



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 Marjorie Kinnan Rawlings Farm, Inc.

Mailing Address: PO Box 337, Micanopy, FL 32667

Telephone Number: (352) 373-8885

Website Address (if applicable): <https://marjoriekinnanrawlings.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*

**The purpose of the organization is to conduct programs, foster activities, raise funds and make expenditures to facilitate and enhance the preservation and interpretation of the Marjorie Kinnan Rawlings Historic State Park, under the direction of and with priorities set by the Florida Division of Recreation and Parks and the Park Manager.**

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

**Planned, funded and executed the following special Events and programs at a cost of \$427.00**

**Feb 1, 2018: "MKR and St. Augustine" at Lightner Museum, St. Augustine**

**Mar 8, 2018: Carol Fiddia Laxton presentation at the Farm**

**Aug 11, 2018: Marjorie's Birthday Celebration at the Farm**

**Oct 12, 2018: Premier of "Here is Home: MKR and Cross Creek" at Matheson Museum**

**Dec 8, 2018: "Cross Creek Cookery and the Menorcan of St. Augustine" presentation at the Farm**

**Dec 15, 2018: Holiday Open House at the Farm**

**Provided period costumes for the staff conducting tours of the house and grounds**

**Restoration of antique fans for the farmhouse**

**Continue to bring new, energized and talented people to the Friends Board**

**Participated in the Florida Humanities Council \$5,000 Grant for a documentary on MKR and Cross Creek. Result was an award winning 40-minute DVD with total budget (including in-kind donation) of \$52,105.00.**

**Description of the CSO's Plans for the Next Three Fiscal Years: *Expand section as necessary to be complete***

**Continue to support programming and fundraising events at the Farm and in the community to raise program funds, enhance the visibility of the park and keep the legacy of Marjorie Kinnan Rawlings relevant to future generations.**

**Provide funding to maintain the health and well-being of the Citrus Grove**

**Continue to provide funding for:**

**Period costumes**

**Antique fan restoration**

**Preventive Maintenance of Lawn Mowers**

**Materials, seed and plants for seasonal garden**

**Provide funding for:**

**Replacement of entrance kiosk**

**Trail markers/MKR quotes along walking trails**

**Assist the park with meeting accessibility needs of visitors**

**Continue and expand the relationship with Marjorie Kinnan Rawlings Elementary School**

**Continue to produce a high-quality quarterly newsletter**

**Re-work the Friends Website to include timely updates.**

**Continue to grow membership and retain current members**

**Continue relationships with MKR Society, Matheson History Museum and the Rawlings Collection Staff at UF Libraries**

**Acquire a golf cart for work around the farm**

**Institute an annual Volunteer/CSO Award Banquet**

- CSO's Code of Ethics is attached, and if the CSO has a website the code of ethics is posted conspicuously.**
- 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).**

**Friends of the Marjorie Kinnan Rawlings Farm, Inc.**  
**CODE OF ETHICS**

**PREAMBLE**

- (1) It is essential to the proper conduct and operation of the Friends of the Marjorie Kinnan Rawlings Farm, 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 CSO 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 t

Adopted by the Board of Directors, January 2015.



[Home](#) > [Tax Exempt Organization Search](#) > **Friends Of The Marjorie Kinnan Rawlings Farm**

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# Friends Of The Marjorie Kinnan Rawlings Farm

EIN: 59-3451627 | Micanopy, FL, United States

## Publication 78 Data ⓘ

Organizations eligible to receive tax-deductible charitable contributions. Users may rely on this list in determining deductibility of their contributions.

**On Publication 78 Data List:** Yes

**Deductibility Code:** PC

## Form 990-N (e-Postcard) ⓘ

Organizations who have filed a 990-N (e-Postcard) annual electronic notice. Most small organizations that receive less than \$50,000 fall into this category.

### > Tax Year 2018 Form 990-N (e-Postcard)

**Tax Period:**

2018 (01/01/2018 - 12/31/2018)

**EIN:**

59-3451627

**Legal Name (Doing Business as):**

Friends Of The Marjorie Kinnan Rawlings Farm

**Mailing Address:**

PO Box 337  
Micanopy, FL 32667  
United States

**Principal Officer's Name and Address:**

Margaret Anne Pierce

249 Herman Drive  
Hawthorne, FL 32640  
United States

**Gross receipts not greater than:**

\$50,000

**Organization has terminated:**

No

**Website URL:**

> **Tax Year 2017 Form 990-N (e-Postcard)**

> **Tax Year 2016 Form 990-N (e-Postcard)**

> **Tax Year 2015 Form 990-N (e-Postcard)**

> **Tax Year 2014 Form 990-N (e-Postcard)**

> **Tax Year 2013 Form 990-N (e-Postcard)**

> **Tax Year 2012 Form 990-N (e-Postcard)**

> **Tax Year 2011 Form 990-N (e-Postcard)**

> **Tax Year 2010 Form 990-N (e-Postcard)**

> **Tax Year 2008 Form 990-N (e-Postcard)**

> **Tax Year 2007 Form 990-N (e-Postcard)**





**Return of Organization Exempt From Income Tax**

**2018**

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

**Open to Public Inspection**

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

▶ Go to [www.irs.gov/Form990EZ](http://www.irs.gov/Form990EZ) for instructions and the latest information.

Department of the Treasury  
Internal Revenue Service

**A For the 2018 calendar year, or tax year beginning** January 1, 2018, **and ending** December 31, 2018

**B** Check if applicable:

<input type="checkbox"/> Address change	<input checked="" type="checkbox"/> Name of organization	<b>D</b> Employer identification number
<input type="checkbox"/> Name change	Friends of the Marjorie Kinnan Rawlings Farm, Inc.	59-3451627
<input type="checkbox"/> Initial return	Number and street (or P.O. box, if mail is not delivered to street address) Room/suite	<b>E</b> Telephone number
<input type="checkbox"/> Final return/terminated	PO Box 337	352-481-4099
<input type="checkbox"/> Amended return	City or town, state or province, country, and ZIP or foreign postal code	<b>F</b> Group Exemption Number ▶
<input type="checkbox"/> Application pending	Micanopy, FL 32667	

**G** Accounting Method:  Cash  Accrual Other (specify) ▶ \_\_\_\_\_

**H** Check  if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

**I** Website: ▶ [www.marjoriekinnanrawlings.org](http://www.marjoriekinnanrawlings.org)

**J** Tax-exempt status (check only one) -  501(c)(3)  501(c) ( ) ◀ (insert no.)  4947(a)(1) or  527

**K** Form of organization:  Corporation  Trust  Association  Other \_\_\_\_\_

**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)) are \$500,000 or more, file Form 990 instead of Form 990-EZ. ▶ \$ 1,052

**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (see the instructions for Part I)  
Check if the organization used Schedule O to respond to any question in this Part I

		<b>Revenue</b>		<b>Expenses</b>		<b>Net Assets</b>	
<b>1</b>	Contributions, gifts, grants, and similar amounts received	<b>1</b>	1,265	<b>10</b>	Grants and similar amounts paid (list in Schedule O)	<b>10</b>	4,677
<b>2</b>	Program service revenue including government fees and contracts	<b>2</b>	0	<b>11</b>	Benefits paid to or for members	<b>11</b>	0
<b>3</b>	Membership dues and assessments	<b>3</b>	3,449	<b>12</b>	Salaries, other compensation, and employee benefits	<b>12</b>	0
<b>4</b>	Investment income	<b>4</b>	586	<b>13</b>	Professional fees and other payments to independent contractors	<b>13</b>	
<b>5a</b>	Gross amount from sale of assets other than inventory	<b>5a</b>	0	<b>14</b>	Occupancy, rent, utilities, and maintenance	<b>14</b>	
<b>b</b>	Less: cost or other basis and sales expenses	<b>5b</b>	0	<b>15</b>	Printing, publications, postage, and shipping	<b>15</b>	
<b>c</b>	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	<b>5c</b>	0	<b>16</b>	Other expenses (describe in Schedule O)	<b>16</b>	4,978
<b>6</b>	Gaming and fundraising events:			<b>17</b>	<b>Total expenses.</b> Add lines 10 through 16 ▶	<b>17</b>	9,655
<b>a</b>	Gross income from gaming (attach Schedule G if greater than \$15,000)	<b>6a</b>	0	<b>18</b>	Excess or (deficit) for the year (Subtract line 17 from line 9)	<b>18</b>	-3,303
<b>b</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)	<b>6b</b>	1,052	<b>19</b>	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)	<b>19</b>	36,831
<b>c</b>	Less: direct expenses from gaming and fundraising events	<b>6c</b>	0	<b>20</b>	Other changes in net assets or fund balances (explain in Schedule O)	<b>20</b>	0
<b>d</b>	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	<b>6d</b>	1,052	<b>21</b>	Net assets or fund balances at end of year. Combine lines 18 through 20 ▶	<b>21</b>	33,528
<b>7a</b>	Gross sales of inventory, less returns and allowances	<b>7a</b>	0				
<b>b</b>	Less: cost of goods sold	<b>7b</b>	0				
<b>c</b>	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	<b>7c</b>	0				
<b>8</b>	Other revenue (describe in Schedule O)	<b>8</b>	0				
<b>9</b>	<b>Total revenue.</b> Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 ▶	<b>9</b>	6,352				





**Part V Other Information** (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V.) Check if the organization used Schedule O to respond to any question in this Part V

		Yes	No
<b>33</b>	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	<b>33</b>	✓
<b>34</b>	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	<b>34</b>	✓
<b>35a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	<b>35a</b>	✓
<b>b</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	<b>35b</b>	
<b>c</b>	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	<b>35c</b>	✓
<b>36</b>	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	<b>36</b>	✓
<b>37a</b>	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ <b>37a</b>		
<b>b</b>	Did the organization file <b>Form 1120-POL</b> for this year?	<b>37b</b>	✓
<b>38a</b>	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?	<b>38a</b>	✓
<b>b</b>	If "Yes," complete Schedule L, Part II and enter the total amount involved	<b>38b</b>	
<b>39</b>	Section 501(c)(7) organizations. Enter:		
<b>a</b>	Initiation fees and capital contributions included on line 9	<b>39a</b>	
<b>b</b>	Gross receipts, included on line 9, for public use of club facilities	<b>39b</b>	
<b>40a</b>	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ _____; section 4912 ▶ _____; section 4955 ▶ _____		
<b>b</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	<b>40b</b>	✓
<b>c</b>	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 ▶ _____		
<b>d</b>	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization ▶ _____		
<b>e</b>	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	<b>40e</b>	✓
<b>41</b>	List the states with which a copy of this return is filed ▶ _____		
<b>42a</b>	The organization's books are in care of ▶ _____ Telephone no. ▶ _____ Located at ▶ _____ ZIP + 4 ▶ _____		
<b>b</b>	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country ▶ _____ See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	<b>42b</b>	✓
<b>c</b>	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 ▶ _____	<b>42c</b>	✓
<b>43</b>	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of <b>Form 1041</b> —Check here <input checked="" type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year ▶ <b>43</b>		
<b>44a</b>	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	<b>44a</b>	✓
<b>b</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	<b>44b</b>	✓
<b>c</b>	Did the organization receive any payments for indoor tanning services during the year?	<b>44c</b>	✓
<b>d</b>	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	<b>44d</b>	✓
<b>45a</b>	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	<b>45a</b>	✓
<b>b</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	<b>45b</b>	✓

46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I

Table with 3 columns: Question number, Yes, No. Row 46: 46, Yes, No.

Part VI Section 501(c)(3) Organizations Only

All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51.

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

47 Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II

Table with 3 columns: Question number, Yes, No. Row 47: 47, Yes, No (checked).

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

Table with 3 columns: Question number, Yes, No. Row 48: 48, Yes, No (checked).

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

Table with 3 columns: Question number, Yes, No. Row 49a: 49a, Yes, No (checked).

b If "Yes," was the related organization a section 527 organization?

Table with 3 columns: Question number, Yes, No. Row 49b: 49b, Yes, No (checked).

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees, and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

Table with 5 columns: (a) Name and title of each employee, (b) Average hours per week devoted to position, (c) Reportable compensation (Forms W-2/1099-MISC), (d) Health benefits, contributions to employee benefit plans, and deferred compensation, (e) Estimated amount of other compensation.

f Total number of other employees paid over \$100,000

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

Table with 3 columns: (a) Name and business address of each independent contractor, (b) Type of service, (c) Compensation.

d Total number of other independent contractors each receiving over \$100,000

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

Yes No (checked)

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here section with fields for Signature of officer, Date, Type or print name and title.

Paid Preparer Use Only section with fields for Print/Type preparer's name, Preparer's signature, Date, Check if self-employed, PTIN, Firm's name, Firm's EIN, Firm's address, Phone no.

May the IRS discuss this return with the preparer shown above? See instructions Yes No (checked)

**SCHEDULE O**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**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](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2018**

**Open to Public  
Inspection**

Name of the organization

**Friends of the Marjorie Kinnan Rawlings Farm, Inc.**

Employer identification number

**59-3451627**

**\$4677** Florida Humanities Council Grant: Video Here is Home: Marjorie Kinnan Rawlings and Cross Creek (Oct, 2018)

**\$2897** Travel expenses (Sonya Doctorian)

**\$93** Postage

**\$53** Supplies and Copies

**\$634** Production

**\$500** Publicity for Premier Event

**\$500** Food for Premier Event

**\$139** Web host and Domain registration

**\$426** Special Events at Park: August 2018 MKR Birthday, Dec 6 & 2018 Friends talk/meeting, Dec 16, 2018 Holiday Party

**\$205** Antique Fan repair

**\$1262** Park needs

**\$279** Garden supplies-seeds, plants

**\$68** Office supplies

**\$77** Furniture wax

**\$11** Light bulbs

**\$520** Fertilizer for citrus trees

**\$300** facilities use Cross Creek Volunteer Fire Dept.

**\$88** PO Box

**\$100** membership Friends Florida State Parks

**\$81** appreciation gift

**\$1298** Newsletter for members of the Friends

**\$53** Checks for Friends account

**\$26** Member development