

Florida Department of Environmental Protection

CITIZEN SUPPORT ORGANIZATION 2017 REPORT

(pursuant to Florida Statute 20.058)

Citizen Support Organization (CSO) Name: The Friends of Fort Cooper, Inc							
Mailing Address:	3100 S. Old Flora	al City Rd. Inverness, FL 34450_					
Telephone Number:	352-726-0315	Website Address (if applicable):	www.friendsoffortcooper.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.

Brief Description of the CSO's Mission:

The Friends are organized to operate exclusively as a support group for Fort Cooper State Park. The Friends will work to increase public awareness about the park and its local heritage and will provide volunteer service for the advancement of park programs.

The Friends will assist the State of Florida Department of Environmental Protection with the preservation and conservation of park property including structures, grounds, recreational facilities, and Lake Holathlikaha.

Brief Description of the CSO's Results Obtained:

CSO members volunteer approximately 2,000 hours each year to support park maintenance projects. These projects included: repairing Fort Site trail; disking fire lanes; fence line replacement and repairs; removing dead trees throughout the park; purchase lumber to repair front fence and gate; The CSO also purchased and donated equipment and supplies to the park. CSO sponsored special events include Fort Cooper Days, Living History Days, Nights of Lights and Bluegrass Festival.

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

The CSO will continue supporting Fort Cooper State Park through its volunteer maintenance program, special events, fundraising, donations of supplies and equipment and park programs to increase public awareness of Fort Cooper State Park and its local heritage. With direction from the park manager, the CSO will help in the preservation and conservation of park property including structures, grounds, recreational facilities, and Lake Holathlikaha.

- ☑ Copy of the CSO's Code of Ethics attached (Model provided; see CSO 2014 instructions)
- ☑ Certify the CSO has completed and provided to the Department the organization's most recent Internal Revenue Service (IRS) Form 990, 990-EZ, or 990-N/Annual Financial Statement

The Friends of Fort Cooper, Inc. CODE OF ETHICS

PREAMBLE

- (1) It is essential to the proper conduct and operation of The Friends of Fort Cooper, 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 The Friends of Fort Cooper, 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.

Adopted at The Friends of Fort Cooper board meeting July 22, 2014

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)

2016

OMB No. 1545-1150

Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.

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

C Name of organization D Employer identification of \$9-2978381	
Number and street (or P.O. box, if mail is not delivered to street address) Number and street (or P.O. box, if mail is not delivered to street address) Formal return/heminated Amended return Application pending Application pending Application pending Website: ▶	
Initial return Final return/terminated Amended return Application pending City or town, state or province, country, and ZIP or foreign postal code Inverness, FL 34450 F Group Exemption Number ▶	
Final return/terminated Amended return Application pending City or town, state or province, country, and ZIP or foreign postal code F Group Exemption Number ▶	<u> </u>
City or town, state or province, country, and ZIP or foreign postal code Invermess, FL 34450 Invermess, FL 34450 Invermess, FL 34450 H Check ▶ ☑ if the organic required to attach Schedule	
Application pending Inverness, FL 34450 G Accounting Method:	
required to attach Schedule of the program service revenue including government fees and contracts 1 Contributions, gifts, grants, and similar amounts received	
required to attach Schedule of the program service revenue including government fees and contracts 1 Contributions, gifts, grants, and similar amounts received	ation is not
K Form of organization:	
K Form of organization:	-PF).
L Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ	
Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part Check if the organization used Schedule O to respond to any question in this Part! 1 Contributions, gifts, grants, and similar amounts received	
Check if the organization used Schedule O to respond to any question in this Part !	
Check if the organization used Schedule O to respond to any question in this Part !)
1 Contributions, gifts, grants, and similar amounts received	
2 Program service revenue including government fees and contracts	2,487
3 Membership dues and assessments	
4 Investment income	105
b Less: cost or other basis and sales expenses	68
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	
6 Gaming and fundraising events a Gross income from gaming (attach Schedule G if greater than	
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 \$ 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 9,089	
c Less: direct expenses from gaming and fundraising events 6c 9,177	
d Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract	
line 6c)	0
7a Gross sales of inventory, less returns and allowances 7a	
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	2,660
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	
13 Professional fees and other payments to independent contractors	
- 15 Thirting, publications, postage, and shipping	807
16 Other expenses (describe in Schedule O)	8,971
17 Total expenses. Add lines 10 through 16	9,778
18 Excess or (deficit) for the year (Subtract line 17 from line 9)	0
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)	37,452
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)	2.,
21 Net assets or fund balances at end of year. Combine lines 18 through 20 > 21	37,542

Fal	till Balance Sheets (see the instructions for	or Part II)				
	Check if the organization used Schedule	O to respond to a	ny question in this F	Part II		<u> </u>
				(A) Beginning of year		B) End of year
22	Cash, savings, and investments			37,452		30,571
23	Land and buildings		THE RESERVE TO SERVE THE PARTY OF THE PARTY		23	
24	Other assets (describe in Schedule O)				24	
25	Total assets		10 / 10 / 10 / 10 / 10 / 10 / 10 / 10 /	37,452	$\overline{}$	30,571
26	Total liabilities (describe in Schedule O)		-		26	
27	Net assets or fund balances (line 27 of column			37,452	27	30,571
Par	Statement of Program Service Accompany Check if the organization used Schedule			1000000		Expenses
Mhat	t is the organization's primary exempt purpose?			Part III L		ired for section
)(3) and 501(c)(4) sizations; optional for
as m	ribe the organization's program service accomplisheasured by expenses. In a clear and concise mons benefited, and other relevant information for ea	anner, describe the			other	
28	ons benefited, and other relevant information for ea	ch program une.				
28						
	(Grants \$) If this amount	includes foreign are	nte chack hara		28a	
29					204	
23						
	(Grants \$) If this amount	includes foreign gra	nts. check here .	▶ 🗍	29a	
30						

		includes foreign gra	nts, check here .	▶ 🗆	30a	
31	Other program services (describe in Schedule O)					
	(Grants \$) If this amount	includes foreign gra	nts, check here .	▶ 🔲	31a	
ACCURATION AND ADDRESS OF THE PARTY OF THE P	Total program service expenses (add lines 28a t				32	
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	0-EZ (2016)			age 3
Part	Other Information (Note the Schedule A and personal benefit contract statement requirements instructions for Part V) Check if the organization used Schedule O to respond to any question in this			
	instructions for Part vy check if the organization used Schedule O to respond to any question in this	rait	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	100	√
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		1
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		1
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,	35b		1
	reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c		1
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		1
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a			
b	Did the organization file Form 1120-POL for this year?	37b	17Festa	/
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? .	38a	Annes.	
b	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b			
39	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on line 9			
b 40a	Gross receipts, included on line 9, for public use of club facilities			
	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	100		
	on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization			
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		1
41	List the states with which a copy of this return is filed ▶			
42a	The organization's books are in care of ► Located at ► Telephone no. ► ZIP + 4 ►			
b			Yes	No
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country: ▶	42b	(1584)S	1
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
c	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		1
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	٠.		▶ □
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	No 🗸
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b		
c	Did the organization receive any payments for indoor tanning services during the year?	44c		V
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	250.7	1
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)	45b		J

Form	990-EZ	(2016

Page 4

46	Did ti	ne organization engage, directly or in	ndirectly, in political c	amp	aign activities on	behalf of	or in opposi	tion	Yes	No
Part \	VI	ndidates for public office? If "Yes," of Section 501(c)(3) organizations All section 501(c)(3) organization 50 and 51. Check if the organization used Science of Science 1 and 1 an	s only s must answer que	stio	ns 47–49b and	52, and c	omplete th		or lin	L√ es
48 49a b 50	Did to year? Is the Did to If "Ye Comp	he organization engage in lobbying if "Yes," complete Schedule C, Par organization a school as described in the organization make any transfers to se," was the related organization a seplete this table for the organization's byees) who each received more than	activities or have a still	secti)? If ritab ritab ritab	on 501(h) electio "Yes," complete selected organized employees (other	n in effect	during the	. 47 . 48 . 49a . 49b ors, truste		
	(a)	Name and title of each employee	(b) Average hours per week devoted to position	(Fo	(c) Reportable compensation rms W-2/1099-MISC)	contribution benefit plans	th benefits, is to employee s, and deferred ensation	(e) Estimate other con		
51	\$100	number of other employees paid ovolete this table for the organization 000 of compensation from the organization of compensation from the organization fro	s five highest compenization. If there is no	nsa	ted independent		T	received		than
								Company		
d	Total	number of other independent contra	actors each receiving	ovei	\$100,000	>				
	comp		· · · · · · ·	·	<u> </u>	<u></u>	· · · ·	.▶□ Yes		
		of perjury, I declare that I have examined this in discomplete. Declaration of preparer (other than					ledge.			it is
Sign Here		Signature of officer Kenneth k Type or print name and title	soch, Pr	e e	ident	Da		-11		
Paid Prepa		Print/Type preparer's name Firm's name ▶	Preparer's signature		Da		Check ☐ self-emplo			
Use (Firm's address ▶ discuss this return with the preparer	shown above? See i	nstr	uctions		none no.	► ☐ Yes		No (2016)

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

Open to Public Inspection

Name of	the organ	ization		Employer identification number
Friends	of Fort	Cooper		59-2978381
990-EZ	LN16	New windows in Rec Hall	\$3186.56	
	LN16	Two new small appliences for Rec Hall kitchen	\$524.28	
	LN16	New A/C in Rec Hall	\$654.65	
	LN16	New laundry shed at the shop	\$2450.00	
	LN16	New shop lighting & storage cabinet	\$434.81	
	LN16	Equipment rental for Park project	\$538.00	
	LN16	New wireless PA System for Park events	\$579.00	
	LN16	Cards &/or flowers sent to volunteer members	\$104.00	
	LN16	Office supplies	\$51.21	
	LN16	Volunteer uniform shirts	\$127.90	
	LN16	Florida Department of Revenue	\$10.80	
	LN16	Membership Fee - Citrus County Historical Society	\$30.00	
	LN16	Membership Fee - Citrus County Chamber of Commerce	\$180.00	
	LN16	Membership Fee - Friends of Florida State Parks	\$100.00	



Exempt Organizations Select Check

Exempt Organizations Select Check Home

990-N (e-Postcard) filer Information

Tax Period:

2016 (01/01/2016 - 12/31/2016)

Employer Identification Number (EIN):

59-2978381

Legal Name: THEFRIENDSOFFORTCOOP ERINC

Mailing Address: 3100SOLDFLORALCITYRD INVERNESS, FL 344506913 United States

Doing Business As:

Gross receipts not greater than:

\$50,000

Organization has terminated:

Principal Officer's Name and Address: FRANCISTREPANIER

6376EGURLEYST INVERNESS, FL 34452 **United States**

Website URL:

Related 990-N (ePostcard) Filings:

If the organization has filed additional Forms 990-N (e-Postcards), link(s) to additional e-Postcard filings are displayed below. Click on the link(s) to see the information included in those filing(s).

Tax Year 2010
Tax Year 2011
Tax Year 2012
Tax Year 2013

Tax Year 2014 Tax Year 2015

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