

### **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, chantable 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 fourtoen (14) days of City Council approval.

Inaligible 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: Council Mari Mr Douglas A. Lawson
Legal Name of Organization: Alpha Educational Foundation - DDL, Inc.
Programs Activity Name: Nen of Tomorrow Menturing Program
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:
Maning Address 261 W 11 Street
City Regiona Presentistate TL Zip: 3840A
Contact Parsontes Reckley Philey
Phono: (FEL) (SE) - GILD (Tax: ( )
Emmi Address blacky 3 & hollowally not
Name of Authorized Official: Be, Kley Finley
Signature of Authorized Official: Bakk Dad Date: 06/09/3031
****Return the form to the Elected Official or the Legislative Office for

processing.

# Waste Management Community Benefits Request for Donations Approval by Elected Official

1, Councilman M. Douglas A. Lawso	hereby certify that the donation to					
Men of Tomorrow Mentoning Program con	mplies with the City's Community Benefits					
Policy. I further certify that: (1) I am no						
employee, subcontractor or agent of the	organization, its parent organization or					
subsidiary and I do not have any contractua	I relationship with or other obligation to					
the organization, its parent organization or sub	sidiary; (2) I have no relatives or business					
associates (as those terms are defined in se	ection 112.312, Florida Statutes) who are					
officers, directors, partners, proprietors, emp	loyees, subcontractors or agents of the					
organization, its parent organization or sub	osidiary; (3) The disbursement of the					
foregoing amount will not inure to my special g						
my relatives or my business associates; and						
interest the disbursement of the foregoing am-	ount to the organization will create for the					
City of Riviera Beach or myself.						
Signature of Elected Official:	Date: 4 9 3					
1/1 6						
Amount Approved by Elected Official: \$						
City Council Action						
Approved	Пъродълда					
Apploved	☐ Disapproved					
Chairperson's Signature:	Date:					

# History of the Men of Tomorrow Youth Organization Sponsored by Alpha Educational Foundation-DDL, Inc 501c (3) Delta Delta Lambda Chapter, Riviera Beach, FL

The Brothers of Delta Delta Lambda Chapter organized the youth group "Men of Tomorrow" in 1988. The organization focuses its attention on young men and their importance to our society. The fraternity solicits the assistance of high school counselors, teachers, community leaders, and the Brotherhood to find young men meeting the qualifications set up by the Brotherhood.

With the group of men identified, the fraternity embark upon a mission to positively affect the entire community — a mission that includes: Service, scholarship, education, and other important areas of growth among our youth and a desire to improve the community and our nation. From its first meeting, the "Mission" of Men of Tomorrow program was established as a guide to follow each year.

#### Mission<sub></sub>

"We believe in the creation of inspired lives; produced by the miracles of hard work. We are not frightened by the challenges of reality but believe we can change our conception of this world and our place within it. So we work, plan, build and dream in that order. We believe that one must earn the right to dream. Our talent, discipline, and integrity will be our contribution to a new world. Because we believe that we can take this place, this time, these people and make a better place, a better time, and better people. With God, we either find a way or make one."

Each young man accepted into the organization must meet the qualifications established by the Brotherhood:

- 1. Grade 9-11
- 2. GPA (grade point average) 2.3 or higher
- 3. Recommendation from counselor, teacher, minister, or chapter brother
- 4. Must be of good character
- 5. Must have the parental support of the organization

During the course of the year, MOT members must participate in monthly church visitations, educational tutorial program, Project Alpha Youth Symposium, College Prep Workshops, community projects and social activities (bowling, paintball, professional basketball, and football games) with the brotherhood. MOT activities are designed to develop the whole person.

The Men of Tomorrow are "presented" to the community in a formal, annual "Mr. Debonair Pageant" complete with the regal fanfare worthy of Men of Tomorrow. During the students' spring break vacation, they have the opportunity attend the college fair where they visit various college campuses, speak with admissions officers, attend classes, and get the overall feel of college life.

As a continuous project, Delta Delta Lambda endeavors to impress upon the minds of these young men the importance of educational pursuits in order to improve the quality of their lives and the communities in which they reside.

# Form W-9 (Rev. October 2018) Department of the Treasury

## Request for Taxpayer Identification Number and Certification

► Go to www.irs.gov/FormW9 for instructions and the intest information.

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

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	Name (as shown on your income tax return). Name is required on this line; do     Alpha Educational Foundation - DDL, Inc.	nat lagve this line blank.					•	*****						
	2 Business name/disregarded entity name, if different from above	A years gar can and reference about a sure a susceptibility of the second												
Print or type. Specific Instructions on page 3.	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.					C6/	4 Exemptions (codes apply only to certain entitles, not individuals; see instructions on page 3);							
	Individual/sole proprietor or C Corporation S Corporation Portnership Trust/estate single-member LLC						Exempt payee code (if any)							
r typ	☐ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ►													
Print or type.	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.						Exemption from FATCA reporting code (if any)							
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See S							nd address (optional)							
స	712 US Highway 1 6 City, state, and ZIP code													
	North Palm Beach, FL 33408													
	7 List account number(s) here (optional)													
Pai														
Enter	your TIN in the appropriate box. The TIN provided must match the nam	e given on line 1 to av	oid	So	cial so	Gurity	าเเก	ber						
reside	p withholding. For individuals, this is generally your social security rium and alien, sole proprietor, or disregarded entity, see the instructions for F	iber (SSN). However, f Part I. later, For other	or a			7.	_		] _ '	Γ_				
entitie	is, it is your employer identification number (EIN). If you do not have a r	umber, see How to ge	ita	<u> </u>			_	1		<u> </u>				
TIN, later.  Note: If the account is in more than one name, see the instructions for line 1. Also see What Name and Employer						er identification number								
	er To Give the Requester for guidelines on whose number to enter.	Also see vrnat ivame .	anci (	E.11	Pioye	1 10411	T	1011		<u></u>	7			
				6	5	- 0	7	5	1	8	7	1		
Par	t II Certification				1		. 1	<del></del>	·	1	Li	<u>i</u>	_	
Unde	penalties of perjury, I certify that:				***************************************	·								
2. Lar Sei	number shown on this form is my correct taxpayer Identification numb in not subject to backup withholding because; (a) I am exempt from bac vice (IRS) that I am subject to backup withholding as a result of a failure longer subject to backup withholding; and	kup withholding, or (b)	Have r	iot b	nsec	notifie	d by	the	nter	mai ed m	Reve ne th	enue at la	<b>3</b> m	
3. Lar	n a U.S. citizen or other U.S. person (defined below); and													
	FATCA code(s) entered on this form (if any) indicating that I am exemp	,	.,											
you ha acquis other	cation instructions. You must cross out item 2 above if you have been no ave failed to report all interest and dividends on your tax return. For real est sition or abandonment of secured property, cancellation of debt, contribution than interest and dividends, you are not required to sign the certification, but	ale transactions, item 2 ans të an individual retir	l does no oment ar	t ap tang	iply. P gemai	or mo at (IRA	rtgag J, and	e int Lger	eresi ieral	t pai ly, p	d, aymi	ants	ise	
Sign Here	, organization of		Date►	10	2/6	26/	/2c	170						
Ge	neral Instructions	• Form 1099-DIV (di- funds)	vidands,	inc	luzieng	j thos	e fro	m st	ocks	s <b>o</b> r :	mult	list		
Section Section 5	on references are to the Internal Revenue Code unless otherwise	Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)												
relate	e developments. For the latest information about developments d to Form W-9 and its instructions, such as legislation enacted	<ul> <li>Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)</li> </ul>												
	hey were published, go to www.irs.gov/FormW9:	<ul> <li>Form 1099-S (proceeds from real estate transactions)</li> </ul>												
Pur	pose of Form	Form 1099-K (merchant card and third party network transactions)												
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		Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (luition)												
		• Form 1099-C (canceled debt)												
taxpa	yer identification number (ATIN), or employer identification number	Form 1099-A (adquisition or abandonment of secured property)												
amou	to report on an information return the amount paid to you, or other not reportable on an information return. Examples of information is included by the part institute to the following to the following.	Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.												
	is include, but are not limited to, the following. in 1099-INT (interest earned or paid)	If you do not return Form W-9 to the requester with a FIN, you might be subject to backup withholding. See What is backup withholding, later.												

#### 2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000006685

Entity Name: ALPHA EDUCATIONAL FOUNDATION-DDL. INC.

Current Principal Place of Business:

251 W 11TH STREET HIVIERA BEACH, FL. 33404

**Current Mailing Address:** 

P O BOX 866

WEST PALM BEACH, FL 33402 US

FEI Number: 65-0751871

Certificate of Status Desired: No

FILED Apr 29, 2019

Secretary of State

0050878090CC

Date

Name and Address of Current Registered Agent:

DAVIS JAMES L 6651 HATTERAS DRIVE LAKE WURTH FL 1346/ US

The above member wildy submits this statement for the property of changing its mystered affice or registered agent, or both, in the State of Florida

SIGNATURE

Officer/Director Detail:

T again

Electronic Signature of Registered Agent

Nist tes ROBINSON, ISAAC

Acuteman 3935 SHELLEY ROAD

WEST PALM BEACH FL 33497 Life State-Zo

TREASUPER 1 30

DAVIS JAMES L 6.07 93 6651 HATTERAS OR Address.

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CONSTRUCTO WEST PARMBEACH FL 3340?

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DIRECTOR

BEMARTS ANTI-CAPAC 1433 Car Adictions 6726 BULDISH COURT Cay State-Zp GREENACRES FL 33413 Title

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FIELDS, ALFRED

Name Address

3618 NORTHSHORE DR

City-State-Zip:

WEST PALM BEACH FL 33407

Title

DIRECTOR

Name

COOK, CORDEL

Address

1833 N.W. 193RD STREET

City-State-Zip

MIAMI GARDENS FL 33449

Triber

DIRECTOR

taanee:

GRANT, JEFFERSON

Address

1023 PINE SAGE CIRCLE

Note State 2p.

WEST PALM BEACH FL 33400

1181

DIRECTOR

\* 1 7/1 5 Little & SMITH, GRASFORD W 251 W HTH STREET

Cary Charles of P. REVIERA BEACH FL 33404

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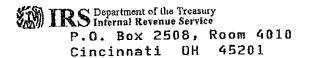
SIGNATURE JAMES L. DAVIS

TREASURER

04/29/2019

Electronic Signature of Signing Officer/Director District

Date



In reply refer to: 4077594580 Dec. 20, 2013 LTR 4168C 0 65-0751871 000000 00

00037313 BODC: TE

ALPHA EDUCATIONAL FOUNDATION DDL INC DELTA DELTA LAMBDA % JAMES L DAVIS 6651 HATTERAS DRIVE LAKE WORTH FL 33467

01015

Employer Identification Number: 65-0751871
Person to Contact: A.Bowlds
Toll Free Telephone Number: 1-877-829-5500

Dear Taxpayer:

This is in response to your Aug. 12, 2013, request for information regarding your tax-exempt status.

Our records indicate that you were recognized as exempt under section 501(c)(3) of the Internal Revenue Code in a determination letter issued in April 1998.

Our records also indicate that you are not a private foundation within the meaning of section 509(a) of the Code because you are described in section 509(a)(2).

Donors may deduct contributions to you as provided in section 170 of the Code. Bequests, legacies, devises, transfers, or gifts to you or for your use are deductible for Federal estate and gift tax purposes if they meet the applicable provisions of sections 2055, 2106, and 2522 of the Code.

Please refer to our website www.irs.gov/eo for information regarding filing requirements. Specifically, section 6033(j) of the Code provides that failure to file an annual information return for three consecutive years results in revocation of tax-exempt status as of the filing due date of the third return for organizations required to file. We will publish a list of organizations whose tax-exempt status was revoked under section 6033(j) of the Code on our website beginning in early 2011.

4077594580 Dec. 20, 2013 LTR 4168C 0 65-0751871 000000 00 00037314

ALPHA EDUCATIONAL FOUNDATION DDL INC DELTA DELTA LAMBDA % JAMES L DAVIS 6651 HATTERAS DRIVE LAKE WORTH FL 33467

If you have any questions, please call us at the telephone number shown in the heading of this letter.

والمعارب المستعلق والمتعارب والمعارب والمعارب والمعارب والمعارب والمعارب والمعارب والمعارب والمعارب والمعارب والمعارب

Sincerely yours,

Kenneth Corbin, Acting Director

Exempt Organizations



### Consumer's Certificate of Exemption

DR-14 R. 01/18

#### Issued Pursuant to Chapter 212, Florida Statutes

FLORIDA			
85-8015150636C-4	07/31/2019	07/31/2024	501(C)(3) ORGANIZATION
Certificate Number	Effective Date	Expiration Date	Exemption Category
Columbate individu			

This certifies that

ALPHA PHI ALPHA EDUCATIONAL SCHOLARSHIP FOUNDATION INC 1707 HILTONIA CIR WEST PALM BEACH FL 33407-3515

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. 01/18

- 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.).
- Your Consumer's Certificate of Exemption is to be used solely by your organization for your organization's customary nonprofit activities.
- 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, EA.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 about your exemption certificate, please call Taxpayer Services at 850-488-6800. The mailing address is PO Box 6480, Tallahassee, FL 32314-6480.