

## Florida Department of Environmental Protection CITIZEN SUPPORT ORGANIZATION 2022 LEGISLATIVE REPORT

(pursuant to Section 20.058 Florida Statutes)

Citizen Support Organization (CSO) Name:
Mailing Address:
Telephone Number:
Website Address (required if applicable):
Check to confirm your Code of Ethics is posted conspicuously on your website.
Statutory Authority: Section 20.2551, F.S., Citizen support organizations; use of property; audit; public records; partnerships. In summary, the statute specifies the organizational requirements, operational parameters, duties of a CSO to support the Department of Environmental Protection (Department), or individual units of the Department, use of Department property, audit requirements, public records requirements, and authorizes public-private partnerships to enhance lands managed by the Department.
Section 258.015, F.S., Citizen support organizations; use of property; audit. In summary, the statute defines a CSO, requires authorization by the Division of Recreation and Parks, and specifies the use of property. This statute authorizes the Partnerships in Parks (PIP) program for state parks, the program's operational parameters, CSO's operational parameters, and donor recognition.
YOUR MISSION AND LAST CALENDAR YEAR'S PROGRAM ACCOMPLISHMENTS: CSO's Mission: (Consistent with your Articles and Bylaws)
<b>Describe Last Calendar Year's Results Obtained:</b> Brag! (List or discuss the past calendar year's accomplishments and contributions. Cite support from last calendar year's Annual Program Plan.)
Describe the CSO's Plans for the Next Three Calendar Years:

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

**Total Number of CSO General Membership:** 

**Total Number of Board of Directors:** 

Total Volunteer Hours for the Board of Directors (Hours from VSys - Work with your parks' volunteer manager):

#### **PARK & CSO RELATIONSHIP:**

Do <u>not</u> duplicate by describing accomplishments and contributions in the summary (<u>Brag</u> in the above Results Obtained). Below, describes the <u>relationship</u>.

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

Provide your perspective on

- Changing developments of the park provided by the CSO.
- Effectiveness of the organization in fulfilling their purpose to support the park(s).
- Effectiveness of the Board of Directors in completing their Annual Program Plan.
- The relationship between the park and CSO. What went well? Are there areas of improvement?

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

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

#### **SUMMARIZE FINANCIAL ACTIVITY FOR LAST CALENDAR YEAR, DIRECT PARK(S) SUPPORT & REVENUES:**

**Program Service Expenses** are costs related to providing your organization's programs or services in accordance with your mission. Describe and provide <u>expenses that directly support the park(s)</u>. For established nonprofit organizations, program service expenses generally represent most of the overall expense of the organization. Provide description and total \$ for each that apply.

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

- Park exhibits, displays, signage \$55,000
- Park publications, brochures, maps, etc. \$
- Programing/interpretation support material purchases \$
  - Other program services \$

**Total Program Service Expenses \$82.433** 

#### **Visitor Services Revenue**

Describe revenues and the sources generated from fundraising on park property.

- Park gift shops, craft stores, and concession sales \$
- Merchandise sales (e.g., plants, firewood, ice, t-shirts, hats, etc.) \$
- Programs and Special Events (e.g., fundraising workshops, seasonal events, concerts, etc.) \$ 1.854
  - Vending (e.g., drink machines, penny press, laundry, Wifi, etc.) \$
    - Rentals (e.g., bikes, canoe, kayak, SUPs, etc.) \$
      - In-park donation boxes \$5,375
      - Other visitor services revenue \$
      - Total Visitor Services Revenue \$7,229

\_\_\_\_\_

#### **NET ASSETS:** \$ 67,050.05

Organizations end of last year's <u>Total Liabilities minus Total Assets</u>. This is <u>not</u> the above's Visitor Service Revenue minus Program Service Expenses.

#### **CSO AUDIT THRESHOLD:**

## Last Calendar Year's <u>Total Expenses</u> (including grants) \$ 82,433.00

Are the CSO's annual total expenses \$300,000 including grants? Then Section 215.981(2), Florida Statute requires an independent CPA audit using Government Audit Standards (<u>U.S. GAO Yellow Book</u>). The audit is **due by September 1** (9 months after the CSO's calendar year ends) to the Florida Auditor General and to the Department.

This information is c	omplete to the best	of my knowledge pursuant to Section 20.0	58 Florida Statutes
CSO President	Ann Helr	Digitally signed by Ann Helmers Date: 2022.06.10 11:31:01 -04'00'	6/10/22
Park Manager	Paul Rice	Digitally signed by Paul Rice Date: 2022.06.09 16:44:52 -04'00'	6/9/22

#### CSO's Code of Ethics is attached

CSO has attached the most recent Internal Revenue Service (IRS) Form 990, 990-EZ, or 990-N receipt. All IRS Form 990's must be *complete* with Part III Program Service and *all* appropriate Schedules (A, O and others as appropriate). If filing an IRS extension, attach the IRS 8868 receipt and the most recent complete 990 and schedules.

# Friends of John Pennekamp Coral Reef State Park and Dagny Johnson Key Largo Hammock Botanical State Park CODE OF ETHICS

#### **PREAMBLE**

- It is essential to the proper conduct and operation of Friends of John Pennekamp Coral Reef State Park and Dagny Johnson Key Largo Hammock Botanical State Park (herein "CSO") that its board members, officers, and employees be independent and impartial and that their position not be used for private gain. Therefore, the Florida Legislature in Section 112.3251, Florida Statute (Fla. Stat.), requires that the law protect against any conflict of interest and establish standards for the conduct of CSO board members, officers, and employees in situations where conflicts may exist.
- 2. It is hereby declared to be the policy of the state that no CSO board member, officer, or employee shall have any interest, financial or otherwise, direct or indirect, or incur any obligation of any nature which is in substantial conflict with the proper discharge of his or her duties for the CSO. To implement this policy and strengthen the faith and confidence of the people in Citizen Support Organizations, there is enacted a code of ethics setting forth standards of conduct required of Friends of John Pennekamp Coral Reef State Park and Dagny Johnson Key Largo Hammock Botanical State Park board members, officers, and employees in the performance of their official duties.

### **STANDARDS**

The following standards of conduct are enumerated in Chapter 112, Fla. Stat., and are required by Section 112.3251, Fla. Stat., to be observed by CSO board members, officers, and employees.

#### 1. Prohibition of Solicitation or Acceptance of Gifts

No CSO board member, officer, or employee shall solicit or accept anything of value to the recipient, including a gift, loan, reward, promise of future employment, favor, or service, based upon any understanding that the vote, official action, or judgment of the CSO board member, officer, or employee would be influenced thereby.

#### 2. Prohibition of Accepting Compensation Given to Influence a Vote

No CSO board member, officer, or employee shall accept any compensation, payment, or thing of value when the person knows, or, with reasonable care, should know that it was given to influence a vote or other action in which the CSO board member, officer, or employee was expected to participate in his or her official capacity.

#### 3. Salary and Expenses

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.

# **Return of Organization Exempt From Income Tax**

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

OMB No. 1545-0047

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/Form990 for instructions and the latest information

Open to Public

	For	the 2	2021 calendar v		nina		, 2021, ar	nd endi	na		, 20		
									loyer identification number				
$\bar{\Box}$	Address change Doing business as AND DAGNY JOHNSON KEY LARGO HAMMOCK									L.III.P	84-3717252		
H		chan	· ·		O. box if mail is not delivered to			Room/suit	to	E Tolor	phone number		
H			•	ıe	L Telep								
H	Initial return 1115 GRAND STREET  Final return/terminated City or town, state or province, country, and ZIP or foreign postal code										(305)215-2504		
H					•	gn postal code					ss receipts		
$\vdash$		ided re		KEY LARGO, FL						\$	59,985		
Ш	Appli	cation	pending	-	ncipal officer: <b>ANN HELM</b>	ERS					for subordinates? Yes X No		
	SAME AS C ABOVE H(b) Are all sub												
<u> </u>			t status: X 501(		, , , <u> </u>	947(a)(1) or	527				st. See instructions		
J		site:		KAMPPARKFRIENDS					H(c) Group				
_		_	anization: X Corp	poration Trust Ass	ociation Other >		L Year of formatio	n: 201	.9   м з	State of le	gal domicile: <b>FL</b>		
Pa	art I		Summary										
			•	•	ion or most significant a						IS A VOLUNTEER		
ø		_			PPORTING CONSER								
Governance		E	ENVIRONMENT	TAL, EDUCATIONA	L & RECREATIONA	L EXPERIEN	CES AT BOI	гн дог	HN PENN	EKAMP	& DAGNY JOHNSON		
ž.		-	STATE PARKS										
Š					discontinued its operat		of more than 2	25% of it	ts net asse	1	I		
		3 1	Number of voting	g members of the gove	rning body (Part VI, line	e1a)				. 3	4		
ş				J	s of the governing body	,	)			. 4	4		
ij		5 7	Total number of i	individuals employed ir	calendar year 2021 (P	art V, line 2a)				. 5	0		
Activities &		6 7	Total number of	volunteers (estimate if	necessary)					. 6	15		
4					Part VIII, column (C), lin					. 7a	0		
		<b>d</b>	Net unrelated bu	ısiness taxable income	from Form 990-T, Part	I, line 11				. 7b	0		
									Prior Year		Current Year		
		8 (	Contributions and	d grants (Part VIII, line	1h)				94	648	57,515		
e		9 F	Program service	revenue (Part VIII, line	e 2g)						0		
Revenue	1	<b>0</b> I	nvestment incon	ne (Part VIII, column (A	A), lines 3, 4, and 7d) .						40		
Ş.	1	1 (	Other revenue (F	Part VIII, column (A), lin	nes 5, 6d, 8c, 9c, 10c, ar	nd 11e)					2,430		
	1	2 7	Гotal revenue - a	add lines 8 through 11 (	must equal Part VIII, col	umn (A), line 12	)		94	1,648	59,985		
	1	3 (	Grants and simila	ar amounts paid (Part I	X, column (A), lines 1-3	)					0		
	1	4 E	Benefits paid to	or for members (Part I)	K, column (A), line 4)						0		
	1	5 5	Salaries, other co	ompensation, employee	e benefits (Part IX, colur	nn (A), lines 5-10	0)				0		
ses	1	6a F	Professional fund	draising fees (Part IX,	column (A), line 11e)						0		
Expenses		b 7	Total fundraising	expenses (Part IX, col	lumn (D), line 25) ▶		112						
X	1	7 (	Other expenses (	(Part IX, column (A), lir	nes 11a-11d, 11f-24e)				2	2,729	85,467		
	1	8 7	Total expenses.	Add lines 13-17 (must	equal Part IX, column (	A), line 25) .			2	2,729	85,467		
	1				18 from line 12					,919	(25,482)		
	SS			•					ning of Curr		End of Year		
Net Assets or	g 2	: <b>0</b> 7	Total assets (Pai	rt X, line 16)					92	2,532	69,918		
Asse	<u>e</u> 2	1 1	Total liabilities (F	Part X, line 26)							0		
Ş	គ្គី 2	2 1	Net assets or fur	nd balances. Subtract	line 21 from line 20				92	2,532	69,918		
	art I	ı	Signature I	Block						•			
			of perjury, I declare t	that I have examined this retu	rn, including accompanying sch			of my know	vledge and be	lief, it is			
true	, corre	ect, an	d complete. Declarati	ion of preparer (other than off	icer) is based on all information	of which preparer ha	is any knowledge.						
			ANN HEL	MERS									
Sig	jn	IJ	Signature of o	officer						Da	ate		
He	re		ANN HELMERS, PRESIDENT										
_			Type or print r										
			Print/Type preparer	r's name	Preparer's signature		Date		Check	X if	PTIN		
Pa	id		ANNE E HAI	RRIS	ANNE E HARRIS		05-02-202	22	self-em		P01208392		
	epa:	rer	Firm's name		SERVICES LLC		, <u></u>		irm's EIN ▶	, -,	,		
	e O		Firm's address		HEIGHTS DRIVE				hone no.				
		· · · · ·	5 4441000 P		R FL 33070			["		216-	621-3175		
Max	, tho	IDC	discuss this rotu		own above? See instru	rtions				210-	X Yes No		

81,829

Total program service expenses ▶

Part IV

84-3717252

Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	_		
4	candidates for public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. 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	4		v
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	4		Х
,	assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors	<u> </u>		
٠	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If</i>			
	"Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equip. nt in , , line 10? If "Yes,"			
	complete Schedule D, Part VI	11a		Х
b	, , , , , , , , , , , , , , , , , , , ,	441		
_	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more	11c		37
d	of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>	110		Х
u	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
е		11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	110		- 1
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>	11f		x
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		x
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If			
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		x
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		x
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	40		
47	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	17		v
18	Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i> See instructions	17		Х
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	10		Λ
	If "Yes," complete Schedule G, Part III	19		х
20 a		20a		x
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX. column (A). line 1? If "Yes." complete Schedule I. Parts I and II	21		x

Part IV

FRIENDS OF JOHN PENNEKAMP CORAL REEF STATE PARK 84-3717252 Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		x
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member or any of these persons? If "Yes," complete Schedule L, Part. II	26		х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these			
	persons? If "Yes," complete Schedule L, Part III	27		х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		x
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34		x
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, 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," complete Schedule R, Part V, line 2	35b		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and	ایما		
_	19? Note: All Form 990 filers are required to complete Schedule O.	38	Х	
Par				
	Check if Schedule O contains a response or note to any line in this Part V			
4	Enter the number reported in Pay 2 of Form 1006. Fater 0, if not enalisable		Yes	No
1a h	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Form W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	10		v
	TOPOTRADIO GRADINI (GRADINI) WILLING TO DILET WILLIGHTS!	10	1	Λ

Page 5

Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		х
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	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)?	4a		Х
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	_		
	and services provided to the payor?	7a		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	<b>-</b> -		
	required to file Form 8282?	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year	70		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e 7f		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7g		x
g h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	79 7h		X
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			Λ
	sponsoring organization have excess business holdings at any time during the year?	8		х
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		х
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		х
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
C	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
b 15	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule 0	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	15		
	excess parachute payment(s) during the year?	15		Х
16	If "Yes," see instructions and file Form 4720, Schedule N.	16		7.7
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	10		Х
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any			
.,	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes." complete Form 6069.	.,		

Part VI G

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Se	Cuon A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or			
	if the governing body delegated broad authority to an executive committee or similar			
	committee, explain on Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	_		
	any other officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct	•		
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint	7-		
<b>L</b>	one or more members of the governing body?	7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	76		
0	stockholders, or persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
•	the year by the following:	90	37	
a h	The governing body?	8a 8b	X	
ь 9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at	OD	X	
9	the organization's mailing address? If "Yes," provide the names and addresses on Schedule Q	9		х
Sec	etion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)	3		
	The second of th		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		х
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		х
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	x	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this was done	12c	х	
13	Did the organization have a written whistleblower policy?	13		х
14	Did the organization have a written document retention and destruction policy?	14		х
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		x
b	Other officers or key employees of the organization	15b		х
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
<u> </u>	organization's exempt status with respect to such arrangements?	16b		
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed Florida  Section 6404 requires an experimental to make its Forms 4033 (4034 or 4034 A if applicable) 900 and 900 T (Section 504(a))			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)			
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  Own website  Another's website  Upon request  Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy,			
. 9	and financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
_0	DENNIS CALTAGIRONE (305)331-0525, 1115 GRAND STREET, KEY LARGO, FL 33037			

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# Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See instructions for the order in which to list the persons above.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

		(C)							
(A)	(B)	Position					(D)	(E)	(F)
Name and title	Average	,			than one is both an		Reportable	Reportable	Estimated amount
	hours				r/trustee)		compensation	compensation	of other
	per week						from the organization (W-2/	from related organizations W-2/	compensation from the
	(list any	9 -	Ins	Kev	em Hig	Fo	1099-MISC/	1099-MISC/	organization and
	hours for related	direc	Institution	<u> </u>	ploy	Former	1099-NEC)	1099-NEC	related organizations
	organizations	or al	윙		ee con				
	below	or director	Œ	9	Highest compensemployee				
	dotted line)		ъ		2				
(1) LYNDA MUNSHOWER	2.								
VICE PRESIDENT					1		0	0	0
(2) LYNDSEY CREWS	2 0			1					_
SECRETARY			X				0	0	0
(3) DENNIS CALTAGIRONE	2.0								
TREASURER			х				0	0	0
(4) ANN HELMERS	0								
PRESIDENT	· ·		х				0	0	0
<u>(5)</u>									
<u>(6)</u>									
-									
<u>(7)</u>									
<u>(8)</u>									
<u>(9)</u>									
(40)									
<u>(10)</u>									
(44)									
(11)									
(12)									
(12)									
(13)									
(13)									
(14)									
\(\frac{1}{2}\)									
	l							I.	

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						(C)							
	(A) Name and title	(B)  Average hours per week (list any	box,	unles	eck r ss pe d a d	rson i	han one s both ai r/trustee)		(D)  Reportable compensation from the organization (W-2/	(E)  Reportable compensation from related organizations (W-2/	on of ot d compen		r tion
		hours for related organizations below dotted line)		1099-MISC/	orga	nization d organi:	and						
(15)													
(16)													
(17)													
(18)													
(19)													
(20)													
(21)													
(22)													
(23)								2					
(24)													
(25)		\											
С	Subtotal							· <b>&gt;</b>					
	Total (add lines 1b and 1c)		isted a	· ·	 e) w	 ho re	eceive	· ▶	ore than \$100,000	of			0
	reportable compensation from the organization												1
•	Did the organization list any <b>former</b> officer, direc	tor tructoo l		رمام،		a = h	iahaat		mnonostod			Yes	No
	employee on line 1a? If "Yes," complete Schedu										3		x
	For any individual listed on line 1a, is the sum of re												
	organization and related organizations greater th				cor	nple	te Sch	edu	le J for such				
	individual					• •	• • •	٠.			4		Х
	Did any person listed on line 1a receive or accrue for services rendered to the organization? If "Yes			-			_				5		x
	n B. Independent Contractors	,					μ					ı	
	Complete this table for your five highest compensa	ted independ	lent co	ntra	ctor	s tha	t recei	ved	more than \$100,00	0 of			
	compensation from the organization. Report comp	ensation for t	the cal	enda	ar y	ear e	ending	with	or within the orgar	nization's tax year.			
	(A)								(B)		(C)		
	Name and business addres	S							Description of service	es	Compens	ation	
		·											
2	Total number of independent contractors (including	g but not limi	ited to	thos	se lis	sted	above)	) wh	0				

84-3717252 Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (A) (B) (C) (D) Total revenue Revenue excluded Related or exempt Unrelated function revenue business revenue from tax under sections 512-514 Federated campaigns . . . . . . . . 1a Membership dues . . . . . . . . . . . . 1b 910 Contributions, Gifts, Grants and Other Similar Amounts Fundraising events ..... 1c **d** Related organizations . . . . . . . 1d Government grants (contributions) . . 1e All other contributions, gifts, grants, and similar amounts not included above 1f 56,605 Noncash contributions included in 1g | \$ 57,515 2a Program Service Revenue f All other program service revenue . . . . . . Investment income (including dividends, interest, and 40 40 Income from investment of tax-exempt bond proceeds (ii) Personal (i) Real 6a Gross rents . . . . . . 6a **b** Less: rental expenses . . 6b c Rental income or (loss) d Net rental income or (loss) (i) Securities (ii) Other 7a Gross amount from sales of assets other than inventory 7a **b** Less: cost or other basis and sales expenses . . 7b Other Revenue c Gain or (loss) . . . . . d Net gain or (loss) . . . . . . . 8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 . . . . . . . 8a **b** Less: direct expenses . . . . . . . . . c Net income or (loss) from fundraising events 9a Gross income from gaming activities, See Part IV, line 19 . . . . . . 9a **b** Less: direct expenses . . . . . . . . . 9b c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances . . . . . . . . . 10a **b** Less: cost of goods sold . . . . . . . 10b c Net income or (loss) from sales of inventory . . . . . . . **Business Code** 11a RAFFLE TICKETS 900099 2,430 2,430 b **d** All other revenue . . . . . . . . . . . . . . . . .

2,430

59,985

2,430

e Total. Add lines 11a-11d

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Part IX **Statement of Functional Expenses** Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

	Check if Schedule O contains a response or note to	any line in this Part IX			
	not include amounts reported on lines 6b, 7b,	(A) Total expenses	(B) Program service	(C) Management and	<b>(D)</b> Fundraising
8b, 9	9b, and 10b of Part VIII.		expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and				
	foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (nonemployees):				
а	Management				
b	Legal				
С	Accounting	<u> </u>		1,229	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17 .				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25 column				
	(A) amount, list line 11g expenses on Schedu'				
12	Advertising and promotion	4		924	
13	Office expenses	572		572	
14	Information technology	450	225	113	112
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	210		210	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
а	BANK FEES	278		278	
b	DUES & SUBSCRIPTIONS	530	530		
С	TAXES & LICENSES	200		200	
d	PROGRAM EXPENSE	81,074	81,074		
е	All other expenses				
25	<b>Total functional expenses.</b> Add lines 1 through 24e	85,467	81,829	3,526	112
26	Joint costs. Complete this line only if the				
	organization reported in column (B) joint costs from a combined educational campaign and				
	fundraising solicitation. Check here   if				
	following SOP 98-2 (ASC 958-720)				

Part X **Balance Sheet** 

		Check if Schedule O contains a response or note to any line in this Part X	(A)		
			Beginning of year		End of year
	1	Cash - non-interest-bearing	90,017	1	64,495
	2	Savings and temporary cash investments	-	2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
Ass	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a			
	b	Less: accumulated depreciation 10b		10c	
	11	Investments - publicly traded securities	2,515	11	5,423
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)	92,532	16	69,918
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Ś	22	Loans and other payables to any current or former officer, director,			
<u>It</u> ie		trustee, key employee, creator or founder, substantial contributor, or 35%			
Liabilities		controlled entity or family member of any of these persons		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	0	26	0
		Organizations that follow FASB ASC 958, check here ▶ □			
ģ		and complete lines 27, 28, 32, and 33.			
nce	27	Net assets without donor restrictions		27	
ala	28	Net assets with donor restrictions		28	
Net Assets or Fund Balances		Organizations that do not follow FASB ASC 958, check here			
		and complete lines 29 through 33.			
	29	Capital stock or trust principal, or current funds		29	
	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
	31	Retained earnings, endowment, accumulated income, or other funds	92,532	31	69,918
let,	32	Total net assets or fund balances	92,532	32	69,918
	33	Total liabilities and net assets/fund balances	92,532	33	69,918

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<b>Part</b>					ige <b>1</b> 2	
· uit	XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI	<u> </u>				
1 7	Total revenue (must equal Part VIII, column (A), line 12)	1		59,	985	
2 7	Total expenses (must equal Part IX, column (A), line 25)	2		85,	467	
<b>3</b> F	Revenue less expenses. Subtract line 2 from line 1					
4 1	4 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))					
5 1	Net unrealized gains (losses) on investments	5		2,	868	
6 [	Donated services and use of facilities	6				
7 I	Investment expenses	7				
8 F	Prior period adjustments					
9 (	Other changes in net assets or fund balances (explain on Schedule O)	9			0	
10 1	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
3	32, column (B))	10		69,	918	
Part						
	Check if Schedule O contains a response or note to any line in this Part XII					
		_		Yes	No	
1 /	Accounting method used to prepare the Form 990: X Cash Accrual Other					
ľ	If the organization changed its method of accounting from a prior year or checked "Other," explain on					
5	Schedule O.					
2a \	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		x	
ľ	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or					
r	reviewed on a separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b \	Were the organization's financial statements audited by an independent accountant?		2b		х	
ŀ	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a					
5	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
c i	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of					
t	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c			
	If the organization changed either its oversight process or selection process during the tax year, explain on					
	Schedule O.					
3a /	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the					
	Single Audit Act and OMB Circular A-133?		3a		х	
	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the					

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required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits

EEA

#### SCHEDULE A (Form 990)

### **Public Charity Status and Public Support**

OMB No. 1545-0047

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Department of the Treasury Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ. ▶ Go to www.irs.gov/Form990 for instructions and the latest information. **Open to Public** Inspection

Name of the organization **Employer identification number** FRIENDS OF JOHN PENNEKAMP CORAL REEF STATE PARK 84-3717252 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990).) 2 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross 10 receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. C Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. d Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported organization (ii) EIN (iii) Type of organization (iv) Is the organization (v) Amount of monetary (vi) Amount of (described on lines 1-10 listed in your governing support (see other support (see instructions) above (see instructions)) document? instructions) Yes (A) (B) (C) (D) (E) Total

84-3717252 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Secti	on A. Public Support	•		•	•	,	
Calen	dar year (or fiscal year beginning in) ▶	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	<b>(e)</b> 2021	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")			1,000	94,648	57,515	153,163
2	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
4	<b>Total.</b> Add lines 1 through 3			1,000	94,648	57,515	153,163
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)						95,509
6	Public support. Subtract line 5 from line 4.						57,654
Secti	on B. Total Support				1		
Calen	dar year (or fiscal year beginning in) ▶	(a) 2017	<b>(b)</b> 718	(c) 2019	(d) 2020	(e) 2021	(f) Total
7	Amounts from line 4			1,000	94,648	57,515	153,163
8	Gross income from interest, dividends,					_	
	payments received on securities loans,						
	rents, royalties, and income from						
	similar sources					40	40
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.)					2,430	2,430
11	<b>Total support.</b> Add lines 7 through 10						155,633
12	Gross receipts from related activities, etc.	(see instruction	ons)			12	
13	First 5 years. If the Form 990 is for the or						:)(3)
	organization, check this box and stop her	-			-	•	
Secti	on C. Computation of Public Suppor						· · · · · <u></u>
14	Public support percentage for 2021 (line 6			1, column (f))		14	%
15	Public support percentage from 2020 Sch		•			15	%
16a	33 1/3% support test - 2021. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this						
	box and <b>stop here.</b> The organization qual						
b	33 1/3% support test - 2020. If the organ						
	this box and <b>stop here.</b> The organization						
17a	10%-facts-and-circumstances test - 202	•		•			_
	10% or more, and if the organization mee						
	Part VI how the organization meets the fa						
	organization			-	' <del>-</del> '		_
b	10%-facts-and-circumstances test - 202						_
	15 is 10% or more, and if the organization	-					
	in Part VI how the organization meets the						
	organization						_
18	<b>Private foundation.</b> If the organization di						
10							
	instructions	<del></del>		· · · · · · · ·	<u> </u>	<u> </u>	· · · · • L

Schedule A (Form 990) 2021 EEA

# Schedule B (Form 990)

### **Schedule of Contributors**

OMB No. 1545-0047

2021

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-PF.

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

Name of the organization
FRIENDS OF JOHN PENNEKAMP CORAL REEF STATE PARK

Employer identification number

84-3717252

Organization type (check one):							
Filers of:		Section:					
Form 99	0 or 990-EZ	X 501(c)( 3 ) (enter number) organization					
		4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation					
		527 political organization					
Form 990-PF		501(c)(3) exempt private foundation					
		4947(a)(1) nonexempt charitable trust treated as a private foundation					
		501(c)(3) taxable private foundation					
Check if	your organization is cover	ered by the <b>General Rule</b> or a <b>Special Rule</b> .					
Note: O instruction		3), or (10) organization can check boxes for both the General Rule and a Special Rule. See					
General	Rule						
	For an organization filing	Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000					
or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a							
	contributor's total contrib	utions.					
Special	Rules						
x	For an organization desc	eribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the					
	regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or						
		rom any one contributor, during the year, total contributions of the greater of (1) \$5,000; or					
	(2) 2% or the amount on	i (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.					
	For an organization desc	ribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one					
	contributor, during the ye	ear, total contributions of more than \$1,000 exclusively for religious, charitable, scientific,					
	•	urposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering					
	"N/A" in column (b) inste	ad of the contributor name and address), II, and III.					
П	For an organization desc	eribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one					
	contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such						
	contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received						
	during the year for an ex	cclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the					
	General Rule applies to	this organization because it received nonexclusively religious, charitable, etc., contributions					
	totaling \$5,000 or more of	during the year					
Cautio	<b>n:</b> An organization that is	n't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it					
	=	ne 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line					
		ne filing requirements of Schedule B (Form 990).					

# SCHEDULE O (Form 990)

#### Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

OMB No. 1545-0047

Open to Public

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

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

Inspection

**Employer identification number** 

FRIENDS OF JOHN PENNEKAMP CORAL REEF STATE PARK 84-3717252 01. Form 990 governing body review (Part VI, line 11) THE CHAIRMAN OF THE BOARD AND THE TREASURER REVIEW THE TAX RETURN AND ADDRESS ANY CONCERNS OR QUESTIONS DIRECTLY WITH THE TAX PREPARER. NO FULL BOARD OF DIRECTORS REVIEW WAS OR WILL BE CONDUCTED. 02. Conflict of interest policy compliance (Part VI, line 12c) ANNUALLY EACH OF THE OFFICERS AND DIRECTORS ARE REQUIRED TO SIGN A CONFLICT OF INTEREST STATEMENT. 03. Governing documents, etc, available to public (Part VI, line 19) FOLLOWING THE FILING OF THE ANNUAL TAX RETURN, A PUBLIC AD NOTICE IS PLACED IN THE LOCAL NEWSPAPER INFORMING THE COMMUNITY THAT THE RETURN IS AVAILABLE FOR REVIEW. 04. Part III, response or note to any other line in Part III THE ORGANIZATION'S PRIMARY EXEMPT PURPOSE IS TO ACT AS A NON-PROFIT CORPORATION WHICH FUNCTIONS AS A CITIZEN SUPPORT ORGANIZATION (CSO), AS SUCH ORGANIZATION IS DEFINED AND REGULATED BY THE FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION OR OTHER AGENCY WHICH COMES TO SUBSTITUTE IT, IN ORDER TO GENERATE AND EMPLOY ADDITIONAL RESOURCES AND SUPPORT OF AND IN THE BEST INTERESTS OF JOHN PENNEKAMP CORAL REEF STATE PARK & DAGNY JOHNSON KEY LARGO HAMMOCK BOTANICAL STATE PARK THROUGH: 1 EVENTS, WORKSHOPS AND ACTIVITIES. 2 OUTREACH PROGRAMS, EDUCATIONAL ACTIVITIES AND COMMUNICATIONS, SPECIAL EXHIBITS AND INTERPRETIVE PROGRAMS. 3 FUNDRAISING ACTIVITIES TO SEEK ADDITIONAL FUNDS TO AUGMENT THE STATE PARK'S EXISTING FUNDING IN ORDER TO MAINTAIN, ENHANCE, AND EXPAND THE PARK'S SERVICES TO THE PUBLIC.