

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, as amended in November 2011. Under the Policy each elected official shall be entitled to designate up to \$15,000 per year (\$7,500 on October 1st and \$7,500 on April 1st) 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 statues, 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 Bruce A. Guyton

Legal Name of Organization:Inner City Youth Golfers' Inc.
Program/ Activity Name: Golf Skills Development Camp
Requested Amount: 1000.00
Briefly describe the Program/Activity below <u>and</u> attach (1) letter of request or a more detailed description of the Program/Activity; (2) non-profit paperwork and (3) w-9 IRS form:
The Golf Skills Development Camp will be continued which will include instructional materials, educational and cultural field trips, tours and to provide clubs/equipment and golf instructional tools.
Mailing Address: P.O. Box 10572
City: Riviera Beach State: FL Zip 33419
Contact Person(s) Esmeralda H. Knowles
Phone: (<u>561</u>) 844-8774
Email Address: icyginc@aol.com
Name of Authorized Official: Esmeralda H. Knowles
Signature of Authorized Official: Kronland H Knowl Date: Nov. 3, 2015
****Return the form to the Elected Official or the Legislative Office for processing.

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Waste Management Community Benefits Request for Donations Approval by Elected Official

I, Councilman Bruce A. Guyton hereby certify that the donation to Inner City Youth Golfers' 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 with 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:

Bucco A. Supton Sp. Date: Nov. 3, 2015

City Cou	meil Action
☐ Approved	☐ Disapproved
airnerson's Signature	Deter

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Revised November 2011



April 1, 2015

The Honorable Bruce A. Guyton, District 1 Councilman, City of Riviera Beach 600 West Blue Heron Blvd. Riviera Beach, FL 33404

Dear Mr. Guyton:

As you know, Inner City Youth Golfers', Inc. (ICYG) was founded in Riviera Beach. FL. ICYG is a not-for profit, tax-exempt charitable organization, approved by IRS on August 9, 2000. Our first "youth golf program" was started at John F. Kennedy Middle Magnet School, Riviera Beach to fill a community need for at-risk children ages 9 to 17 of single parent families, various organizations, housing projects and churches.

We continue to use the game of golf to cause our youth to focus on the best aspects of life. As you know, we have been able to positively touch the lives of hundreds of youngsters, particularly with our initiative: "Say NO To Drugs - Say YES To Education, Culture & Golf" through our school assemblies, forums and offer "Golf Skills Development Camps", clinics, field trips, etc. We depend upon donations, grants, contributions, fundraisers and gifts to promote our initiatives.

This is to therefore to request a "Waste Management Community Benefit Donation" of \$1,000.00 in support of our youth activities in Riviera Beach, FL. Your donation will be dedicated to specifically help to continue our "Golf Skills Development Camps"; to provide clubs/equipment and golf instructional tools; games/supplies; expand our instruction materials and team; implement "youth golf day"; food; provide incentive educational and cultural field trips, tours and clothing for some of our youth.

We believe that an investment in "our today's" youth, who are usually less fortunate, is a lifesaving investment in the future leaders of tomorrow.

Thanks in advance for the children!

Sincerely,

Esmeralda / huru/es

Executive Director

cc: ICYG Board of Directors

Request for Taxpayer Identification Number and Certification

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

Interna	al Revenue Service		Scrip to p	io irio.	
	Name (as shown on your income tax return)			····	
	Inner City Youth Golfers', Inc.				
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Print or type See Specific Instructions on page	Check appropriate box for federal tax classification: ☐ Individual/sole proprietor	l l	Exemptions (see instructions):		
8 E	☐ Individual/sole proprietor ☐ C Corporation ☐ S Corporation ☐ Partnership ☐ Trust/estate	1			
£ £	☐ Limited flability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶	I	Exempt payee code (if any)		
Print or type			Exemption from FATCA reporting code (if any)		
4 2	☐ Other (see instructions) ►				
Ē	Address (number, street, and apt. or suite no.) Requester's	name and address	(optional)		
훘	1032 Center Stone Lane				
é	City, state, and ZiP code				
ഗ്	Riviera Beach, FL 33404				
	List account number(s) here (optional)		···		
Par	Taxpayer Identification Number (TIN)				
Enter	your TIN in the appropriate box. The TIN provided must match the name given on the "Name" line. I So	cial security number	er		
to avo	old backup withholding. For individuals, this is your social security number (SSN). However, for a				
reside	ent allen, sole proprietor, or disregarded entity, see the Part Linstructions on page 3. For other		-		
TIN or	es, it is your employer identification number (EIN). If you do not have a number, see <i>How to get a</i> n page 3.				
Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose					
number to enter.				T	
	6	5 - 0 9	7 8 8 6	5 8	
Par	t II Certification	<u> </u>		1	
Under	r penalties of perjury, I certify that:				
1. The	e number shown on this form is my correct taxpayer identification number (or I am waiting for a number to	o be issued to me), and		
2. lar Sei	m not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not rvice (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends longer subject to backup withholding, and	been notified by t	he Internal Re	evenue that I am	
	m 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.				
Certifi becau interes genera	fication instructions. You must cross out item 2 above if you have been notified by the IRS that you are come use you have failed to report all interest and dividends on your tax return. For real estate transactions, item st paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individually, payments other than interest and dividends, you are not required to sign the certification, but you muctions on page 3.	currently subject to 1 2 does not apply	/. For mortgag	ge	
Sign Here	Signature of U.S. person & Carner well of Herry Lea	11-3-2	0/5		
Con	aral Instructions	have of affectively			

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

Future developments. The IRS has created a page on IRS.gov for information about Form W-9, at www.irs.gov/w9. Information about any future developments affecting Form W-9 (such as legislation enacted after we release it) will be posted on that page.

Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, payments made to you in settlement of payment card and third party network transactions, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TiN to the person requesting it (the requester) and, when applicable, to: $\frac{1}{2} \left(\frac{1}{2} \right) = \frac{1}{2} \left(\frac{1}{2} \right) \left(\frac{1$

- 1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued).
 - 2. Certify that you are not subject to backup withholding, or
- 3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the

on foreign partners' share of effectively connected income, and

4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct.

Note. If you are a U.S. person and a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9,

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- · An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- · An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax under section 1446 on any foreign partners' share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person, and pay the section 1446 withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid section 1446 withholding on your share of partnership income. and avoid section 1446 withholding on your share of partnership income.

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

DEPARTMENT OF THE TREASURY

Date:

AUG 0 9 2000

INNER CITY YOUTH GOLFERS
INCORPORATED
C/O MALACHI KNOWLES
4208 42ND WAY
WEST PALM BEACH, FL 33407

Employer Identification Number:

65-0978868

DLN:

17053105025020

Contact Person:

BARBARA HARRIS

ID# 52677

Contact Telephone Number:

(877) 829-5500

Accounting Period Ending:

December 31

Foundation Status Classification:

509(a)(1)

Advance Ruling Period Begins:

January 24, 2000

Advance Ruling Period Ends:

December 31, 2004

Addendum Applies:

Yes

Dear Applicant:

Based on information you supplied, and assuming your operations will be as stated in your application for recognition of exemption, we have determined you are exempt from federal income tax under section 501(a) of the Internal Revenue Code as an organization described in section 501(c)(3).

Because you are a newly created organization, we are not now making a final determination of your foundation status under section 509(a) of the Code. However, we have determined that you can reasonably expect to be a publicly supported organization described in sections 509(a)(1) and 170(b)(1)(A)(vi).

Accordingly, during an advance ruling period you will be treated as a publicly supported organization, and not as a private foundation. This advance ruling period begins and ends on the dates shown above.

Within 90 days after the end of your advance ruling period, you must send us the information needed to determine whether you have met the requirements of the applicable support test during the advance ruling period. If you establish that you have been a publicly supported organization, we will classify you as a section 509(a)(1) or 509(a)(2) organization as long as you continue to meet the requirements of the applicable support test. If you do not meet the public support requirements during the advance ruling period, we will classify you as a private foundation for future periods. Also, if we classify you as a private foundation, we will treat you as a private foundation from your beginning date for purposes of section 507(d) and 4940.

Grantors and contributors may rely on our determination that you are not a private foundation until 90 days after the end of your advance ruling period. If you send us the required information within the 90 days, grantors and

Letter 1045 (DO/CG)