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: Councilman Trodrick Mccay

Legal Name of Organization: She Speaks International Inc

Program/ Activity Name: 2020 Project Thanksgiving

Requested Amount: $ 500.00

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:

See Attach TO PROVIDE THANKSGIVING MEAL TO ~20-25 families In need

Mailing Address: 1262 Rosegate Boulevard

City: Riviera Beach State: FL Zip: 33404

Contact Person(s): Quinette Lawery

Phone: (561) 779-2222 Fax: ( ) N/A

Email Address: QLSpeaks00@gmail.com

Name of Authorized Official: Quinette Lawery

Signature of Authorized Official: [signature] Date: 10-1-2020

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

RECEIVED
OCT 02 2020
BY: Lyn

Waste Management Community Benefits Request for Donations Approval by Elected Official

I, Councilman Trodrick McCoy hereby certify that the donation to SheSpeaks International 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: Trodrick McCoy Date: 10/21/20

Amount Approved by Elected Official: $ 500.00

City Council Action

☐ Approved ☐ Disapproved

Chairperson's Signature: _____ Date: _____

She Speaks International, Inc.

Dear Partner and Friend:

Greetings....

She Speaks International, Inc., is located at 1262 Rosegate Boulevard, Riviera Beach, FL. We are a not-for-profit, 501©(3), whose purpose is to provide programs and much needed outreach services through numerous venues: workshops, seminars, conferences, concerts, retreats, as well as both individual and group intervention strategies. We are requesting assistance to continue with our various year round programs.

Our outreach services are as follows:

- We provide weekly food and clothing distribution to many needy families and the homeless population.
- We provide food and clothing to inmates, after release from jail or correctional institution.
- We provide weekly tutorial and basic educational skills, vocational training and computer skills to children and adults.
- We provide school supplies throughout the school year.
- We provide college students with an "We Care Basket" of non-perishable food, canned goods, school supplies, quilts, bed linens, pillows, stuffed animals and other miscellaneous items.
- We provide summer camp, cultural and recreational activities.
- We provide Thanksgiving and Christmas Celebration.
- We provide culturally sensitive intervention and prevention strategies for marital unions, divorce, domestic violence, alcohol/drug abuse and teen pregnancy.
- Assist the Palm Beach County School System with their dropout prevention program.

We are committed through this organization to assist in helping communities to get back on track, beginning with teaching the importance of strong family values. Thank you for your support. We appreciate you **partnering** and **sharing** with us as we continue to reach our communities, cities, states and across the nations.

For more information, please feel free to contact us at (561) 779-2222.

PARTNERING TOGETHER,

QUINETTE PHILMORE LAWERY

Executive Director

(Please detach and return to She Speaks International, Inc., 1262 Rosegate Boulevard, Riviera Beach, FL 33404

NAME_____

ADDRESS_____CITY_____STATE_____

TELEPHONE NO._____

Yes, I would like to support this organization and the various programs with a monthly offering or a gift offering of:

_____**$100** _____**$200** _____**$300** _____**$400** _____**$500 or $**_____

(All offerings/gifts are tax-deductible as allowed by IRS regulations.)

1262 Rosegate Boulevard, Riviera Beach, FL 33404

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

DEPARTMENT OF THE TREASURY

Date: JUN 09 2020

SHE SPEAKS INTERNATIONAL INC
C/O QUINETTE LAWERY
1262 ROSEGATE BOULEVARD
RIVIERA BEACH, FL 33404-0000

Employer Identification Number:
84-4923362
DLN:
26053550001670
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:
January 24, 2020
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.

Form **W-9**
(Rev. October 2018)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

▶ **Go to *www.irs.gov/FormW9* for instructions and the latest information.**

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

Print or type. See **Specific Instructions** on page 3.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.

2 Business name/disregarded entity name, if different from above
She Speaks International, Inc.

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.

☐ Individual/sole proprietor or single-member LLC ☒ C Corporation ☐ S Corporation ☐ Partnership ☐ Trust/estate

☐ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____

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.

☐ Other (see instructions) ▶

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):

Exempt payee code (if any) _____

Exemption from FATCA reporting code (if any) _____

(Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.) See instructions.
1262 Rosegate Boulevard

Requester's name and address (optional)

6 City, state, and ZIP code
Riviera Beach, FL 33404

7 List account number(s) here (optional)

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.

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.

Social security number
[ ][ ][ ] - [ ][ ] - [ ][ ][ ][ ]

or

Employer identification number
8 4 - 4 9 2 3 3 6 2

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** ▶ [signature] | **Date** ▶ 10-1-2020

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/FormW9*.

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.*