

Florida Department of Environmental Protection

CITIZEN SUPPORT ORGANIZATION 2019 LEGISLATIVE REPORT

(pursuant to Section 20.058 Florida Statutes)

Citizen Support Organization (CSO) Name: Friends of Colt Creek State Park (FCCSP)

Mailing Address: P.O. Box 2655 Lakeland, FL 33806

Telephone Number: 863-660-0682

Website Address (if applicable): FriendsofColtCreek.org

Statutory Authority:

Section 20.2551, F.S., Citizen support organizations; use of property; audit; public records; partnerships. In summary, the statute specifies the organizational requirements, operational parameters, duties of a CSO to support the Department of Environmental Protection (Department), or individual units of the Department, use of Department property, audit requirements, public records requirements, and authorizes public-private partnerships to enhance lands managed by the Department.

Section 258.015, F.S., Citizen support organizations; use of property; audit. In summary, the statute defines a CSO, requires authorization by the Division of Recreation and Parks, and specifies the use of property. This statute authorizes the Partnerships in Parks (PIP) program for state parks, the program's operational parameters, CSO's operational parameters, and donor recognition.

CSO's Mission: Consistent with Articles and Bylaws

Raise funds to sponsor park needs, improvements and enhancements
Host events to bring visitors, especially first time ones, to the park
Recruit and organize volunteers to help with park events and projects
Partner with the park's staff on projects to benefit the park
Conduct Community outreach to educate/inform the community about the park

Description of the CSO's Results Obtained: Expand section as necessary to be complete

The Friends organized our 6th Annual Get to Know Colt Creek State Park Event (March 2019)

The Friends organized a Family Fun Ride for our equestrian park users. (February 2019)

The Friends continued to improve our growing Butterfly Garden

The CSO purchased troughs for our equestrian campground and day use areas

The CSO finished the Gazebo project on Mac Lake (\$14,000)

The CSO continues to raise over \$15,000 annually

The CSO continues to bring in new members and to retain most of our current members

The CSO continues to recruit new volunteers

The CSO organized and funded the Park's Christmas Party for volunteers

Description of the CSO's Plans for the Next Three Fiscal Years: Expand section as necessary to be complete					
*Raise funds to provide a picnic shelter in the Equestrian Campground					
*Renovate the Dead Head Lodge to use as a classroom and meeting room (this was an original structure on the					
property the state purchased that became Colt Creek State Park)					
*Add solar to certain structures in the park					
*Revamp our Annual Get to Know Event into three smaller and more focused events					
*Renewed focus on growing our membership					
*Develop a volunteer recruitment, retention and training program					
*Improve our website with help from the Friends of Florida State Park Foundation					
*Implement the LIFE program with help from the Friends of Florida State Park Foundation					
☐ CSO's Code of Ethics is attached, and if the CSO has a website the code of ethics is posted					
conspicuously. Attached					
☐ CSO has attached the most recent Internal Revenue Service (IRS) Form 990, 990-EZ, or 990-N receipt.					
If filing the 990-N the Department requires the 990 or 990-EZ as a worksheet. All IRS Form 990's must be complete with Part III Program Service and all appropriate Schedules (See attached instructions). <i>Attached</i>					

Friends of Colt Creek State Park, Inc. CODE OF ETHICS

PREAMBLE

- (1) It is essential to the proper conduct and operation of Friends of Colt Creek 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 Colt Creek 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, eward, 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.

Click on the question-mark icons to display help windows.

The information provided will enable you to file a more complete return and reduce the chances the IRS has to contact you.

Form **990-EZ**

Short Form Return of Organization Exempt From Income Tax

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

2018

OMB No. 1545-1150

Open to Public Inspection

Form **990-EZ** (2018)

Department of the Treasury Internal Revenue Service ▶ Do not enter social security numbers on this form as it may be made public.
 ▶ Go to www.irs.gov/Form990EZ for instructions and the latest information.

A F	or the	2018 calend	ar year, or tax year beginning , 2018	, and ending			, 20				
B	Check if a	pplicable:	C Name of organization ?:		D Emple	oyer identi	ification number				
	Address o	change		4650	083225						
	Name cha	ange	E Telep	hone numb	per						
	Initial retu	ırn		863-2	88-0317						
=		rn/terminated	F Grou	F Group Exemption							
=	Amended	return on pending		iber ►							
=		ting Method:	Lakeland FL 33806 ☐ Cash ☐ Accrual Other (specify) ► modified cash	l u			e organization is not				
	Vebsite		Cash Cities (speedily) - Intoditied cash	"			6 · 11 B =				
			eck only one) — ☐ 501(c)(3) ☐ 501(c) () ◀ (insert no.) ☐ 4947(a)(1)	or527	15		Z, or 990-PF).				
			✓ Corporation ☐ Trust ☐ Association ☐ Other								
			7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or	more, or if tota	al assets						
(Pai	rt II, col	lumn (B)) are S	5500,000 or more, file Form 990 instead of Form 990-EZ			▶ \$					
P	art I	Revenu	e, Expenses, and Changes in Net Assets or Fund Balan	ces (see the	instruc	tions fo	or Part I) 📴				
			the organization used Schedule O to respond to any question								
?1	1		ons, gifts, grants, and similar amounts received			1	2500				
?1	2		ervice revenue including government fees and contracts			2	11125				
?1	3	(5)	ip dues and assessments			3	JV 38 V. PODRED				
?1	4	Investmen				4					
	5a		bunt from sale of assets other than inventory 5a	1							
	b	Less: cost									
	c	Gain or (lo		5c							
	6										
	a	0.00	aming and fundraising events: oss income from gaming (attach Schedule G if greater than								
e	a			. 1							
Revenue	b	8 9		of contribution	ne						
eVe			aising events reported on line 1) (attach Schedule G if the	or cornination	115						
$\mathbf{\alpha}$			th gross income and contributions exceeds \$15,000) 66	. 1	175.07						
			<u></u>		337.89						
	d		t expenses from gaming and fundraising events <u>6c</u> e or (loss) from gaming and fundraising events (add lines 6a a	*	N 22400000000000						
	u		e or (loss) from gaming and fundralsing events (add lines ba a	id ob alid sc	ibliact	64	102.02				
	7-			 .1		6d	-162.82				
	7a		s of inventory, less returns and allowances	*	5135.09 3615.35						
	b		of goods sold	*	(C) C (A) C((C) (C) (C)	7.	1510.74				
	C		it or (loss) from sales of inventory (Subtract line 7b from line 7a)			7c	1519.74				
	8		nue (describe in Schedule O)			8	2735.25				
	9		nue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8			9	17654.17				
	10		I similar amounts paid (list in Schedule O)			10	22014.70				
	11		aid to or for members			11					
ses	12		ther compensation, and employee benefits 22			12					
ens	13		al fees and other payments to independent contractors 2			13					
Expenses	14	Occupancy, rent, utilities, and maintenance									
ш	15		ublications, postage, and shipping			15	208.20				
	16		enses (describe in Schedule O) 3			16	5314.97				
1	17	Total expe	enses. Add lines 10 through 16		. ▶	17	27537.87				
ts	18		(deficit) for the year (Subtract line 17 from line 9)			18	9883.70				
Se	19		or fund balances at beginning of year (from line 27, column (A								
Net Assets			r figure reported on prior year's return)			19	32895.88				
et	20	Other char	iges in net assets or fund balances (explain in Schedule O).		* *	20					
Z	21	Net assets	or fund balances at end of year. Combine lines 18 through 20			21	23012 18				

Form 990-EZ (2018) Page 2 Balance Sheets (see the instructions for Part II) Check if the organization used Schedule O to respond to any question in this Part II (A) Beginning of year (B) End of year 32895.88 22 23012.18 22 Cash, savings, and investments 23 23 Land and buildings 24 Other assets (describe in Schedule O) 24 25 Total assets 23012.18 25 26 Total liabilities (describe in Schedule O) 26 27 27 Net assets or fund balances (line 27 of column (B) must agree with line 21) 23012.18 Statement of Program Service Accomplishments (see the instructions for Part III) **Expenses** Check if the organization used Schedule O to respond to any question in this Part III (Required for section What is the organization's primary exempt purpose? park support 501(c)(3) and 501(c)(4) Describe the organization's program service accomplishments for each of its three largest program services, organizations; optional for others.) as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title. Get to Know Colt Creek Annual Event - goal is to ncrease visitation to the park) If this amount includes foreign grants, check here 28a 2025.99 (Grants \$ Water Project - to provide water for horses) If this amount includes foreign grants, check here 29a 2600 (Grants \$ Gazebo - to enhance to use of the park (Grants \$) If this amount includes foreign grants, check here 30a 15790 Other program services (describe in Schedule O)) If this amount includes foreign grants, check here 31a 2881 List of Officers, Directors, Trustees, and Key Employees (list each one even if not compensated – see the instructions for Part IV) Check if the organization used Schedule O to respond to any question in this Part IV (c) Reportable ?1 (d) Health benefits, (b) Average (e) Estimated amount of compensation contributions to employee (a) Name and title hours per week (Forms W-2/1099-MISC) benefit plans, and other compensation devoted to position (if not paid, enter -0-) deferred compensation all volunteeers - no board memebrs compensated

Part	Other Information (Note the Schedule A and personal benefit contract statement requirement instructions for Part V.) Check if the organization used Schedule O to respond to any question in this			S
	instructions for Part v.) Check if the organization used Schedule O to respond to any question in this	s Fari	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		V
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		٧
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		v
b c	If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35b 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		,
37a b	Enter amount of political expenditures, direct or indirect, as described in the instructions [37a] Did the organization file Form 1120-POL for this year?	37b		
38a	Did the organization borrow from, or make any bans to, any officer, director, trustee, or key employee or were any such bans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a		
ь 39	If "Yes," complete Schedule L, Part II and enter the total amount involved			
а	Initiation fees and capital contributions included on line 9			
b	Gross receipts, included on line 9, for public use of club facilities	1		
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		
c	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958.			
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization			
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		
41	List the states with which a copy of this return is filed ▶	100		200
42a	The organization's books are in care of ▶ Julie Townsend Telephone no. ▶	86328	80317	Ì.
	Located at ► 818 Johnson Ave lakeland FL 33801 ZIP+4 ►			
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b	Yes	١
	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? If "Yes," enter the name of the foreign country >	42c		33
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	X		•
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	Yes	١
Þ	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		
c	Did the organization receive any payments for indoor tanning services during the year?	44c		3
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		100
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	451		
		45h		4

5/21/19

Preparer's signature

Sign

Here

Paid

Preparer

Use Only

Signature of officer

Print/Type preparer's name

Firm's name

Julie Townsend, Treasurer

May the IRS discuss this return with the preparer shown above? See instructions

Type or print name and title

Date

Check | if

self-employed

Firm's EIN 🕨

Phone no.

Date

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 601 (c) (3) organization or a section 4947 (a) (f) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

lame of the organization					Employer identification	number
Friends of Colt Creek State Park, Inc					46508	3225
Part I Reason for Public Char	rity Status (Al	l organizations must	complet	e this p	art.) See instructio	ns.
The organization is not a private founda	ition because it	is: (For lines 1 through	12, chec	k only or	ne box.)	
1 A church, convention of churc					National Contract of the Contr	
2 A school described in section						
3 A hospital or a cooperative hos						
4 A medical research organization hospital's name, city, and state	.00	onjunction with a hosp	oital desc	ribed in s	ection 170(b)(1)(A)(iii). Enter the
5 An organization operated for section 170(b)(1)(A)(iv). (Com		college or university	owned o	operate	ed by a government:	al unit described in
6 A federal, state, or local govern	nment or govern	nmental unit described	in sectio	n 170(b)	(1) (A) (v).	
7 An organization that normally described in section 170(b)(1)			port from	a gover	nmental unit or from	the general public
8 ☐ A community trust described i	n section 170(b)(1)(A)(vi). (Complete I	Part II.)			
9 An agricultural research organ or university or a non-land-gra university:						
10 ☑ An organization that normally receipts from activities related support from gross investment acquired by the organization a	to its exempt for tincome and ur fter June 30, 19	unctions—subject to a nrelated business taxal 175. See section 509(a	ertain exc ble incom a) (2) . (Cor	eptions, e (lessisi nplete Pa	and (2) no more than ection 511 tax) from art III.)	n 331/3% of its
11 An organization organized and	40	13500			17910738538	
12 An organization organized and					5000 FF 10 10 10 WH WIND WORK WAS A SAN TO SAN THE SAN	
of one or more publicly support Check the box in lines 12a thro						
 Type I. A supporting organithe supported organization supporting organization. Yes 	(s) the power to	regularly appoint or e	lect a ma	jority of t		
b Type II. A supporting organ control or management of organization(s). You must	the supporting	organization vested in	the same			
c Type III functionally integ its supported organization(ally integrated with,
d Type III non-functionally in that is not functionally integrequirement (see instruction	grated. The orga	anization generally mu:	st satisfy	a distribu	ition requirement an	
€ ☐ Check this box if the organ functionally integrated, or l						ell, Type III
f Enter the number of supported of Provide the following information				8 81 15		3 22
(i) Name of supported organization	(i) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	1-10 listed in your governing support (see			(vi) Amount of other support (see instructions)
		2	Yes	No	9	y.
A)		66	K			
В)		8	20			
C)		Si .	8			
D)						
E)		8	S) :			

Part							
	(Complete only if you checked th						ıalify under
Cont	Part III. If the organization fails to ion A. Public Support	quality unde	erthe tests III	stea below, p	nease comple	ete Part III.)	
	ndaryear (or fiscal year beginning in)	(a) 2014	T /b) 201E	(a) 2016	/db 2017	(0) 2010	(f) Total
Calei	Gifts, grants, contributions, and	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(i) Total
	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	9				5)	
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3		e e	8	6		16
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)						
			53	5.	3	55	
6 Sect	Public support. Subtract line 5 from line 4 ion B. Total Support	G.	Gr.		60	50	9 6
100000000000000000000000000000000000000	idar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7	Amounts from line 4	330	30,		3.00	3,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
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.)	5	8				
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc.					12	
13	First five years. If the Form 990 is for th						
40000	organization, check this box and stop her			2 2 0 0 12			
-	ion C. Computation of Public Suppor			FOR HOSE WAS TO MAKE			
14 15	Public support percentage for 2018 (line 6 Public support percentage from 2017 Sch					14	%
16a	말했다면 보고 하고 있는 아이들은 아이들이 되었다면 하는데	zation did not	check the box	x on line 13, a	nd line 14 is 3	31/3% or more	check this
b	331x3% support test—2017. If the organization	zation did not	check a box o	on line 13 or 16	ŝa, and line 15	is 331a% or n	nore, check
17a	10%-facts-and-circumstances test - 20 10% or more, and if the organization me Part VI how the organization meets the "toganization".	ets the "facts facts-and-circ	⊱and-circumst cumstances" te	ances" test, cl est. The organi	heck this box ization qualifie	and stop here s as a publidy	Explain in supported
b	10%-facts-and-circumstances test — 20 15 is 10% or more, and if the organiza Explain in Part VI how the organization m supported organization	tion meets the neets the "fac	ne "facts-and- ts-and-circum	circumstances stances" test.	"test, check The organizat	this box and ion qualifies a	stop here. s a publicly
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 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.)

e United States	on A. Public Support	t 8	t 3		3	3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3	
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1159.40	1719.16	0	16495	2500	21873.55
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	1100.10			10,100	2000	21010.00
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	64					
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6 7a	Total. Add lines 1 through 5						
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	Add lines 7a and 7b Public support. (Subtract line 7c from line 6.)						21873.66
	on B. Total Support						
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources.						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c	Addlines 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.)	0		0	8	ő ř	
14	First five years. If the Form 990 is for the organization, check this box and stop here						
Secti	on C. Computation of Public Support					700,00007 0.7	92-3
15	Public support percentage for 2018 (line 8					15	100 %
16	Public support percentage from 2017 Sch			1 15 pt pt pt	501 501 50, 61 61	16	100 %
	on D. Computation of Investment Inc			CONTRACTOR OF THE STATE OF THE	S S S PATE	T I	
17	Investment income percentage for 2018 (li					17	%
18	Investment income percentage from 2017 331/s/s support tests—2018. If the organization					18 201 a 04	% and line
19a	17 is not more than 331%, check this box a						
b	331/a% support tests-2017. If the organiza	etion did not ch	neck a box on l	ine 14 or line 19	9a, and line 16	is more than 33	31/s%, and
20	line 18 is not more than 331/3%, check this be Private foundation. If the organization did						31.000000000000000000000000000000000000
	The state of the second state of the state of the second state of	THE REAL PROPERTY OF THE PARTY	The will state of the	The said with the said of the	The second section for the second of	www newstwy	A 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4

Supporting Organizations Part IV

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

	on 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		1,10
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).			
За	Did the organization have a supported organization described in section 501 (c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	2 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		
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.	3c	-	=
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.	4a		8
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(d)(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		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c	1	6
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to 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 .	6		
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).	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 or 990-EZ).	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		
b	Did one or more disqualified 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 .	9b		
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 .	9c		
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 10b below.	10a		
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		

10b

Part	Supporting Organizations (continued)		1000	W. 1877
	- 1900 - 15 1502 - 15 19		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 (b) and (c) below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	115		
	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.	11c		100
Secti	on B. Type I Supporting Organizations	1232.00		
	A CONTRACT OF THE CONTRACT OF		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to 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.	2		
Sacti	on C. Type II Supporting Organizations			
Secu	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 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	163	
Secti	on D. All Type III Supporting Organizations			
8.	, , , , , , , , , , , , , , , , , , , ,		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		
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? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations 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? 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 a b c	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see . The organization satisfied the Activities Test. Complete line 2 below. The organization is the parent of each of its supported organizations. Complete line 3 below. The organization supported a governmental entity. Describe in Part VI how you supported a government entity (Activities Test. Answer (a) and (b) below.			ions).
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.	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.	2b		
3 a	Parent of Supported Organizations. Answer (a) and (b) below . 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? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Vas." describe in Part III the role played by the organization in this regard	36		

Section A – Adjusted Net Income		(A) Prior Year	(B) Current Yea (optional)
1 Net short-term capital gain	1		Tobusiness
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		- 18
4 Add lines 1 through 3.	4		3
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 Yea (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	16		8
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1o)	1d		
e Discount daimed 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 1 d.	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		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		

Part	Type III Non-Functionally Integrated 509(a)(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	empt purposes of suppo	orted	
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	ınizations	
4				
5	Qualified set-aside amounts (prior IRS approval required)		*	
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.	00 20 FM	- 0	
8	Distributions to attentive supported organizations to whice (provide details in Part VI). See instructions.	h the organization is res	ponsive	
9	Distributable amount for 2018 from Section C, line 6			
10	Line 8 amount divided by line 9 amount	28		
Sect	ion E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1	Distributable amount for 2018 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2018 (reasonable cause required—explain in Part VI). See instructions.			-
3	Excess distributions carryover, if any, to 2018			
	From 2013		- ·	
b	From 2014			
c	From 2015			
	From 2016			
_	From 2017			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
	Applied to 2018 distributable amount			
i	Carryover from 2013 not applied (see instructions)		9	
j	Remainder, Subtract lines 3g, 3h, and 3i from 3f.	3		
4	Distributions for 2018 from Section D, line 7:			
а	Applied to underdistributions of prior years			
b	Applied to 2018 distributable amount			
c	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI . See instructions.			
6	Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7	Excess distributions carryover to 2019. Add lines 3j and 4c.			
8	Breakdown of line 7:			
а	Excess from 2014			151
b	Excess from 2015			
c	Excess from 2016			
d	Excess from 2017			
e	Excess from 2018			

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

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

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

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

Name of the organization	Employer identification number
Friends of Colt Creeek State Park, Inc	465083225
other revenue (line 8)	
recycling 338.94	
recycling 350.54	
dontion box 1329.06	
washer/dryer 654.25	
other (refinds etc) 350.00	
TOTAL 2735.25	
101AL 2733.23	
other expenses (line 16)	
First Day Hike 102.09	
Butterfly Garden Workdays 279.83	
Advertising 70.00	
Advertising 70.00	
sales tax 281.79	
square fees 30.71	
gen. event supplies 113.94	
meeting supplies 33.27	
Theeting supplies 33.27	
Get to know event 2025.99	
recycling 38.96	
campground Opening 1034.95	
misc 1303.44	
11130 1300.44	
TOTAL 5314.97	
grants paid (line 10) 22014.70	
other program services: washer/dryer purchase 2881	