



## 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: Councilwoman Shirley Lanier

Legal Name of Organization: Operation Hope, Inc.

Program/ Activity Name: After-school Program

Requested Amount: \$ 700.00

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 Brochure

Mailing Address: 1253 10th Street

City: Lake Park State: FL Zip: 33403

Contact Person(s): Kenneth Bowers

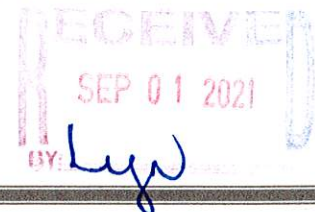
Phone: (561) 396-7969 Fax: (561) 282-3498

Email Address: operationhopeinc@yahoo.com

Name of Authorized Official: Kenneth Bowers

Signature of Authorized Official: Kenneth Bowers Date: 9/1/21

**\*\*\*\*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, Councilwoman Shirley Lanier, hereby certify that the donation to Operation Hope Fund 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: Shirley Lanier Date: 9/3/2021

Amount Approved by Elected Official: \$ 1000

### City Council Action

Approved  Disapproved

Chairperson's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*Riviera Beach- "Best Waterfront City In Which To Live, Work and Play"*  
**Page 2 of 2**

Revised March 2017

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

DEPARTMENT OF THE TREASURY

Date: SEP 01 2016

OPERATION HOPE INC  
PO BOX 10443  
RIVIERA BRACH, FL 33419-0000

Employer Identification Number:  
65-0171969  
DLN:  
26053637002266  
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:  
August 22, 2016  
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.

Based on the information you submitted on your application, we approved your request for reinstatement under Section 7 of Revenue Procedure 2014-11. Your effective date of exemption, as listed at the top of this letter, is the submission date of your application.

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](http://www.irs.gov/charities). Enter "4221-PC" in the search bar

Letter 5436

# Request for Taxpayer Identification Number and Certification

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

▶ Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

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  
*Operation Hope, 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.  
*1253 10th Street*

6 City, state, and ZIP code  
*Walter Park, FL 33403*

7 List account number(s) here (optional)

Requester's name and address (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.

**Social security number**

			-			-			
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OR

**Employer identification number**

6	5	-	0	1	7	1	9	6	9
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**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:

- 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
- 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
- I am a U.S. citizen or other U.S. person (defined below); and
- 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 ▶ *Kenneth Burns*

Date ▶ *9/1/21*

## 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](http://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.*

## Who are the Homeless

- Marsha, who fled from an abusive husband with her baby and 12 year old son.
- Teresa, who suddenly found herself widowed and alone with no income.
- Children who live with their destitute parents in cars and on the street.
- There are more than 4,295 students identified as homeless as of April, 2017. The average age of homeless children in Palm Beach County is 7 years old. This is an 11.5% increase since 2015. Thirteen percent are 18-25 years old. West Palm Beach has the largest homeless population in Palm Beach County. The Homeless Coalition of Palm Beach County showed a 73.3% increase in number of homeless veterans.
- Ages, reasons for being homeless and circumstances are all different. They each have a dream of what they would like to achieve in life. The sad fact is homelessness could strike any one of us given the right circumstances.

## Operation Hope's Helping Hands

- Searcy Denny Scarola Barnhart & Shipley
- Grand Chiropractic
- Publix
- Cheney Brothers
- Tropical Sands Christian Church
- Bridges of the Palm Beaches
- J.A.Y. Ministries
- Slawson Cunningham Whalen & Gaspari
- Jupiter First Church
- Homeless Coalition of Palm Beach County
- FL Dept. of Children and Families
- FEMA Emergency Food and Shelter
- Fidelity Federal Bank & Trust
- St. Mark's Episcopal Church & School
- St. Patrick Catholic Church
- Martha Women's Group
- Chic Unique Boutique
- Town of Lake Park
- Kurt K. Thompson, Personal Injury Lawyer
- **ENDLESS VOLUNTEERS.....**

## Operation Hope, Inc.

1253 10th Street  
Lake Park, FL 33403  
Phone (561) 396-7969  
Office (561) 318-7876



*Keeping Dreams Alive By  
Extending a Hand Up  
Instead of a Hand Out*

Operation Hope is a 501(c)3 nonprofit organization. A copy of Operation Hope, Inc.'s official registration with the FL Department of Agriculture & Consumer Services (#SC-127250) and financial information may be obtained from the Division of Consumer Services by calling toll free 1-800-435-7352 within the state.

This organization donates 100%  
of all contributions.



# Offering hope to the Homeless for a Brighter Future



Founders  
Ken & Rene Bowers

In 1989, Ken Bowers met an elderly couple rummaging for food in a dumpster behind a donut shop. He learned that they were not only hungry, but were also homeless. After learning of the couple's despair, Bowers found lodging and food for them. After that sad and enlightening experience Bowers, a graduate in criminal justice, soon became acquainted with the faces and plight of the homeless in Palm Beach County and began seeking ways to offer them the opportunity for a better tomorrow.

Operation Hope was founded in 1989 by Ken Bowers to keep dreams alive and to offer a Hand Up out of homelessness into a productive future. From 1989 to today the program has served more than 5,000 children and adults. Working with a broad network of community partners, we provide additional services to families in the need of food, shelter, jobs, clothes, educational and skills training. Operation Hope is truly "Keeping The Dreams Alive" by "Giving A Hand Up Not A Hand Out" with warmth and compassion for all the families and individuals we serve.

**Summer Camp** - Operates Monday Through Friday, from June to August providing a safe, secure and fun atmosphere for children. Movies, bowling, skating and arts and crafts are only a few of the activities provided every day by a caring staff. Nutritious meals, snacks and cool drinks are enjoyed by all.



**After School Program** - Teachers and volunteers provide assistance with homework, reading and counseling. Children are encouraged to behave well, make good decisions and build healthy relationships. A dedicated staff provide a comfortable and quiet space for the students to study. Computers are available for research and homework.



**Educational Program** - Throughout the year it is our goal to present unique and interesting events for our young people. For example we have visited Scripps Research, The Culinary Institute, Columbia Broadcasting and the Kravis Center, opening up the possibilities that there are many career choices in the world for them. Such trips may ignite a passion which will produce a future scientist, doctor, policeman, journalist or chef.

You Can Offer A Helping Hand of Hope By Joining Friends of Operation Hope

Just send this completed form along with your check made payable to Operation Hope, Inc. to:

Operation Hope Inc., 1253 10th Street, Lake Park, FL 33402

- \_\_\_\_\_ \$500 Golden Hand of Hope Member
- \_\_\_\_\_ \$300 Silver Hand of Hope Member
- \_\_\_\_\_ \$150 Bronze Hand of Hope Member
- \_\_\_\_\_ Other Contribution Amount \$ \_\_\_\_\_

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Phone: \_\_\_\_\_