park needs as specified by Park Manager			NO
5			4	
6				
7				
8				
9				
10		_		

Submitted by CSO Presid	ent: Willan Cil	Que	Date:	6.6.14
Park Manager Approval:	steven.cutshaw@dep.state.f	11	Date:	6-11-14



Florida Department of Environmental Protection

CSO ANNUAL PROGRAM PLAN

Required Signatures:	Adobe Signature		
Name of CSO:	riends of Torreya State Park		

For CSO Fiscal Year: 2015

	Description of Annual Projects	Resources Needed	Sources of Resources	Agency Approval Needed Y/N
1	Torreya State Park Native Plant Arboretum	Potting Mix, Plants, Pots, Water Hoses &	CSO account, CSO members donations	No
2	Candlelight Tour Event	Food for visitors and volunteers and affiliated	CSO account, CSO member donations	No
3	Firewood Campground	Firewood from vendor	CSO account	No
4	Campground Ice for campers	ICE from vendor	CSO account	No
5	Laundry for campers	none/maintain machines	CSO account	No
6	Needs as identified by Park Manager		CSO account/CSO members time	No
7				
8				
9				
10				

Submitted by CSO Preside	ent: []	COD	Jix	Date:	6/26/2015
Park Manager Approval:	Cutshaw_		Distribly Secrets by CL Inham, S DN on-Factor Dept of Environmental Protection, environmental Secret Continuency Continuency Cate 2015 00:20 10:52 00:04/100	Date:	06-26-15