

#### Florida Department of Environmental Protection CITIZEN SUPPORT ORGANIZATION 2021 LEGISLATIVE REPORT (pursuant to Section 20.058 Florida Statutes)

Citizen Support Organization (CSO) Name: Friends of Wakulla Springs Mailing Address: 465 Wakulla Park Drive Wakulla Springs, FL 32327 Telephone Number: (850) 561–7286 or 850-443-2461 (cell) Website Address (*required if applicable*): <u>https://wakullasprings.org/</u> Check to confirm your Code of Ethics is posted conspicuously on your website.

#### 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.

#### YOUR MISSION AND LAST CALENDAR YEAR'S PROGRAM ACCOMPLISHMENTS:

CSO's Mission: Consistent with your Articles and Bylaws

The Friends of Wakulla Springs' mission is to conserve, protect, restore and enhance the natural, historical, cultural and recreational resources of Wakulla Springs State Park for present and future generations.

# **Describe Last Calendar Year's Results Obtained:** <u>Braq!</u> List or discuss the past calendar year's accomplishments and contributions. Cite specific support from last calendar year's Annual Program Plan.

In summary: The Speaker Series, Grant Applications, Bike Trail Planning, funding park activities (Lodge parking, gardens, resource management).

-Bike Trail Study: Completed by Halff Engineering in Fall 2020. Final report: see: <u>https://wakullasprings.org/Other-Publications</u>

-Speaker Series: Series of speakers throughout 2020. In addition, we received a "Florida Talks" grant award from Florida -Humanities Council in the Fall of 2020. For 2020 speakers: scroll midway down: <u>https://wakullasprings.org/virtual-visits</u> -Assisted with the funding for the beautiful landscaping parking lot area project directed by Park Ranger Charlie Baisden.

## Three-year Capital Campaign Goals and Itemized Details

In the fall of 2021, the Friends of Wakulla Springs State Park would like to announce a three-year campaign to restore and preserve this fleet of vessels and revitalize the historic waterfront consistent with the approved Unit Management Plan for Wakulla Springs State Park. This campaign will be based on the following four major goals:

1. <u>Update and overhaul the existing operating boat systems</u> for consistency, sustainability and environmental responsibility.

\*Replace the four existing outboard motors with high-efficiency/low-noise motors.

\*Discontinue motors that create battery waste.

\*Standardize the operating system to allow Captains to be comfortable with any vessel. This will improve navigability and visitor safety while decreasing maintenance concerns.

\*Continue to improve accessibility.

\*Continue to improve audio visual systems to modernize interpretative services on boats.

2. <u>Revitalize the historic waterfront</u> and boat docks.

\*Replace the floating swimming platforms.

\*Repair, repaint and strengthen the boat docks and visitor access platform.

\*Remove sand which has settled past the boat dock, using it to nourish the beach area.

3. <u>Refurbish the boat tour office and bath house</u> for visitor comfort and convenience.

\*Update visitor facilities and expand accessibility.

\*Update and improve interpretive space to enhance visitor experience.

4. <u>Triple the existing Friends endowment</u> to provide for the long-term care and preservation of the fleet of boats and maintenance of the historic waterfront.

\*10% of every dollar raised will be invested in a restricted endowment account to guarantee that all the boats are maintained annually.

\*Create a sustainable maintenance program based upon this endowment to insure ongoing routine maintenance.

\*A customized trailer must be acquired to allow easy transport of boats in and out of the park for maintenance as needed.

#### CSO's LAST CALENDAR YEAR STATISTICS:

Total Number of CSO General Membership: 241

Total Number of Board of Directors: <u>10</u>

**Total Volunteer Hours for the Board of Directors** (Hours from VSys. Work with your parks' volunteer manager): <u>949.75</u> <u>Hours</u>

#### PARK & CSO RELATIONSHIP:

#### Park Manager's Comments on the CSO & Park Relationship and Support:

The past year was rather unusual, but the Friends were patient, innovative, and committed. With COVID dominating the conversation and impacting our operations, we experienced a lot of change. The Friends were quick to reinvent their methods and we ended up in a good place with plenty of room for growth.

With social distancing in effect, the Friends needed to reinvent meetings as we learned to interact through Zoom. They reinvented interaction with Park Visitors and Members, also through Zoom and the Speaker Series. The Friends worked extremely well with Park Staff to provide additional park programming and interaction which kept the public thinking about and interacting with Wakulla Springs throughout a year of closures and isolation. We made the most of our down time by planning, evaluating, and putting new programs in place to continue to improve the park while celebrating the natural and cultural resources of the park.

#### CSO President's Comments on the CSO & Park Relationship and Support:

Provide your perspective on the relationship between the park and CSO. What went well? Are there areas of improvement?

The COVID pandemic seriously impacted the FOWS ability to assist the Park with major funding-supported projects. We held one event that was at breakeven in Feb. of 2020, with no further events being held the rest of the year. The Park closed and boats ceased operations for about 8 months of 2020, which substantially reduced the expected FOWS revenues for 2020. At the same time, the Friends shifted gears and adapted to the uncertain conditions. The Board members attended most of the zoom monthly meetings and were engaged/active throughout the year. The speaker series allowed the members to connect to the Friends and Park activities, and as a result, our mailing list increased by over 25% (to ~1,200 contacts in December). That said, it's also an area we'd like to improve: converting those increasing contacts into active members. Not only did the Park Manager attend every monthly meeting, but she has been instrumental with providing guidance, expertise, and support in a calm and reassuring manner, throughout the year.

#### SUMMARIZE FINANCIAL ACTIVITY FOR LAST CALENDAR YEAR, SPECIFIC PARK(S) SUPPORT:

**Program Service Expenses** are costs related to providing your organization's programs or services in accordance with your mission. For CSO's provide expenses that directly support the park(s). For established nonprofit organizations, program service expenses generally represent most of the overall expense of the organization. For the last calendar year provide totals \$ for each that apply.

- Building improvement, construction or renovations \$
- Cultural resources (e.g., historic structure restoration/ renovation) \$
  - Natural resources (e.g., native plants, natural lands restoration) \$2,333
- Maintenance equipment (e.g., mowers, chippers, blowers, chainsaws) \$
  - Other facilities and landscape maintenance \$1,810
  - Vehicles (e.g., trucks/cars, UTVs, golf carts, accessible devices, etc.) \$
- Amenities (e.g., water fountains, benches, picnic tables, recreational equipment, kiosks etc.) \$
- Park employees or volunteers support (e.g., interns, training, uniforms, awards, or recognition) \$
  - Big ticket visitor center exhibits or interpretation updates \$
    - Park exhibits, displays, signage \$
    - Park publications, brochures, maps, etc. \$
    - Programing/interpretation support material purchases \$361
      - Other program services \$3535

Total Program Service Expenses \$8039

#### Friends of Wakulla Springs State Park, Inc. CODE OF ETHICS

#### PREAMBLE

- (1) It is essential to the proper conduct and operation of Friends of Wakulla Springs State Park, 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 Friends of Wakulla Springs State Park, 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.

Page 990-EZ  Page 990-EZ  Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the internal Revenue Code (accept private foundations) De on other social security numbers on this form, as it may be made public. Come of the Database Come of the Social Content of the Come of the Social Comparison of the Come of the Co			_	Short Form			OMB No. 1545-0047
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b       Less: cost or other basis and sales expenses       5b         c       Gain or (loss) from sale of assets other than inventory (subtract line 5b from line 5a)       5c         6       Gaming and fundraising events:       a         a       Gross income from gaming (attach Schedule G if greater than \$15,000)       6a         b       D Gross income from fundraising events (not including \$ of contributions from fundraising events (not including \$ of contributions       of contributions         form fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)       6b       6d         c       Less: cost of goods sold       6c       6d         7       a       Gross profit or (loss) from sales of inventory (subtract line 7b from line 7a)       7c         8       Other revenue (describe in Schedule O)       7b       7c         10       Grants and similar amounts paid (list in Schedule O)       10         11       Geressional fees and other payments to independent contractors       12         12       Salaries, other compensation, and employee benefits       12         13       Professional fees and other payments to independent contractors       13       2, 5455.         14       Occupancy, rent, utilities, and maintenance       14       15         15 <td></td> <td>4</td> <td></td> <td></td> <td></td> <td>4</td> <td>365.</td>		4				4	365.
c       Gain or (loss) from sale of assets other than inventory (subtract line 5b from line 5a)       5c         6       Gaming and fundraising events:       a Gross income from gaming (attach Schedule G if greater than \$15,000)       6a         b       Gross income from fundraising events (not including \$of contributions from fundraising events (add lines 6a and 6b and subtract line 6c)       6d         7       7       6d         8       Other revenue (describe in Schedule O)       7         9       70, 2, 4, 5c, 6d, 7c, and 8       9         10       Grants and similar amounts paid (list in Schedule O)       10         11       Easer (describe in Schedule O)       10         12       Salaries, other compensation, and employee benefits       12         13       Professional fees and other payments to independent contractors       13       2,5455.         14       Occupancy, rent, utilities, and maintenance       14       15         14       Dither expenses (describe in		5 a					
6       Gaming and fundraising events:         a       Gross income from gaming (attach Schedule G if greater than \$15,000)         b       Gross income from fundraising events (not including \$						-	
a       Gross income from gaming (attach Schedule G if greater than \$15,000).       6a         b       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         c       Less: direct expenses from gaming and fundraising events d Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)       6d         7 a       Gross sales of inventory, less returns and allowances       7a         b       Less: cost of goods sold       7b         c       Gross profit or (loss) from sales of inventory (subtract line 7b from line 7a)       6d         8       Other revenue (describe in Schedule 0)       8         10       Grants and similar amounts paid (list in Schedule 0)       10         11       Benefits paid to or for members       11         12       Salaries, other compensation, and employee benefits       12         13       Professional fees and other payments to independent contractors       13       2,545.         14       Occupancy, rent, utilities, and maintenance       14       15         16       Other expenses (describe in Schedule 0)       16       13,580.         17       Total expenses. Add lines 10 through 16       17       16,125. <t< th=""><td></td><td></td><td></td><td>· · · · · · · · · · · · · · · · · · ·</td><td></td><td>5C</td><td></td></t<>				· · · · · · · · · · · · · · · · · · ·		5C	
St5,000)       Ga         b       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         c       Less: direct expenses from gaming and fundraising events       6c         d       Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)       6d         7 a       Gross sales of inventory, less returns and allowances       7a         b       Less: cost of goods soid       7b         c       Gross sporfit or (loss) from sales of inventory (subtract line 7b from line 7a)       7c         8       Other revenue (describe in Schedule O)       8         9       Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8       9       39, 085.         10       Grants and similar amounts paid (list in Schedule O)       10       11         11       Salaries, other compensation, and employee benefits.       12       12         12       Salaries, other compensation, and employee benefits.       15       16         13       Professional fees and other payments to independent contractors       13       2, 5455.         14       Excess or (deficit) for the year (subtract line 17 from line 9)       15       16         16       13, 580. <td></td> <td></td> <td>-</td> <td>-</td> <td></td>			-	-			
b       Gross income from fundraising events (not including \$	-	a		60			
sum of such gross income and contributions exceeds \$15,000)       6b         c       Less: direct expenses from gaming and fundraising events       6c         d       Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)       6d         7 a       Gross sales of inventory, less returns and allowances       7a         b       Less: cost of goods sold       6d         c       Gross profit or (loss) from sales of inventory (subtract line 7b from line 7a)       7c         8       Other revenue (describe in Schedule O)       8         9       Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8       9         10       Grast and similar amounts paid (list in Schedule O)       10         11       Benefits paid to or for members       11         12       Salaries, other compensation, and employee benefits       12         14       Occupancy, rent, utilities, and maintenance       14         15       16       13, 580.         16       Other expenses. Add lines 10 through 16       17         17       Total expenses. Add lines 10 through 16       17         16       13, 580.       17         17       16, 12, 55.       18         18       Excess or (deficit) for the year (subtract line 17 from line 27, column (A	eni,	h			ibutions		
sum of such gross income and contributions exceeds \$15,000)       6b         c       Less: direct expenses from gaming and fundraising events       6c         d       Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)       6d         7 a       Gross sales of inventory, less returns and allowances       7a         b       Less: cost of goods sold       6d         c       Gross profit or (loss) from sales of inventory (subtract line 7b from line 7a)       7c         8       Other revenue (describe in Schedule O)       8       9         9       Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8       9       39, 085.         10       Grants and similar amounts paid (list in Schedule O)       10       11         11       Salaries, other compensation, and employee benefits       12         12       Professional fees and other payments to independent contractors       13       2, 545.         14       Occupancy, rent, utilities, and maintenance       14       15         15       Gother expenses. Add lines 10 through 16.       17       16, 13, 580.         17       Total expenses. Add lines 10 through 16.       17       16, 122.5.         18       Excess or (deficit) for the year (subtract line 27, column (A)) (must agree with end-of-year figure reported on prior year's	Rev	~			buttorio		
c       Less: direct expenses from gaming and fundraising events       6c         d       Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)       6d         7 a       Gross sales of inventory, less returns and allowances       7a         b       Less: cost of goods sold       7d         c       Gross profit or (loss) from sales of inventory (subtract line 7b from line 7a)       7c         8       Other revenue (describe in Schedule O)       8         9       Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8       9         10       Grants and similar amounts paid (list in Schedule O)       10         11       Benefits paid to or for members       11         12       Salaries, other compensation, and employee benefits       12         13       Professional fees and other payments to independent contractors       13       2, 545.         14       Occupancy, rent, utilities, and maintenance       14       15         15       Total expenses. Add lines 10 through 16       17       16       13, 580.         17       Total expenses. Add lines 10 through 16       17       16, 125.         18       Excess or (deficit) for the year (subtract line 17 from line 9)       18       22, 960.         19       Net assets or fund balanc			sum of such	gross income and contributions exceeds \$15,000) 6b			
d Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)       6d         7 a Gross sales of inventory, less returns and allowances       7a         b Less: cost of goods sold       7b         c Gross profit or (loss) from sales of inventory (subtract line 7b from line 7a)       7c         8 Other revenue (describe in Schedule O)       7c         9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8       9 39, 085.         10 Grants and similar amounts paid (list in Schedule O)       10         11 Benefits paid to or for members       11         12 Salaries, other compensation, and employee benefits       12         13 Professional fees and other payments to independent contractors       13 2, 545.         14 Occupancy, rent, utilities, and maintenance       14         15 Printing, publications, postage, and shipping       15         16 Other expenses (describe in Schedule O)       16 13, 580.         17 Total expenses. Add lines 10 through 16       17 1 6, 1255.         18 Excess or (deficit) for the year (subtract line 17 from line 9)       18 22, 960.         19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)       19 153, 141.         20 Other changes in net assets or fund balances (explain in Schedule O)       20 2.		С		vypoppop from gaming and fundraising avanta			
7 a Gross sales of inventory, less returns and allowances       7a         b Less: cost of goods sold       7b         c Gross profit or (loss) from sales of inventory (subtract line 7b from line 7a)       7c         8 Other revenue (describe in Schedule O)       8         9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8       9         10 Grants and similar amounts paid (list in Schedule O)       10         11 Benefits paid to or for members       11         12 Salaries, other compensation, and employee benefits       12         13 Professional fees and other payments to independent contractors       13 2,545.         14 Occupancy, rent, utilities, and maintenance       14         15 Printing, publications, postage, and shipping       15         16 Other expenses (describe in Schedule O)       16         17 Total expenses. Add lines 10 through 16       17         18 Excess or (deficit) for the year (subtract line 17 from line 9)       18 22, 960.         19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)       19         20 Other changes in net assets or fund balances (explain in Schedule O)       20       2.		d	Net income or				
b Less: cost of goods sold c Gross profit or (loss) from sales of inventory (subtract line 7b from line 7a) 8 Other revenue (describe in Schedule O) 9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 9 39,085. 10 Grants and similar amounts paid (list in Schedule O) 11 Benefits paid to or for members 12 Salaries, other compensation, and employee benefits 13 Professional fees and other payments to independent contractors 14 0 15 Printing, publications, postage, and shipping 16 Other expenses (describe in Schedule O) 17 Total expenses. Add lines 10 through 16 18 Excess or (deficit) for the year (subtract line 17 from line 9) 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) 20 Other changes in net assets or fund balances (explain in Schedule O) 20 2.			/			6d	
c       Gross profit or (loss) from sales of inventory (subtract line 7b from line 7a)       7c         8       Other revenue (describe in Schedule O)       8         9       Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8       9       39, 085.         10       Grants and similar amounts paid (list in Schedule O)       10       10         11       Benefits paid to or for members       11       12         12       Salaries, other compensation, and employee benefits       12       13       2, 545.         14       Occupancy, rent, utilities, and maintenance       14       14         15       Other expenses (describe in Schedule O)       16       13, 580.         17       Total expenses. Add lines 10 through 16       17       16, 125.         18       Excess or (deficit) for the year (subtract line 17 from line 9)       18       22, 960.         19       Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)       19       153, 141.         20       Other changes in net assets or fund balances (explain in Schedule O)       20       2.		7 a	Gross sales	of inventory, less returns and allowances 7a			
8       Other revenue (describe in Schedule O)       8         9       Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8       9       39,085.         10       Grants and similar amounts paid (list in Schedule O)       10         11       Benefits paid to or for members       11         12       Salaries, other compensation, and employee benefits       12         13       Professional fees and other payments to independent contractors       13       2,545.         14       Occupancy, rent, utilities, and maintenance       14       15         16       Other expenses (describe in Schedule O)       16       13,580.         17       Total expenses. Add lines 10 through 16       17       16,125.         18       Excess or (deficit) for the year (subtract line 17 from line 9)       18       22,960.         19       Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)       19       153,141.         20       Other changes in net assets or fund balances (explain in Schedule O)       20       2.		b		• • • • • • • • • • • • • • • • • • • •			
9       Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8       ▶       9       39,085.         10       Grants and similar amounts paid (list in Schedule O)       10       10         11       Benefits paid to or for members       11         12       Salaries, other compensation, and employee benefits       12         13       Professional fees and other payments to independent contractors       13       2,545.         14       Occupancy, rent, utilities, and maintenance       14       15         15       Other expenses (describe in Schedule O)       16       13,580.         17       Total expenses. Add lines 10 through 16       17       16,125.         19       Net assets or (deficit) for the year (subtract line 17 from line 9)       18       22,960.         19       Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)       19       153,141.         20       Other changes in net assets or fund balances (explain in Schedule O)       20       2.		-				-	
10       Grants and similar amounts paid (list in Schedule O)       10         11       Benefits paid to or for members       11         12       Salaries, other compensation, and employee benefits       12         13       Professional fees and other payments to independent contractors       13       2,545.         14       Occupancy, rent, utilities, and maintenance       14         15       0       16       13,580.         16       Other expenses (describe in Schedule O)       16       13,580.         17       Total expenses. Add lines 10 through 16       17       16,125.         18       Excess or (deficit) for the year (subtract line 17 from line 9)       18       22,960.         19       Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)       19       153,141.         20       Query and balances (explain in Schedule O)       20       2.		-	Other reven	ue (describe in Schedule O)		-	
10       Grants and similar amounts paid (list in Schedule O)       10         11       Benefits paid to or for members       11         12       Salaries, other compensation, and employee benefits       12         13       Professional fees and other payments to independent contractors       13       2,545.         14       Occupancy, rent, utilities, and maintenance       14         15       16       Other expenses (describe in Schedule O)       16       13,580.         17       Total expenses. Add lines 10 through 16       17       16,125.         18       Excess or (deficit) for the year (subtract line 17 from line 9)       18       22,960.         19       Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)       19       153,141.         20       Other changes in net assets or fund balances (explain in Schedule O)       20       2.		-	Total reven	ue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8		-	39,085.
12       Salaries, other compensation, and employee benefits       12         13       Professional fees and other payments to independent contractors       13       2,545.         14       0ccupancy, rent, utilities, and maintenance       14         15       Printing, publications, postage, and shipping       15         16       Other expenses (describe in Schedule O)       16       13,580.         17       Total expenses. Add lines 10 through 16       17       16,125.         18       Excess or (deficit) for the year (subtract line 17 from line 9)       18       22,960.         19       Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)       19       153,141.         20       Other changes in net assets or fund balances (explain in Schedule O)       20       2.			Grants and s			-	
13Professional fees and other payments to independent contractors132,545.14Occupancy, rent, utilities, and maintenance1415Printing, publications, postage, and shipping1516Other expenses (describe in Schedule O)1613,580.17Total expenses. Add lines 10 through 161716,125.18Excess or (deficit) for the year (subtract line 17 from line 9)1822,960.19Net 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)19153,141.20Other changes in net assets or fund balances (explain in Schedule O)202.			•		ł		
15       Printing, publications, postage, and shipping       15         16       Other expenses (describe in Schedule O)       16       13,580.         17       Total expenses. Add lines 10 through 16       17       16,125.         18       Excess or (deficit) for the year (subtract line 17 from line 9)       18       22,960.         19       Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)       19       153,141.         20       Other changes in net assets or fund balances (explain in Schedule O)       20       2.	Ise			food and other normants to independent contractors	ł		0.545
15       Printing, publications, postage, and shipping       15         16       Other expenses (describe in Schedule O)       16       13,580.         17       Total expenses. Add lines 10 through 16       17       16,125.         18       Excess or (deficit) for the year (subtract line 17 from line 9)       18       22,960.         19       Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)       19       153,141.         20       Other changes in net assets or fund balances (explain in Schedule O)       20       2.	ber						2,545.
16       Other expenses (describe in Schedule O)       16       13,580.         17       Total expenses. Add lines 10 through 16       17       16,125.         18       Excess or (deficit) for the year (subtract line 17 from line 9)       18       22,960.         19       Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)       19       153,141.         20       Other changes in net assets or fund balances (explain in Schedule O)       20       2.	ň						
17       Total expenses. Add lines 10 through 16       17       16,125.         18       Excess or (deficit) for the year (subtract line 17 from line 9)       18       22,960.         19       Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)       19       153,141.         20       Other changes in net assets or fund balances (explain in Schedule O)       20       20		-	• •				12 500
18Excess or (deficit) for the year (subtract line 17 from line 9)1822,960.19Net 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)19153,141.20Other changes in net assets or fund balances (explain in Schedule O)202.			•	· · · · · · · · · · · · · · · · · · ·	1		
19Net 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)19153,141.20Other changes in net assets or fund balances (explain in Schedule O)20202.	(0		Excess or (c	leficit) for the year (subtract line 17 from line 9)	· · · · · · · · · · · · · · · · · · ·		
	set						22,900.
	As					19	153.141
	Net	20	Other change	es in net assets or fund balances (explain in Schedule O)		20	
	_	21	Net assets o	r fund balances at end of year. Combine lines 18 through 20		21	

For Paperwork Reduction Act Notice, see the separate instructions. UYA

Form 990-EZ (2020) FRIENDS OF WAKULLA SP	RINGS STATE	PARK	59-3	<u>337</u> !	<u>5905</u>	Page <b>2</b>
Part II Balance Sheets (see the instructions for	or Part II)					
Check if the organization used Schedul		any question in th	nis Part II			
	-		(A) Beginning of year		B) End of y	ear
22 Cash, savings, and investments		-		22		101.
					1/0,	
<ul><li>23 Land and buildings</li><li>24 Other assets (describe in Schedule O)</li></ul>			0.2			0.
				24		0.
			/	25	176,	101.
<b>26</b> Total liabilities (describe in Schedule O)				26		0.
27 Net assets or fund balances (line 27 of column (B) mus	st agree with line 21)		153,141.	27	176,	101.
Part III Statement of Program Service Accor	mplishments (see	e the instructions f	or Part III)			
Check if the organization used Schedul	le O to respond to	any question in th	nis Part III 📖 🔀 🛔		Expenses	\$
What is the organization's primary exempt purpose? SEE SC		71		· ·	uired for se	
Describe the organization's program service accomplish		e three largest proc			)(3) and 50 izations; or	
as measured by expenses. In a clear and concise man		• • •		others		
		vices provided, the			,	
persons benefited, and other relevant information for ea						
28 PROGRAM SERVICES INCLUDE RESOUR	RCE MANAGEMEN	NT WHICH INC	LUDES			
MANAGEMENT OF THE CHEROKEE SINK RE	ESTORATION PRO	EJCT, AN ARCH	AELOGICAL			
SURVEY OF WAKULLA SPRINGS, AND A W	WATER CLARITY	PROJECT OF WA	KULLA			
(Grants \$ ) If this amount inc	ludes foreign grants, ch	eck here		28a	2,	333.
29 PROGRAM SERVICES INCLUDES MAINTENA	ANCE, WHCIH IN	ICLUDES REPAIR	S AND		· · ·	
MAINTENANCE OF THE PROPERTY, BUILI						
BOATS AND OTHER ASSETS USED IN THE						
	ludes foreign grants, ch			29a	1	810.
				<u>29a</u>	,	010.
30 PROGRAM SERVICES INCLUDE VISITOR S						
TRAINING AND TOUR BOAT INTERPRETIN		•				
ARE PERFORED IN AN EFFORT TO ENHAN			E THROUGH			
(Grants \$ ) If this amount inc	ludes foreign grants, ch	eck here		30a		361.
31 Other program services (describe in Schedule O)						
(Grants \$ ) If this amount inc	ludes foreign grants, ch	eck here		31a	8,	039.
32 Total program service expenses (add lines 28a through				32		543.
Part IV List of Officers, Directors, Trustees, and						
Check if the organization used Schedu				moure		
		(c) Reportable	(d) Health benefits,		<u> </u>	<u> </u>
(a) Name and title	(b) Average hours per week	compensation	contributions to employe	e (e) E	Estimated a	mount of
(a) Name and the	devoted to position	(Forms W-2/1099-MISC) (if not paid, enter -0-)	benefit plans, and	oth	her comper	
		(ii not paid, enter -o-)	deferred compensation			
DON LANHAM						
PRESIDENT	01.00					
STEVE GAUDING						
VICE-PRESIDENT	01.00					
JULIE HARRINGTON						
TREASURER	05.00					
RENEE MURRAY				-		
SECRETARY	01.00					
	01.00			_		
DALE ALLEN	01 00					
DIRECTOR	01.00					
SUE DAMON						
DIRECTOR	01.00					
SCOTT DAVIS						
DIRECTOR	01.00					
LYDIA ELDREDGE						
DIRECTOR	01.00					
	01.00			—		
JOHN ELPER	01 00					
DIRECTOR	01.00			┥		
CAL JAMISON	<b>.</b>					
DIRECTOR	01.00					
MARIEANNE LUBER						
DIRECTOR	01.00					
BARBARA WILSON				1		
DIRECTOR	01.00					

	0-EZ (2020) FRIENDS OF WAKULLA SPRINGS STATE PARK 59-337	<u>590</u>	5 P	age <b>3</b>
Part				
	instructions for Part V.) Check if the organization used Schedule O to respond to any question in this Part	V		
			Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a			
	detailed description of each activity in Schedule O	33		Х
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		X
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business			
	activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		Х
b	If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b		
С	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		Х
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions			
b	Did the organization file Form 1120-POL for this year?	37b		х
	id the organization borrow from, or make any loans to, any officer, director, trustee, or key employee; or were			
	anv such loans made in a prior vear and still outstanding at the end of the tax vear covered by this return?	38a		х
b	If "Yes," complete Schedule L, Part II, and enter the total amount involved 38b			
39	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on line 9 39a			
b	Gross receipts, included on line 9, for public use of club facilities 39b			
	ection 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	40b		х
	that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	100		
с	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed			
	on organization managers or disqualified persons during the year under sections 4912,			
	4955, and 4958			
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line			
	40c reimbursed by the organization			
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter	40.0		х
•	transaction? If "Yes," complete Form 8886-T	40e	l	Λ
41	List the states with which a copy of this return is filed			
42a	The organization's books are in care of <b>JULIE HARRINGTON</b> Telephone no. <b>(850</b> )	156	1-7	276
T_u	Located at <b>465 WAKULLA PARK DRIVE CRAWFORDVILLE, FL</b> ZIP +4 <b>3232</b>		<u> </u>	270
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over	/	Yes	No
b	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b	res	
		420		X
	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).			
С	At any time during the calendar year, did the organization maintain an office outside the United States?	42c		X
	If "Yes," enter the name of the foreign country			
43		• •	<b>)</b>	
	and enter the amount of tax-exempt interest received or accrued during the tax year 43			
			Yes	No
<b>44a</b> [	oid the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be			
	completed instead of Form 990-EZ	44a		Х
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		Х
С	Did the organization receive any payments for indoor tanning services during the year?	44c		Х
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		х
	bid 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			

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Form 99	90-EZ (2	020)	FRIE	INDS	S OF	' WZ	<b>KUI</b>	LA	SPR	INGS	ST	ATE PA	ARK				59-	337	590	5 P	age <b>4</b>
																				Yes	No
46													half of or in								
										C, Part I									46		Х
Part			ion 50									47 401	1.50								
		50 ar		01(C)	(3) or	ganiz	ations	s mus	st answ	er ques	stions	47-490 8	and 52, ar	na c	comple	ete th	e tables i	or line	es		
				oraal	nizativ	00.110		bodu	ulo O to	rospon	d to c	ny quost	tion in this	Da	rt \/I						
		Chec	K II UIE	orgai	mzauc	JII US	eu Sc	neuu		respon	u 10 a	any quest		га						Yes	No
47	Did th	e orda	nization	endade	e in lot	hvina	activiti	ies or	have a s	ection 50	1(h) e	lection in e	effect during	the	tax					163	
		-									• •		inoot during						47		х
48													Schedule E						48		X
49a		-											on?						49a		Х
b									rganizati										49b		
50													than officers					ey (			
	emplo	yees)	who eac	h recei	ived m	ore that	an \$10	0,000	of comp	ensation	from tl	he organiza	ation. If ther	e is				<b>-</b>			
										verage			eportable	c			enefits, employee	(e) E	stimate	d amou	int of
	(a)	(a) Name and title of each employee				per week to positior	n		ensation 2/1099-MIS0	h	enefit p	lans, a	nd deferred								
										•				,	CO	mpens	sation				
														+							
					-																
51 f										a a ta di ini			actors who	o o ok	raaaiy	od mo	ra than				
51										ione, ente			actors who	eaci	rieceiv	eumo	ne man				
	φ100,	000 01	oompon	outon	ii oiii u	10 019	anzan	011. 11 0													
	(a)	) Name	and busi	ness ad	Idress o	of each	indepe	endent	contracto	r		(	<b>b)</b> Type of se	rvice	e		(c	<b>:)</b> Comp	ensatio	on	
d	Total r	numbe	r of othe	r indep	bender	nt cont	ractors	each	receivin	g over \$1	100.00	0		. ►	0						
52				•							-		s must atta								
			Schedule									-						. 🕨 🗴	Yes		No
													and stateme ich preparer					wledge	and be	lief, it is	
Sign													Date								
Here			ULIE				CON,	TI	REASU	JRER											
		<u> </u>	ype or pri Type pre			แษ			Droparar	s signatur	0			Date					PTIN		
Paid			rype pre			or (	₽₽			•		lor C			23/2	021	Check X self-emplo			020	47
Prepa										, LLC			p	57	23/2						- /
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		CRA	WFOF	<b>NDV</b>	LLE	.or 1, 1	rL 3	3232	26-10	<u>66</u> 2							50) 591	-91	31		
May the	e IRS d	iscuss	this retu	ırn with	the pr	repare	r show	n abo	ve? See	instructic	ons								Yes	١	No

0011		Π.	hlie Cheri	tu Ctatua and	Duki			OMB No. 1545-0047
	EDULE A 990 or 990-EZ)			ty Status and		-	-	2020
	1 330 01 330-LZ)	Complete if the organ		501(c)(3) organization or a s		(a)(1) nonex	empt charitable trust.	
	ment of the Treasury			ch to Form 990 or Form				Open to Public
	Revenue Service		io to www.irs.gov/F	Form990 for instructions a	nd the lates	t informatio		Inspection
	of the organization ENDS OF W	AKULLA SPR	TNGS STAT	E PARK			Employer identificatio	
Par				l organizations mus	t comple	ete this p		
The c			· ·	s: (For lines 1 through			,	
1	A church, co	nvention of churcl	hes, or associati	on of churches descri	ibed in <b>se</b>	ection 17	0(b)(1)(A)(i).	
2	A school des	cribed in <b>section</b>	170(b)(1)(A)(ii).	. (Attach Schedule E	(Form 99	0 or 990-	EZ).)	
3				ganization described i				
4		-		onjunction with a hosp	oital desc	ribed in <b>s</b>	ection 170(b)(1)(A)	)(iii). Enter the
5		ne, city, and state		ollege or university ow	and or o	norated b	v o govornmontal u	unit doooribod in
5		b)(1)(A)(iv). (Con		Silege of university ow		perateu b	y a governmentar u	
6				mental unit described	l in <b>secti</b>	on 170(b	)(1)(A)(v).	
7		-	-	antial part of its suppo		-		the general public
		section 170(b)(1)				0		0
8	A community	trust described in	n section 170(b)	)(1)(A)(vi). (Complete	Part II.)			
9		-		d in section 170(b)(1)			•	
	-	or a non-land-gra	nt college of agr	iculture (see instructio	ons). Ente	er the nan	ne, city, and state o	f the college or
10	university:	ion that normally	raccivas (1) mar	o than 22 1/2% of its	cupport f	from cont	ributions mombors	hip food and groce
10	receipts from	activities related	to its exempt fur	e than 33 1/3% of its nctions, subject to cer elated business taxat	tain exce	ptions; a	nd (2) no more than	133 1/3% of its
	support from acquired by f	gross investment	tincome and unr fter June 30, 197	related business taxab 75. See <b>section 509</b> (a	ble incom a)(2), (Co	e (less se mplete P	ection 511 tax) from art III )	businesses
11		•		sively to test for public		•	,	
12	X An organizati	on organized and	operated exclus	ively for the benefit of	, to perfo	rm the fu	nctions of, or to carr	y out the purposes of
				escribed in section 50				
		-		the type of supportin				-
а				supervised, or control	-			
			, ,	egularly appoint or ele ections A and B.	ct a majo	only of the	e directors or truste	es of the supporting
b			-	d or controlled in conr	nection w	ith its sur	ported organization	n(s), by having
			•	anization vested in th				
	organizatio	n(s). You must co	omplete Part IV,	Sections A and C.				
С	Type III fu	nctionally integra	ated. A supporti	ng organization opera	ted in co	nnection	with, and functional	ly integrated with,
		• • • • • • •	•	s). <b>You must complet</b>		-		
d			•	porting organization of	•			• • • • • •
			•	zation generally must nplete Part IV, Section	•		•	an allentiveness
е		•		written determination				II Type III
Ū		-		onally integrated suppo			• • • • •	n, 1900 m
f	-	per of supported of						1
g	Provide the fol	lowing informatior	about the supp	orted organization(s).				
	(i) Name of supporte	d organization	(ii) EIN	(iii) Type of organization (described on lines 1-10		organization	(v) Amount of monetary	(vi) Amount of other support (see
				above (see instructions))		ur governing ment?	support (see instructions)	instructions)
					Yes	No		
	TATE OF FT.	ORIDA, DEP	59-6004874	6	X		7,521	
(A) <sup>C</sup>		0112011, 221	55 0004074	0	А		7,521	
(B)								
(0)								
(C)								
(D)								
<u>(</u> , , , , , , , , , , , , , , , , , , ,								-
(E)				1	1			

Total

7,521.

Schedu	le A (Form 990 or 990-EZ) 2020 FRIENDS O	F WAKULL	A SPRING	S STATE	PARK	59-337	5905 Page 2
Part		ations Descr ne box on line	<b>ibed in Sect</b> 5, 7, or 8 of	t <b>ions 170(b)(</b> Part I or if th	1)(A)(iv) and e organizatio	170(b)(1)(A) n failed to qu	(vi)
Secti	on A. Public Support			,		,	
	idar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by						
	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)						
6	Public support. Subtract line 5 from line 4.						
Secti	on B. Total Support	(-) 0040	(1-) 0047	(-) 0040	(-1) 0040	(-) 0000	
	ndar year (or fiscal year beginning in)►	<b>(a)</b> 2016	<b>(b)</b> 2017	(c) 2018	( <b>d</b> ) 2019	(e) 2020	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties, and income from similar						
9	sources Net income from unrelated business						
9	activities, whether or not the business						
	is regularly carried on						
10	Other income. Do not include gain or						
10	loss from the sale of capital assets						
	(Explain in Part VI.)						
11	<b>Total support.</b> Add lines 7 through 10						
12	Gross receipts from related activities, etc.	. (see instructi	ons)			12	I
13	First 5 years. If the Form 990 is for the o						1(c)(3)
	organization, check this box and stop her	•			•		
Secti	on C. Computation of Public Support						
14	Public support percentage for 2020 (line 6	6, column (f),	divided by line	11, column (f)	)	14	%
15	Public support percentage from 2019 Sch					15	%
16a 🗄	33 <sup>1</sup> /3 % support test–2020. If the organiza						
	box and stop here. The organization qua						
b	33 1/3 % support test-2019. If the organized						
	check this box and <b>stop here.</b> The organi	•					
17a	10%-facts-and-circumstances test-202	•					
	10% or more, and if the organization me					•	
	Part VI how the organization meets the factor			•	•		ported
	organization						Þ 📘
b	10%-facts-and-circumstances test-2019	•					
	15 is 10% or more, and if the organization						
	Explain in Part VI how the organization m				•	• •	•
40	supported organization						
18	Private foundation. If the organization di						
	instructions						🏴 📘

Schedule A (Form 990 or 990-EZ) 2020

#### Schedule A (Form 990 or 990-EZ) 2020 FRIENDS OF WAKULLA SPRINGS STATE PARK Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 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.)

	on A. Public Support						
Calen	dar year (or fiscal year beginning in)▶	<b>(a)</b> 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
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						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons						
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						
c	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
	line 6.)						
	on B. Total Support	( ) 00 ( 0	(1) 00 17	( ) 00 ( 0	( 1) 00 ( 0	( ) 0000	
	dar year (or fiscal year beginning in) ►	<b>(a)</b> 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
h	royalties, and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses						
	acquired after June 30, 1975						
с	Add lines 10a and 10b						
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.)						
14	First 5 years. If the Form 990 is for the or	rganization's f	first, second, th	hird, fourth, or	fifth tax year a	s a section 50	1(c)(3)
	organization, check this box and stop here	•					
Secti	on C. Computation of Public Suppor	t Percentag	je				
15	Public support percentage for 2020 (lin					15	%
16	Public support percentage from 2019			15		16	%
	on D. Computation of Investment Inc						
17	Investment income percentage for 2020	•	.,		olumn (f))	17	%
18	Investment income percentage from 201					18	%
19a	33 1/3 % support tests–2020. If the organ						
	line 17 is not more than $33^{1/3}$ %, check this	-	-	-			
b	33 <sup>1</sup> /3 % support tests-2019. If the organi						
20	line 18 is not more than 33 <sup>1</sup> / <sub>3</sub> %, check this l <b>Private foundation.</b> If the organization did						
20	rivate iounuation. It the organization did	a not check a		, isa, ui 190,	CHECK LINS DOX	and See mol	

#### Schedule A (Form 990 or 990-EZ) 2020 FRIENDS OF WAKULLA SPRINGS STATE PARK

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

Yes No

Х

х

х

Х

Х

Х

Х

Х

х

Х

х

х

#### Supporting Organizations Part IV

(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

#### Section A. All Supporting Organizations

- 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.
- 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).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **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.
- c 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.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **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.
- c 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.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c 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).
- 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?
- c 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 6 anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) 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.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 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 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disgualified 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.
- **b** Did one or more disgualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) 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.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
  - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	10b		Х
Schedule A (Form	990 or	990-EZ	) 2020

10a

#### Schedule A (Form 990 or 990-EZ) 2020 FRIENDS OF WAKULLA SPRINGS STATE PARK

Part	IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in lines 11b and			
	11c below, the governing body of a supported organization?	11a		Х
b	A family member of a person described in line 11a above?	11b		Х
	_A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.	11c		Х
Secti	on B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or memberships of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organizations's officers, directors, or trustees at all times during the tax year? <i>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 officers, directors, or trustees were allocated among the supported organizations, if any, applied to such powers during the tax year.</i>	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? <i>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 supported organization(s) that operated, supervised, or controlled the supporting organization.</i>	2		
Secti	on C. Type II 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 or trustees of each of the organization's supported organization(s)? <i>If "No," describe in</i> <b>Part VI</b> <i>how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>	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, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		x
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>	2	x	A
3	By reason of the relationship described in line 2, above, did the organization's supported organization have a 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? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>	2	•	x

#### Section E. Type III Functionally Integrated Supporting Organizations

- Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). 1
- The organization satisfied the Activities Test. Complete line 2 below. а
- The organization is the parent of each of its supported organizations. Complete **line 3** below. b
- The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see С instructions). Yes
- 2 Activities Test. Answer lines 2a and 2b below.
- а Did substantially all of the organization's activities during the tax year directly further the exempt purposes of 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.
- Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement, b 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.
- Parent of Supported Organizations. Answer lines 3a and 3b below. 3
- a 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? If "Yes" or "No," provide details in Part VI.
- 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.

#### Schedule A (Form 990 or 990-EZ) 2020 FRIENDS OF WAKULLA SPRINGS STATE PARK

59-3375905 Page 6

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations
 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI).
 See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3	210.	80
4 Add lines 1 through 3.	4	210.	80
5 Depreciation and depletion	5		
<b>6</b> 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	15,884.	1,475
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	-15,674.	-1,395
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>b</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		
<b>4</b> Cash deemed held for exempt use. Enter 0.015 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 0.035.	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		-15,674
<b>2</b> Enter 0.85 of line 1.	2		-13,323
<b>3</b> 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		
<b>6 Distributable Amount.</b> 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-functionally integrated Type III supporting organization (see instructions).

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Schedule A (Form 990 or 990-EZ) 2020

## Schedule A (Form 990 or 990-EZ) 2020 FRIENDS OF WAKULLA SPRINGS STATE PARK 59-3375905 Page 7

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)								
Secti	on D - Distributions				Current Year			
1	Amounts paid to supported organizations to accomplish e	exempt purposes		1	7,521.			
2	Amounts paid to perform activity that directly furthers exercised organizations, in excess of income from activity	empt purposes of suppo	rted	2				
3	Administrative expenses paid to accomplish exempt purp	oses of supported orgai	nizations	3				
4	Amounts paid to acquire exempt-use assets			4				
5	Qualified set-aside amounts (prior IRS approval required	- provide details in Part	t <b>VI</b> )	5				
6	Other distributions (describe in Part VI). See instructions.			6				
7	Total annual distributions. Add lines 1 through 6.			7	7,521.			
8	Distributions to attentive supported organizations to which (provide details in <b>Part VI</b> ). See instructions.	h the organization is res	ponsive	8				
9	Distributable amount for 2020 from Section C, line 6			9				
10	Line 8 amount divided by line 9 amount			10				
S	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2020	ns	(iii) Distributable Amount for 2020			
1	Distributable amount for 2020 from Section C, line 6							
2	Underdistributions, if any, for years prior to 2020 (reasonable cause required- <i>explain in Part VI</i> ). See instr.							
3	Excess distributions carryover, if any, to 2020							
а	From 2015 <b>16,737.</b>							
b	From 2016 54,410.							
C	From 2017 <b>19,583</b> .							
d	From 2018 28,438.							
е	From 2019 <b>44</b> , <b>920</b> .							
f	Total of lines 3a through 3e	164,088.						
g	Applied to underdistributions of prior years							
h	Applied to 2020 distributable amount							
i	Carryover from 2015 not applied (see instructions)							
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.	164,088.						
4	Distributions for 2020 from Section           D, line 7:         \$ 7,521.							
а	Applied to underdistributions of prior years							
b	Applied to 2020 distributable amount							
C	Remainder. Subtract lines 4a and 4b from line 4.	7,521.						
5	Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI.</i> See instructions.							
6	Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in</i> <b>Part VI.</b> See instructions.							
7	<b>Excess distributions carryover to 2021.</b> Add lines 3j and 4c.	171,609.						
8	Breakdown of line 7:							
а	Excess from 2016 54,410.							
b	Excess from 2017 <b>19,583.</b>							
С	Excess from 2018 28,438.							
d	Excess from 2019 <b>61,657.</b>							
е	Excess from 2020 7,521.							

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Schedule A (Form 990 or 990-EZ) 2020

Schedule A (F	Form 990 or 990-EZ) 2020 FRIENDS OF WAKULLA SPRINGS STATE	PARK 59-3375905 Pa	age <b>8</b>
Part VI	<b>Supplemental Information.</b> Provide the explanations required by Part II, line Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part I 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5,	10; Part II, line 17a or 17b; 11a, 11b, and 11c; Part IV, Section B, IV, Section E, lines 1c, 2a, 2b,	0
	lines 2, 5, and 6. Also complete this part for any additional information. (See ins		
	, _, _,		

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.

Attach to Form 990 or 990-EZ.

Go to www.irs.gov/Form990 for the latest information.



Department of the Treasury Internal Revenue Service Name of the organization

#### FRIENDS OF WAKULLA SPRINGS STATE PARK

Employer identification number 59-3375905

PART III

TO INTEREACT WITH PARK MANAGEMENT FOR A BETTER UNDERSTANDING OF

THE PARK'S ROLE; TO PREVENT ANY DEGRADATION OF PARK RESOURCES;

AND TO ADVOCATE ON BEHALF OF THE PARK, THROUGH PUBLIC EDUCATION

AND OUTREACH ; BEING DEDICATED TO SUPPORTING THE STEWARDSHIP

OF NATURAL AND CULTURAL RESOURCES; AND TO SAFEGUARD

THE SPRINGS FOR ALL, FOR TODAY AND FOR TOMORROW.

Schedule O (Form 990 or 990-EZ) 2020	Page 2		
Name of the organization	Employer identification number		
FRIENDS OF WAKULLA SPRINGS STATE PARK	59-3375905		
Part I Line 16			
Advertising and promotion \$1081.00			
Part I Line 16			
Other office expenses \$1037.00			
Part I Line 16			
EVENTS EXPENSES \$5461.00			
Part I Line 16			
DUES & SUBSCRIPTIONS \$2143.00			
Part I Line 16			
RESOURCE MANAGEMENT EXPENSES \$1585.00			
Part I Line 16			
LODGE LANDSCAPING EXPENSES \$1230.00			
Part I Line 20			
ROUNDING \$2.00			

ame of the organization	Employer identification number
RIENDS OF WAKULLA SPRINGS STATE PARK	59-3375905
art III	
xpenses: \$8039.00 including grants of: \$0.00 Reven	ue: \$0.00
art III	
THER PROGRAM SERVICES INCLUDE SPECIAL EVENTS SUCH	AS THE WAKULLA WILDLIFE
art III	

Form 990-EZ (2020)	
Name of organization	Employer identifying number
FRIENDS OF WAKULLA SPRINGS STATE PARK	59-3375905

#### Part IV List of Officers, Directors, Trustees, and Key Employees (list each one even if notcompensated see the instructions for Part IV)

Check if the organization used Schedule O to respond to any question in this Part IV .....

(a) Name and Title	<b>(b)</b> Average hours per w eek devoted t position	compensation (Forms	<ul> <li>(d) Health benefits, contributions to employee benefit plans, and deferred</li> <li>compensation</li> </ul>	(e) Estimated amount of other compensation
DARA WILSON				
DIRECTOR	1.0	0.	0.	0.
	0.0	0.	0.	0.
	0.0	0.	0.	0.
	0.0	0.	0.	0.
	0.0	0.	0.	0.
	0.0	0.	0.	0.
	0.0	0.	0.	0.
	0.0	0.	0.	0.
	0.0	0.	0.	0.
	0.0	0.	0.	0.
	0.0	0.	0.	0

0.0	0.	0.	0.

Ο.

TO INTEREACT WITH PARK MANAGEMENT FOR A BETTER UNDERSTANDING OF THE PARK'S ROLE; TO PREVENT ANY DEGRADATION OF PARK RESOURCES; AND TO ADVOCATE ON BEHALF OF THE PARK, THROUGH PUBLIC EDUCATION AND OUTREACH; BEING DEDICATED TO SUPPORTING THE STEWARDSHIP OF NATURAL AND CULTURAL RESOURCES, AND TO SAFEGUARD THE SPRINGS FOR ALL, FOR TODAY AND FOR TOMORROW.