

Riviera Beach- "Best Waterfront City In Which To Live, Work and Play"



Waste Management Community Benefits Request for Donations

The City of Riviera Beach, in conjunction with Waste Management Inc. of Florida, has established a Community Benefits Policy. Under the Policy each elected official shall be entitled to designate funds to support approved public projects for public purposes. Public purposes include, but are not limited to, charitable events, not-for-profit organizational events or programs and City functions or projects (which may include contributions to the City's Scholarship Fund or the City's Housing Trust Fund). All requests for donations must be presented to the City Council and approved by a majority of the City Council. The City will attempt to process all requests within fourteen (14) days of City Council approval.

Ineligible uses include the purchase of tables at events, campaign contributions, or payment for salaries or operational expenses. Funds cannot be used to cover an elected official's travel, meals, or for his or her personal benefit or gain or for the personal gain of relatives as defined by City Code, the Palm Beach County Code of Ethics or State Statutes, as applicable. Funds cannot be given to an entity/agency/organization for which the elected official is a director or officer.

Name of Elected Official Sponsoring Donation: MAYOR RONNIE FELDER

Legal Name of Organization: G.C.I TRAINING AND EMPOWERMENT CENTER INC.

Program/ Activity Name:

The Riviera Beach Village Economic Empowerment Project

Requested Amount: \$ 2,000.00

Briefly describe the Program/Activity below and attach (1) letter of request or a more detailed description of the Program/Activity; (2) non-profit paperwork and (3) w-9 IRS form:

This project will be designed to work existing or upcoming businesses for the Citizens in Riviera Beach. Since the pandemic it has proven in many scenarios that while federal dollars are plentiful grassroots nonprofits organizations and minority owned businesses are not able to access those dollars due to lack of administrative operations. This project is design to create a step by step process of the what needs to be done and guide participants through those processes.

Mailing Address: 2620 NORTH AUSTRALIAN AVE. SUITE#100 E

City: WEST PALM BEACH State: FLORIDA Zip: 33407

Contact Person(s): Shandra Stringer Program Facilitator

Phone: (561) 385-4657 Fax: ()

Email Address: info@gcicinc.com

Name of Authorized Official: Shandra Stringer

Signature of Authorized Official: Shandra Stringer Date: _____

****Return the form to the Elected Official or the Legislative Office for processing.

Waste Management Community Benefits Request for Donations Approval by Elected Official

I, MAYOR RONNIE FELDER, hereby certify that the donation to
G.C.I TRAINING AND EMPOWERMENT CENTER INC. complies with the City's
Community Benefits Policy. I further certify that: (1) I am not an officer, director, partner,
proprietor, employee, subcontractor or agent of the organization, its parent organization
or subsidiary and I do not have any contractual relationship with or other obligation to
the organization, its parent organization or subsidiary; (2) I have no relatives or business
associates (as those terms are defined in section 112.312, Florida Statutes) who are
officers, directors, partners, proprietors, employees, subcontractors or agents of the
organization, its parent organization or subsidiary; (3) The disbursement of the foregoing
amount will not inure to my special gain or loss or to the special gain or loss of my relatives
or my business associates; and (4) I am not aware of any conflict of interest the
disbursement of the foregoing amount to the organization will create for the City of Riviera
Beach or myself.

Signature of Elected Official:

Ronnie J. Felder Date: 6/22/2020

Amount Approved by Elected Official: \$ 2,000.00

City Council Action

Approved

Disapproved

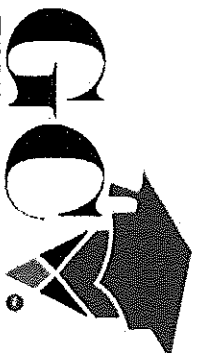
Chairperson's Signature: _____

Date: _____

Riviera Beach- "Best Waterfront City In Which To Live, Work and Play"

Revised March 2017

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GCI Training & Empowerment Center, Inc.
2620 North Australian Avenue Suite 100-E
West Palm Beach, FL ♦ 33407
Office: 561.557.2902 Fax: 855.743.6422
Email: info@gcitectinc.com

June 7, 2020

City of Riviera Beach
Attention: Mayor Ronnie Felder
600 West Blue Heron Boulevard
Riviera Beach, Florida 33407

Minority-owned small businesses stand to be hit the hardest by the pandemic's economic fallout. Early reports suggest that upwards of 90 percent of minority and women-owned businesses are not getting the relief loans promised from the government. Reference: <https://www.entrepreneur.com/article/349583>

We cannot predict what the future holds; however, we do not we have to change the narrative of our current story for our grassroots nonprofit organizations and minority-owned businesses.

In 2019, the SBA found that 49 percent of loans from banks go to white-owned businesses, 23 percent go to Asian-owned businesses, 17 percent undetermined, 7 percent to Hispanic-owned business, 3 percent to black-owned businesses and 1 percent to American Indian-owned businesses

The Riviera Beach Village Economic Empowerment Project is design to engage, ignite, and equip grassroots nonprofit organizations and minority-owned businesses with the tools to create internal systems to assist with business sustainability. While we process through this pandemic, we must equip as many businesses with the right information for them thrive. Such information will consist of the following:

- Business Start-up Start to Finish (For-profit and non-profit)
- Local and State Registration Requirements
- Proper Record Keeping
- Bookkeeping
- Marketing
- Personal and Business Credit
- Collaborative Resources

Thank you for your time. We look forward to hearing from you.

Kindest regards,

Shandra Stringer
Executive Director

INTERNAL REVENUE SERVICE
P. O. BOX 2508
CINCINNATI, OH 45201

DEPARTMENT OF THE TREASURY

Date: JUL 01 2015

GCI TRAINING EMPOWERMENT CENTER INC
2620 N AUSTRALIAN AVENUE STE 100E
WEST PALM BEACH, FL 33407-0000

Employer Identification Number:
47-4348463
DIN:
26053576001545

Contact Person:
CUSTOMER SERVICE ID# 31954

Contact Telephone Number:
(877) 829-5500

Accounting Period Ending:
December 31

Public Charity Status:
170 (b) (1) (A) (vi)

Form 990/990-EZ/990-N Required:
Yes

Effective Date of Exemption:
June 15, 2015

Contribution Deductibility:
Yes

Addendum Applies:
No

Dear Applicant:

We're pleased to tell you we determined you're exempt from federal income tax under Internal Revenue Code (IRC) Section 501(c)(3). Donors can deduct contributions they make to you under IRC Section 170. You're also qualified to receive tax deductible bequests, devises, transfers or gifts under Section 2055, 2106, or 2522. This letter could help resolve questions on your exempt status. Please keep it for your records.

Organizations exempt under IRC Section 501(c)(3) are further classified as either public charities or private foundations. We determined you're a public charity under the IRC Section listed at the top of this letter.

If we indicated at the top of this letter that you're required to file Form 990/990-EZ/990-N, our records show you're required to file an annual information return (Form 990 or Form 990-EZ) or electronic notice (Form 990-N, the e-Postcard). If you don't file a required return or notice for three consecutive years, your exempt status will be automatically revoked.

If we indicated at the top of this letter that an addendum applies, the enclosed addendum is an integral part of this letter.

For important information about your responsibilities as a tax-exempt organization, go to www.irs.gov/charities. Enter "4221-PC" in the search bar to view Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, which describes your recordkeeping, reporting, and disclosure requirements.

GCI TRAINING EMPOWERMENT CENTER INC

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Sincerely,

A handwritten signature in black ink, reading "Thomas Ripkowski". The signature is written in a cursive style with a large, prominent initial "T".

Director, Exempt Organizations

Request for Taxpayer Identification Number and Certification

Give Form to the
requester. Do not
send to the IRS.

▶ Go to www.irs.gov/Form99 for instructions and the latest information.

<p>1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.</p> <p>GCI TRAINING & EMPOWERMENT CENTER, INC.</p> <p>2 Business name/disregarded entity name, if different from above</p>	<p>3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.</p> <p><input type="checkbox"/> Individual/sole proprietor or single-member LLC</p> <p><input checked="" type="checkbox"/> C Corporation</p> <p><input type="checkbox"/> S Corporation</p> <p><input type="checkbox"/> Partnership</p> <p><input type="checkbox"/> Trust/estate</p> <p><input type="checkbox"/> Limited liability company. Enter the tax classification (C=S corporation, S=S corporation, P=Partnership) ▶ _____</p> <p><small>Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.</small></p> <p><input type="checkbox"/> Other (see instructions) ▶ _____</p> <p>5 Address (number, street, and apt. or suite no.) See instructions.</p> <p>2620 NORTH AUSTRALIAN AVENUE SUITE 100E</p> <p>6 City, state, and ZIP code</p> <p>WEST PALM BEACH, FLORIDA 33407</p> <p>7 List account number(s) here (optional)</p> <p>501 C 3</p>
<p>4 Exemptions (codes apply only to certain entities; not individuals; see instructions on page 3).</p> <p>Exempt payee code (if any) _____</p> <p>Exemption from FATCA reporting code (if any) _____</p>	<p>Requester's name and address (optional)</p> <p>(Applies to accounts maintained outside the U.S.)</p>

Print or type.
See Specific Instructions on page 3.

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN), if you do not have a number, see *How to get a TIN*, later.

Social security number	-	-	-	-	-	-	-	-	-	
Employer identification number	4	7	-	4	3	4	8	4	6	3

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
 2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
 3. I am a U.S. citizen or other U.S. person (defined below); and
 4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.
- Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here Signature of U.S. person ▶ *Shonda Hurley*

Date ▶ *5/2/2020*

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/Form99.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
 - Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
 - Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
 - Form 1099-S (proceeds from real estate transactions)
 - Form 1099-K (merchant card and third party network transactions)
 - Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
 - Form 1099-C (canceled debt)
 - Form 1099-A (acquisition or abandonment of secured property)
- Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.
- If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.*



Consumer's Certificate of Exemption

DR-14
R. 04/11

Issued Pursuant to Chapter 212, Florida Statutes

Certificate Number	Effective Date	Expiration Date
85-8016780464C-3	07/07/2015	07/31/2020

This certifies that

GCI TRAINING EMPOWERMENT CENTER INC
2620 N AUSTRALIAN AVE STE 100E
WEST PALM BEACH FL 39407-5624



is exempt from the payment of Florida sales and use tax on real property rented, transient rental property rented, tangible personal property purchased or rented, or services purchased.

Important Information for Exempt Organizations

DR-14
R. 04/11



1. You must provide all vendors and suppliers with an exemption certificate before making tax-exempt purchases. See Rule 12A-1.038, Florida Administrative Code (F.A.C.).
2. Your *Consumer's Certificate of Exemption* is to be used solely by your organization for your organization's customary nonprofit activities.
3. Purchases made by an individual on behalf of the organization are taxable, even if the individual will be reimbursed by the organization.
4. This exemption applies only to purchases your organization makes. The sale or lease to others of tangible personal property, sleeping accommodations, or other real property is taxable. Your organization must register, and collect and remit sales and use tax on such taxable transactions. Note: Churches are exempt from this requirement except when they are the lessor of real property (Rule 12A-1.070, F.A.C.).
5. It is a criminal offense to fraudulently present this certificate to evade the payment of sales tax. Under no circumstances should this certificate be used for the personal benefit of any individual. Violators will be liable for payment of the sales tax plus a penalty of 200% of the tax, and may be subject to conviction of a third-degree felony. Any violation will require the revocation of this certificate.
6. If you have questions regarding your exemption certificate, please contact the Exemption Unit of Account Management at 800-352-3671. From the available options, select "Registration of Taxes," then "Registration Information," and finally "Exemption Certificates and Nonprofit Entities." The mailing address is PO Box 6480, Tallahassee, FL 32314-6480.