

*Original*

**FRIENDS OF PAYNES PRAIRIE, INC.**

**ANNUAL FINANCIAL STATEMENT**

**2010**

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# ATTACHMENTS

Form 990-EZ 2010

Schedule A, Form 990-EZ 2010

Statement 1 – Other Expenses Schedule

Statement 2 – Other Changes in Net Assets Schedule

Statement 3 – Liabilities Schedule

Statement 4 – Program Service Accomplishments

Statement 5 – Officers, Directors, Trustees and Key Employees  
Compensation

# STATEMENT OF ACCOMPLISHMENTS AND GOALS=2010

## 1. Park Manager's letter and President's letter

### A. PARK MANAGER'S LETTER

DIVISION OF RECREATION AND PARKS  
Paynes Prairie Preserve State Park  
100 Savannah Boulevard  
Micanopy, FL 32677

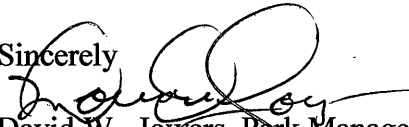
Bill Andrews, President  
Friends of Paynes Prairie, Inc.

Dear Bill,

Even with the struggling economy, the Friends of Paynes Prairie (FOPP) has increased membership and remains an integral part of Paynes Prairie Preserve State Park. In addition to the financial assistance provided by FOPP, the support of our public outreach with volunteers is a great contribution to the mission of the Florida Park Service

The park staff looks forward to a long and productive relationship with FOPP supporting our visitor services and resource management goals.

Sincerely



David W. Jowers, Park Manager III  
Paynes Prairie Preserve State Park

### B. PRESIDENT'S LETTER

March 25, 2011

2010 was a good year for both Paynes Prairie Preserve State Park and Friends of Paynes Prairie, Inc. As the following report of the accomplishments for 2010 demonstrates, most of the goals set for the year were met.

Individual memberships increased to over 500 by the end of the year, and corporate memberships stood at 6. Sales of books and merchandise at the Visitor Center increased by 18%, membership dues came in 35% over budget, and unrestricted donations came in 70% over budget. Participation in special events from ranger led programs to Star Gazing on the Prairie increased over the previous year. The number of volunteers actively participating in Friends activities has also increased.

This success is the result of the dedicated efforts of the park staff as well as the dedicated volunteers who staff the Visitor Center seven days a week, the information tables at the Farmer's Market, La Chua Trail and other public events, repair and maintain the Gainesville/Hawthorne Trail, clean up Sweetwater Branch and plant native plants to restore the Prairie to its natural condition. The overriding goal for 2011 is to continue this team effort to enhance the preservation of the Prairie and to provide visitors to the Park with a great experience.

Friends of Paynes Prairie, Inc  
Bill Andrews  
President

## 2. Current number of Members

Membership at the end of 2010 was 503 individuals and 6 corporations.

## 3. Contributed Volunteer Hours

Time contributed by volunteers to Friends activities are estimated to have been 11,575 hours in 2010. By standard Park Service valuations for volunteer hours, this represents a monetary value of approximately \$\$247,237 contributed to Park operations. .

## 4. Accomplishment Statement-2010

### Revenue Projects

- Membership dues
- Bookstore operations
- Firewood Sales
- Donations
- Ranger-led programs and special events
- Grant development and administration
- Endowment fund development

### Public Education Programs

- Staffed and funded the outreach and education booth on the La Chua Trail, including the purchase of materials and supplies for the booth
- Participated in alligator programs for schools and other groups
- Hosted a Stargazing evening
- Continued the gentle walk and talk program
- Staffed information booths at local community events, funded booth fees
- Supported Literacy Month program
- Hosted public meetings for Visitor Center exhibit design
- Funded the reprint of the Gainesville Hawthorne Trail self-guide brochure

Funded taxidermy of a new bobcat  
Funded refurbishment of the bittern otter and alligator

### **Park Development Programs**

Participated in the redesign project of the Visitor Center exhibits  
Participated in creek cleanup programs  
Supported the Old Florida Heritage Highway program  
Funded restroom rental at the La Chua Trail  
Funded parts and repairs to the EZ-GO and Gator vehicles  
Purchased feed for cattle and supplies for the horse herd  
Maintained membership in the Chamber of Commerce  
Purchased office supplies for the Visitor Center  
Funded volunteer recognition events and dinner  
Funded promotion of Paynes Prairie through Florida's Eden, the Environmental Film Festival, and others  
Funded the Gainesville Hawthorne Trail root raking, crack repair, equipment rental, inmate crew support, and other environmental projects  
Funded and installed lighting along the Visitor Center walkway

### **Citizen Support Organization Service Programs**

Attained membership of 500 individual members and 6 corporate members  
Completed an internal audit of the corporation accounts  
Completed annual report filings with the Florida Park Service  
Completed the 4-year Citizen Support Organization review with the Florida Park Service  
Recognized all corporate members with a photo presentation  
Improved membership benefits and membership cards

## **THE FRIENDS MISSION**

We support the mission, programs and goals of Paynes Prairie State Park through fund raising, outreach, education, and volunteerism. We carry out a range of support activities, from the payment of dues and contributions, to the presentation of major special events. We work with Preserve staff to promote Paynes Prairie by means of community activities, resource management, education, and visitor services.

5. Goals Statement for 2011 (Approved by the Board of Directors on January 12, 2011)

#### **Events:**

1. Support Star Gazing at Hickory Ranch, Paynes Prairie
2. Support Sawgrass festival

6. Support pavement remediation of the Gainesville-Hawthorne Trail
7. Grow the endowment fund to \$30K by EOY
8. Support expended benefits for Friends of Paynes Prairie memberships
9. Promote a membership development program to maintain memberships above 500
10. Hold a Board meeting near EOY to evaluate performance v. goals

# **FRIENDS OF PAYNES PRAIRIE, INC.**

## **FINANCIAL STATEMENT DISCLOSURE**

February 2011

### **1. Organization**

Friends of Paynes Prairie, Inc. (FOPP) is a not-for-profit Florida corporation, incorporated January 23, 1986, document number N13156. FOPP is exempt from federal income taxes pursuant to section 50(a) of the Internal Revenue Code as an organization described in section 503(c)(3). FOPP is not a private foundation within the meaning of section 509(a) of the Internal Revenue Code, because FOPP is an organization described in section 509(a)(2).

FOPP is funded primarily by contributions, grants, sales of firewood and merchandise, and membership dues, which funds are used exclusively for the direct benefit of Paynes Prairie Preserve State Park.

A copy of the official registration and financial information may be obtained from the Division of Consumer Services by calling toll free 800-435-7352 within the State of Florida. Registration does not imply endorsement, approval or recommendation by the State of Florida.

### **2. Summary of Significant Accounting Practices**

#### **A. Basis of Accounting**

Accounts are kept on a cash basis. Revenues are recognized when collected rather than when earned, and expenses are recognized when paid rather than when incurred.

#### **B. Basis of Presentation**

Unrestricted Net Assets: \$64,684. This category consists of most of the assets of FOPP.

Temporarily Restricted Assets: \$1,660. These are funds earmarked for a specific purpose such as a memorial to a deceased member, or a special project.

Permanently Restricted Net Assets: This is the Endowment Fund, which at the end of 2010 had a balance of \$25,876.55. These funds are restricted by a prohibition against the invasion of principle.

#### **C. Financial Policies**

1. Accounts-All funds received by FOPP shall be deposited in the financial institutions designated by the Board of Directors.

2. Authority to Sign-All checks shall be signed by a designated officer who has been authorized by the Board of Directors. The designated officers are the President, Treasurer and Secretary. Any check in excess of \$500 shall be signed by any two officers. The Board may from time to time authorize and empower one or more officers or agents of the Corporation to execute and deliver any and all other papers, contracts and documents or authorize said individuals to perform acts on behalf of the Corporation, including any required or necessary action in dealing with Government Authority.
3. Gifts-the Board of Directors may accept on behalf of the Corporation any contribution, gift, bequest, or devise for the general purpose or any special purpose of the Corporation.
4. Cash Procedures-
  - i. The President or his designee collects monies from FOPP programs and deposits these funds in the FOPP checking account.
  - ii. A paid independent contractor posts the books under the supervision of the Treasurer, who reviews the books monthly.
  - iii. A paid independent contractor reconciles the monthly bank accounts.
  - iv. Signatories to the checking, money market and savings accounts are the President, Treasurer and Secretary.
  - v. Financial records are audited annually by an Audit Committee consisting of the Park Manager, one Director, and an additional volunteer.

### 3. Investments

FOPP established an Endowment Fund in 2006 with the initial balance of \$6,958 invested in a brokerage account at Charles Schwab. On December 31, 2010 the Fund had a balance of \$25,876.55.

### 4. Fixed Assets

FOPP has no fixed assets which have not been depreciated to zero value for accounting purposes.

### 5. Cash Assets-December 31, 2010

Bank of America Checking Account	\$17,895.10
Bank of America Savings Account	46,788.91
Charles Schwab Endowment Fund	<u>25,876.55</u>
Total Cash Assets	\$90,560.56

6. Commitments and Contingencies

None

7. Related Party Transactions

None

8. Partnership in Parks

None

9. Value of Contributed Services

Park management reports contributing services with an estimated value of \$5,949.

10. Allocation of Joint Costs

FOPP had no joint costs in 2009

11. Amendment of the CSO Agreement

None

## Short Form Return of Organization Exempt From Income Tax

2010

Open to Public  
Inspection

Department of the Treasury  
Internal Revenue Service

**Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code  
(except black lung benefit trust or private foundation)**

▶ Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions). All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000 at the end of the year may use this form.

▶ *The organization may have to use a copy of this return to satisfy state reporting requirements.*

<b>A</b> For the 2010 calendar year, or tax year beginning <span style="float: right;">January 1, 2010, and ending December 31, 2010</span>	
<b>B</b> Check if applicable:	<b>C</b> Name of organization
<input type="checkbox"/> Address change	<b>Friends of Paynes Prairie, Inc.</b>
<input type="checkbox"/> Name change	Number and street (or P.O. box, if mail is not delivered to street address) Room/suite
<input type="checkbox"/> Initial return	<b>100 Savannah Blvd.</b>
<input type="checkbox"/> Terminated	City or town, state or country, and ZIP + 4
<input type="checkbox"/> Amended return	<b>Micanopy, FL 32667</b>
<input type="checkbox"/> Application pending	<b>D</b> Employer identification number
	<b>59-2968338</b>
	<b>E</b> Telephone number
	<b>352-372-3004</b>
	<b>F</b> Group Exemption Number ▶
<b>G</b> Accounting Method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual Other (specify) ▶	<b>H</b> Check <input checked="" type="checkbox"/> if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).
<b>I</b> Website: ▶	
<b>J</b> Tax-exempt status (check only one) – <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	
<b>K</b> Check <input type="checkbox"/> if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$50,000. A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcard) may be required (see instructions). But if the organization chooses to file a return, be sure to file a complete return.	

**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, line 25, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ ▶ \$ **52,957**

**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

	Description		Amount
<b>Revenue</b>	<b>1</b> Contributions, gifts, grants, and similar amounts received	<b>1</b>	8513
	<b>2</b> Program service revenue including government fees and contracts	<b>2</b>	0
	<b>3</b> Membership dues and assessments	<b>3</b>	15694
	<b>4</b> Investment income	<b>4</b>	1104
	<b>5a</b> Gross amount from sale of assets other than inventory	<b>5a</b>	
	<b>b</b> Less: cost or other basis and sales expenses	<b>5b</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>6</b> Gaming and fundraising events		
	<b>a</b> Gross income from gaming (attach Schedule G if greater than \$15,000)	<b>6a</b>	
	<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>	2695
<b>c</b> Less: direct expenses from gaming and fundraising events	<b>6c</b>	2027	
<b>d</b> Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	<b>6d</b>	669	
<b>7a</b> Gross sales of inventory, less returns and allowances	<b>7a</b>	24950	
<b>b</b> Less: cost of goods sold	<b>7b</b>	25612	
<b>c</b> Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	<b>7c</b>	9338	
<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>	35318	
<b>Expenses</b>	<b>10</b> Grants and similar amounts paid (list in Schedule O)	<b>10</b>	0
	<b>11</b> Benefits paid to or for members	<b>11</b>	0
	<b>12</b> Salaries, other compensation, and employee benefits	<b>12</b>	0
	<b>13</b> Professional fees and other payments to independent contractors	<b>13</b>	948
	<b>14</b> Occupancy, rent, utilities, and maintenance	<b>14</b>	145
	<b>15</b> Printing, publications, postage, and shipping	<b>15</b>	3021
	<b>16</b> Other expenses (describe in Schedule O)	<b>16</b>	18646
	<b>17</b> <b>Total expenses.</b> Add lines 10 through 16	<b>17</b>	22760
<b>Net Assets</b>	<b>18</b> Excess or (deficit) for the year (Subtract line 17 from line 9)	<b>18</b>	12558
	<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>	75816
	<b>20</b> Other changes in net assets or fund balances (explain in Schedule O)	<b>20</b>	1717
	<b>21</b> Net assets or fund balances at end of year. Combine lines 18 through 20	<b>21</b>	90091



Part V Other Information (Note the 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
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O . . . . .		✓
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) . . . . .		✓
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, explain in Schedule O why the organization did not report the income on Form 990-T.		
a	Did the organization have unrelated business gross income of \$1,000 or more or was it a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements?		✓
b	If "Yes," has it filed a tax return on Form 990-T for this year (see instructions)? . . . . .		✓
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 . . . . .		✓
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ <b>37a</b> _____		
b	Did the organization file Form 1120-POL for this year? . . . . .		✓
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? . . . . .		✓
b	If "Yes," complete Schedule L, Part II and enter the total amount involved . . . . . <b>38b</b> _____		
39	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on line 9 . . . . . <b>39a</b> _____		
b	Gross receipts, included on line 9, for public use of club facilities . . . . . <b>39b</b> _____		
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ _____ ; section 4912 ▶ _____ ; section 4955 ▶ _____		
b	Section 501(c)(3) and 501(c)(4) 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 . . . . .		✓
c	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 . . . . . ▶ _____		
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization . . . . . ▶ _____		
e	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. . . . .		✓
41	List the states with which a copy of this return is filed. ▶ <u>Florida</u>		
42a	The organization's books are in care of ▶ <u>Lesla Holder</u> Telephone no. ▶ <u>352-373-1078</u> Located at ▶ <u>7204 S E CR 234, Gainesville, FL 32641-1608</u> ZIP + 4 ▶ <u>32640-1608</u>		
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 Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
c	At any time during the calendar year, did the organization maintain an office outside of the U.S.? . . . . .		✓
	If "Yes," enter the name of the foreign country: ▶ _____		
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here . . . . . ▶ <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year . . . . . ▶ <b>43</b> _____		
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ . . . . .		✓
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 . . . . .		✓
c	Did the organization receive any payments for indoor tanning services during the year? . . . . .		✓
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 . . . . .		

		Yes	No
<b>45</b>	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)?		✓
<b>a</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>46</b>	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		✓

**Part VI Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only.** All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts 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

		Yes	No
<b>47</b>	Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II		✓
<b>48</b>	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		✓
<b>49a</b>	Did the organization make any transfers to an exempt non-charitable related organization?		✓
<b>b</b>	If "Yes," was the related organization a section 527 organization?		
<b>50</b>	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."		

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
None				

**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."

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
None		

**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 and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A  Yes  No

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**  
 Signature of officer: *Bill Andrews*  
 Date: *March 29, 2011*  
 Type or print name and title: **Bill Andrews, President**

<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> 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

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

**Public Charity Status and Public Support**

OMB No. 1545-0047

**2010**

**Open to Public Inspection**

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

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

Department of the Treasury  
Internal Revenue Service

Name of the organization

Friends of Paynes Prairie, Inc.

Employer identification number

59-2968338

**Part I Reason for Public Charity Status** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1  A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2  A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3  A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4  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  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.)
- 9  An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross 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.)
- 10  An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11  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 that describes the type of supporting organization and complete lines 11e through 11h.
  - a  Type I      b  Type II      c  Type III—Functionally integrated      d  Type III—Other
- e  By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
  - (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? 

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		
  - (ii) A family member of a person described in (i) above? 

	Yes	No
11g(ii)		
11g(iii)		
  - (iii) A 35% controlled entity of a person described in (i) or (ii) above? 

	Yes	No
11g(iii)		
- h Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
<b>Total</b>									

**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.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . . . .						
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . .						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge . . . . .						
<b>4 Total.</b> Add lines 1 through 3 . . . . .						
<b>5</b> 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) . . . . .						
<b>6 Public support.</b> Subtract line 5 from line 4.						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
<b>7</b> Amounts from line 4 . . . . .						
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . . . .						
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on . . . . .						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) . . . . .						
<b>11 Total support.</b> Add lines 7 through 10						
<b>12</b> Gross receipts from related activities, etc. (see instructions) . . . . .					<b>12</b>	
<b>13 First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> . . . . .						<input type="checkbox"/>

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f)) . . . . .	<b>14</b>	%
<b>15</b> Public support percentage from 2009 Schedule A, Part II, line 14 . . . . .	<b>15</b>	%
<b>16a 33 1/3% support test—2010.</b> 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 qualifies as a publicly supported organization . . . . .		<input type="checkbox"/>
<b>b 33 1/3% support test—2009.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization . . . . .		<input type="checkbox"/>
<b>17a 10%-facts-and-circumstances test—2010.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . .		<input type="checkbox"/>
<b>b 10%-facts-and-circumstances test—2009.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . .		<input type="checkbox"/>
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions . . . . .		<input type="checkbox"/>

**Part III Support Schedule for Organizations Described in Section 509(a)(2)**

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	32233	25296	33073	20568	23117	134287
<b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose . . . .	25256	25382	24644	29325	24735	135932
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513	0	0	0	0	0	0
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . .	0	0	0	0	0	0
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge . . . .	4376	5383	6201	11129	5950	33039
<b>6 Total.</b> Add lines 1 through 5 . . . .	61865	56061	63918	61022	53802	296668
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons . . . .	0	0	0	0	0	0
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year . . . .	0	0	0	0	0	0
<b>c</b> Add lines 7a and 7b . . . .	0	0	0	0	0	0
<b>8 Public support</b> (Subtract line 7c from line 6.) . . . .						296668

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
<b>9</b> Amounts from line 6 . . . .	61865	56061	63918	61022	53802	296668
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . . .	330	1686	1075	437	1026	4554
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 . . . .	0	0	0	0	0	0
<b>c</b> Add lines 10a and 10b . . . .	330	1686	1075	437	1026	4554
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on . . . .	0	0	0	0	0	0
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) . . . .	0	0	0	0	0	0
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.) . . . .	62195	57747	64993	61459	54828	301222
<b>14 First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> . . . . ▶ <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2010 (line 8, column (f) divided by line 13, column (f)) . . . .	<b>15</b>	98.12 %
<b>16</b> Public support percentage from 2009 Schedule A, Part III, line 15 . . . .	<b>16</b>	98.70 %

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2010 (line 10c, column (f) divided by line 13, column (f)) . . . .	<b>17</b>	1.88 %
<b>18</b> Investment income percentage from 2009 Schedule A, Part III, line 17 . . . .	<b>18</b>	1.30 %
<b>19a 33 1/3% support tests—2010.</b> If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization . . . . ▶ <input checked="" type="checkbox"/>		
<b>b 33 1/3% support tests—2009.</b> If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization . . . . ▶ <input type="checkbox"/>		
<b>20 Private foundation.</b> If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions . . . . ▶ <input type="checkbox"/>		



**FRIENDS OF PAYNES PRAIRIE, INC.**

**FORM 990 EZ**

59-2968338

**Schedule of Attachments**

Statement 1: Other Expenses Schedule

Statement 2: Other Changes in Net Assets Schedule

Statement 3: Liabilities Schedule

Statement 4: Program Service Accomplishments

Statement 5: Officers, Directors, Trustees and Key Employees Compensation

Statement 1  
Form 990 EZ  
Page 1  
Line Number : Part 1 Line 16

FRIENDS OF PAYNE S PRAIRIE, INC.  
59-2968338

Other Expenses Schedule

Description	Amount
Equipment and supplies for Park	\$6,264
Management and General	\$1,922
Sales Tax	\$2,166
Office Expenses	\$3,144
Maintenance of Paved Trail	\$3,421
Special Events	\$1,729
<b>Total</b>	<b>\$18,646</b>

Statement 2  
Form 990 EZ  
Page 1  
Line Number : Part 1 Line 20

FRIENDS OF PAYNE S PRAIRIE, INC.  
59-2968338

Other Changes in Net Assets Schedule

Description	Amount
Unrealized Gain on Mutual Funds	\$1,717
<b>Total</b>	<b>\$1,717</b>

Statement 3  
Form 990 EZ  
Page 1  
Line Number : Part II Line 26

FRIENDS OF PAYNE S PRAIRIE, INC.  
59-2968338

Liabilities Schedule

Description	BOY Amount	EOY Amount
Florida Sales Tax	\$156	\$146
<b>Total</b>	<b>\$156</b>	<b>\$146</b>

Statement 4

Form 990 EZ

Page 1

Line Number : Part III Line 28

FRIENDS OF PAYNE S PRAIRIE, INC.

59-2968338

Program Service Accomplishments

Achievement	1 Grants and Allocations	Includes Foreign Grants	Program Service Expenses
Natural Resources Conservation & Protection, General	\$0	\$0	\$4,954
Park Development-Purchase and rental of equipment, materials and supplies needed by park staff to repair, maintain and improve park facilities. Provided funds for restoring native plant communities			
Media & communications programs-Public Education- Participation in local events, staff booths at local farmer's markets, Sponsor special events on the Prairie, purchased materials for interpretative displays, staffed the information trailer on the LaChua Trail	\$0	\$0	\$4,699
Art, Cultural & Humanities Programs, General/Other: Visitor Services-Purchase and maintain inventory for the bookstore, Purchase firewood inventory for overnight campers, host parki events, Supply volunteers to staff the Visitor Center bookstore and lead tours of the park	\$0	\$0	\$8993
<b>Total</b>	<b>\$0</b>	<b>\$0</b>	<b>\$18,646</b>