MEETING AGENDA
SESSION OF THE PARKS AND RECREATION ADVISORY BOARD
CITY OF KISSIMMEE
CITY HALL, COMMISSION CHAMBERS
101 CHURCH STREET, KISSIMMEE, FLORIDA 34741-5054
WEDNESDAY, OCTOBER 8, 2025 AT 6:00 PM

1. MEETING CALLED TO ORDER

2. MINUTES

2.A Approval of meeting minutes from August 13, 2025 Parks & Recreation Advisory Board.

3. HEAR AUDIENCE

4. DISCUSSION

4.A Director's Report

5. NEW BUSINESS

5.A Voting of Chair and Co-Chair for 2025/26 Fiscal Year

5.B Board meeting dates for the 2025/26 Fiscal Year

5.C Community Benefit Grant

5.D Fee Waiver Grants - Period II

6. HEAR CHAIRMAN AND BOARD MEMBERS

7. ADJOURNMENT

In accordance with Florida Statutes 286.105: Any person wishing to appeal any decision made by the Parks and Recreation Advisory Board with respect to any matter considered at such meeting or hearing will need to ensure that verbatim record of the proceedings is made, which record includes the testimony and evidence upon which the appeal is made.

In accordance with Florida State 286.26, persons needing assistance to participate in any of these proceedings should contact the Office of the City Clerk, 101 Church Street, Kissimmee, Florida, (407) 518-2309.

ITEM 2.A
Approval of meeting minutes from August 13, 2025 Parks & Recreation Advisory Board.

Item Details

Attachment(s):
1. PARAB Meeting Minutes 2025_8_13

MEETING MINUTES
SESSION OF THE PARKS AND RECREATION ADVISORY BOARD
CITY OF KISSIMMEE
CITY HALL, COMMISSION CHAMBERS
101 CHURCH STREET, KISSIMMEE, FLORIDA 34741-5054
WEDNESDAY, AUGUST 13, 2025 AT 6:00 PM

1. MEETING CALLED TO ORDER **Members Present:** Board Member Albert Dorsey, Board Co-Chair Edward Kilroy, Board Chair M. Hannan Khan, Board Member Vanessa Alvarez, Board Member Manuel Gomez, Board Member Amarilis Olivo Williams
Staff Present: Parks & Recreation Assistant Director Matt Libby and Financial Analyst Andrea Campbell
Members Absent: Board Member Robin Wright, Board Member Seewdat "David" Anderson, Board Member Hamza Godil

Board Chair Hannan Khan called the meeting to order at 05:56 PM.

2. MINUTES

2.A Approval of the meeting minutes from June 11, 2025

Board Co-Chair Edward Kilroy made a motion to accept the minutes from the June 11th meeting as presented. Board member Manny Gomez seconded the motion.

AYE: Board Member Albert Dorsey, Board Co-Chair Edward Kilroy, Board Chair M. Hannan Khan, Board Member Vanessa Alvarez, Board Member Manuel Gomez, Board Member Amarilis Olivo Williams
NAY: None

Motion to 6 - 0.

3. HEAR AUDIENCE No one was present.

4. DISCUSSION

4.A Director Update

Parks & Recreation Assistant Director Matt Libby gave the directors' update to include project progress at Lancaster Ranch Park Phase 1B, Mark Durbin Community Center and Civic Center and Hotel conversion. He also announced the upcoming event dates and the next Parks & Recreation Advisory Board meeting will be on October 8th.

4.B Discussion of the 2026 Florida Recreational Development Assistance Program (FRDAP) grant application in the amount of $112,500 for improvements to Quail Hollow Park

Parks & Recreation Assistant Director Matt Libby explained that the City is applying for a FRDAP Grant for improvements to the Quail Hollow Park Basketball Court making it a full court.

4.C Discussion of the 2026 Florida Recreational Development Assistance Program (FRDAP) grant application in the amount of $200,000 for improvements to the Kissimmee Lakefront Splash Pad

Parks & Recreation Assistant Director Matt Libby explained that the City is applying for a FRDAP Grant for improvements to the Kissimmee Lakefront Park Splash Pad equipment above ground.

5. NEW BUSINESS There was no new business.

6. HEAR CHAIRMAN AND BOARD MEMBERS Board Co-Chair Ed Kilroy asked the status of the Berlinsky Community House to supplement events that were held at the Civic Center while it is under construction. Assistant Director Matt Libby explained that it is still being reviewed by the Historic

Preservation and that the City is working to speed it up the best they can. Board Chair Hannan Khan thanked the Parks & Recreation staff for all their hard work.

7. ADJOURNMENT There being no further business to come before the Parks & Recreation Advisory Board, Chair Hannan Khan adjourned the meeting at 06:07 PM.

Board Chairman

ATTEST:

Board Secretary

ITEM 4.A
Director's Report

Item Details

Attachment(s):
1. Directors Report 10.8.2025

Directors Report
October 1, 2025

1. Projects In Progress
    - Lancaster Ranch Phase 1B
    - Shingle Creek Regional Trail - Lancaster Ranch Loop
    - Mark Durbin Community Center
    - Civic Center/Hotel
    - Berlinsky Community House
2. Upcoming Events
    - Boo on Broadway – Oct 24 – 6-9pm
    - Movie in the Park – Series begins October 3rd – 1st Friday of the Month
    - State of the Department – October 31st – 11am
    - Orlando Japan – November 9th – 10am
    - Santa Calling – December 4th – 6pm
    - Festival of Lights - December 13th – Festival 4-7pm, Parade 7:30-9pm

NEXT PARAB MEETING, December10, 2025 - Meeting at 6pm at City Hall

ITEM 5.A
Voting of Chair and Co-Chair for 2025/26 Fiscal Year

Item Details

Attachment(s):
None

ITEM 5.B
Board meeting dates for the 2025/26 Fiscal Year

Item Details

Attachment(s):
1. Meeting Schedule 2025-26

CITY OF KISSIMMEE 1883

PARKS & RECREATION ADVISORY BOARD MEETING SCHEDULE 2025/2026

All meetings will be held at the City Hall Commission Chambers unless noted otherwise. Meetings start at 6:00 p.m. Please remember to contact the Parks and Recreation Administration Office at 407-518-2501 or 407-518-2331 if you will not be attending a particular meeting.

- December 10, 2025
- February 11, 2026
- April 8, 2026
- June 10, 2026
- August 12, 2026
- October 14, 2025

ITEM 5.C
Community Benefit Grant

Item Details
Community Benefit Grant

- KCX Elite
- Fund for Hope Gala

Attachment(s):
1. Community Benefit Spreadsheet
2. KCX Elite
3. Fund for Hope

2025/26 Community Benefit Grant

EVENT	Event Date	Award Date	Award Year & Amount	Requested Amount	AWARDED	Ed	Al	Robin	Hannan	David	Manny	Amarilis	Total
KCX Elite	10/25/2025	10/8/2025	Year 2 ($2,000)	$2,500	$0								0
Fund for Hope Gala	11/8/2025	10/8/2025	Year 3 ($1,500)	$2,500	$0								0
					$0								0
					$0								0
					$0								0
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													0
													0
				$25,000	$0.00								
		Balance			$25,000								

COMMUNITY BENEFIT EVALUATION FORM

Application Received: 9/29/2025 Evaluated by: Steve Lackey

Event Name: KCX Elite Event Date: 10/25/2025

	Meets Policy Requirements Yes	No
Applicant Eligibility		
Resident of Osceola County OR 501(c)3, 501(c)4 organization? (if resident, move to next section once eligibility is determined)	✓	
Organization Eligibility (continued)		
Meets incorporation, tax, budget, and audit requirements?	✓	
Does NOT discriminate based on age, race, sex, marital status, Sexual orientation, or national origin?	✓	
Does NOT receive funds from any other City program?	✓	
Meets reporting requirements? (previously funded organizations)	✓	
Request / Use Eligibility		
Will result in positive impact to the City of Kissimmee?	✓	
Will NOT be used for event/activity in any City-owned facility?	✓	
Will NOT be used to promote commercial/private business?	✓	
Will NOT be used to promote/support political party/activity?	✓	
Will NOT be used to promote tobacco or VICE activities?	✓	
Will NOT support or benefit a single individual?	✓	
Will NOT fund or support direct programming?	✓	

Eligibility Determination

Note, a "no" to any question or criteria automatically makes the request ineligible for funding consideration pursuant to City Policy 1605.

Does the request meet or exceed policy requirements?	✓	

Evaluator's Comments

Request $2500
Year 2 - $2,000 max

Community Benefit Funds Application

CITY OF KISSIMMEE 1883

Submitted on	29 September 2025, 11:17AM
Receipt number	37
Related form version	2

Event Information

Event Name	KCX Elite
Event Date	10/25/2025
Street Address	2240 Irl Bronson hwy
City	Kissimmee
State	FL
Zip Code	34744

Requestor Information

Name	Darlene Beecher
Phone Number	5712883208
Address	2240 Irl Bronson Hwy
Email	darleneebeecher@gmail.com
Eligibility	Organization
501(c) Certification/Notification	KCX Booster 501c Letter.pdf
Form 990 (If Organization is Required to File)	90c32376-0624-4485-82b0-f4c8378ff66f.jpeg
Type of Request	Sponsorship
Total amount to be raised/fundraising goal for your event	$5,000.00
Amount Requested from Community Benefit Fund	2,500
Last Completed Audit	KCX Booster Financial 25-26.pdf

Annual Budget	KCX Elite Booster Club Income Expense Log 2025-.xlsx

General Information

Name of School Represented	KCX Elite all star Gym
Point of Contact for Event or School	Darlene Beecher
Point of Contact Phone Mumber	5713883208
Event/Competition's Website	https://kcxelite.com/
Have you participated in this event in the past?	No

Donation / Sponsorship Description

Describe the nature of the event and the process to participate. If the request is for a donation, what will the funds be used towards?	To help with the cost of insurance and food.
List any other fundraisers planning to raise money for the event or for your participation in the event	We are asking for sponserships.
Have you secured funding or funding commitments from any other governmental entity	No
If yes, please provide the name(s) of the government entity(ies)	

Community Impact

Describe the impact this event will have on the quality of life and/or community pride for residents in the City of Kissimmee.	This event we hope brings people together fostering stronger relationships among neighbors and families. Opportunities for residents to meet new people and engage in shared experiences. Also health and wellness mental wellbeing is supported through fun, relaxation and community engagement.

KCX ELITE Booster Club

		FY 2025 Budget	FY 2026 Budget	FY 2027 Budget
	INCOME, CONTRIBUTIONS & SUPPORT			
1	Contributions - Corporate			
2	Contributions - Individual			
3	Contributions - In-kind			
4	Grants		5,000.00	15,000.00
5	Fund Raising Events	5,000.00	20,000.00	25,000.00
6	Other (*Directors' Contributions)*			
7	Investment Income	-	-	-
8	**TOTAL INCOME**	**$23,471.24**	**$ 25,000.00**	**$ 30,000.00**
9	**EXPENSES Fall Festival**			
10	**Administrative Expenses**			
11	Information Technology, Website, email		$250.00	1,000.00
12	Rental infatble		$550.00	550.00
13	Concession (Food, drinks, ICE)		$1,500.00	30,000.00
14	Legal Fees & Insurance		$567.25	167.00
15	Extra		$200.00	
16				
17				
18				
19				
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23				
24	**Total Administrative Expenses**	**$ -**	**$ 3,067.25**	**$ 31,717.00**
25				
26	**Distributions**			
27				
28	Other			
29	**Total Distributions**	**$ -**	**$ -**	**$ -**
30	*(Distribution to Income Ratio - 66% Target)*	*0%*	*0%*	*0%*
31				
32	**Incorporation and Filing Fees**			
33	Name Registration	50.00	50.00	50.00
34	Articles of Incorporation	150.00	150.00	150.00
35	Statement of Continued Existence	-	-	-
36	**Total Incorporation & Filing Fees**	**200.00**	**200.00**	**200.00**
37				
38	**TOTAL EXPENSES**	**$ 200.00**	**$ 3,267.25**	**$ 31,917.00**
39				
40	**BALANCE**	**$ 23,271.24**	**$ 21,732.75**	**$ (1,917.00)**
41				
42				

KCX Elite Booster Club

TOTAL: #########

	DATE	DONOR NAME	DESCRIPTION MEMO-CHK #	CORPORATE DONATIONS	INDIVIDUAL DONATIONS	BOARD MEMBERS	GRANTS	FUND RAISING	IN-KIND CONTRIBUTION	INVESTMENT INCOME	OTHER	TOTAL	COMMENTS	2025 RECEIPT
				$ -	$ 13,884.58	$ -	$1,529.00		$ -	$ -	$ -	$36,641.80		
1	6/9/2025	City of Kissimmee					$929.00					929.00	Board Member Fee	
2	5/24/2025	Our Military Kids Org					600.00					600.00		
3	1/25/2025	Fireworks Tent		Phantom	6,692.29							6,692.29		
4	7/15/2025	Nothing Bundt Cakes						$3,750.00				3,750.00		
5	2/10/2024	Double Good Popcorn						$7,462.00				7,462.00		
6	7/4/2025	Firework stand 4th of July		Phantom	$7,192.29							7,192.29		
7	9/22/2025	Publix sidewalk fundraiser						$1,060.16				1,060.16		
8	1/2/2025	Sliver Spurs Arena Concession Stands						$3,220.86				3,220.86		
9	5/21/2023	Booster club memebership fee						4,500.00				4,500.00		
10	9/1/2025	Little Caesar Pizza						$1,235.00				1,235.00		
11												-		
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KCX Elite Booster Club

Updated: 10/1/2025 TOTAL: $ 12.00

LN	DATE	VENDOR/CLIENT	DESCRIPTION	ACCT	CASH AWARDS	PROGRAMS	OFFICE SUPPLIES	SERVICES EXPENSES	POSTAGE SHIPPING	IT & TECH	TELECOM & UTILITIES	ADVERTISING & PRINTING	EDUCATION & TRANING	CONTRACTOR & SALERIES	MEALS & ENTERTA	TRAVEL	MILEAGE*	TOTAL
					-	-	12.00	-	-	-		-	-	-	-	-	-	$ 12.00
1	3/9/2024	Amazon	Printer Ink				12.00											12.00
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Address: 2240 E Irlo Bronson Memorial Hwy

Kissimmee, FL 34744

Email: Kcxboosterclub@gmail.com

To Whom it May Concern:

The KCX Elite Booster Club is a registered nonprofit organization formed to support the athletes and programs of KCX Elite Allstars. Our mission is to promote athletic excellence, teamwork, and community through fundraising, event coordination, and supplemental resources that reduce the financial burden on families.

This letter serves to confirm that the KCX Elite Booster Club operates solely for charitable and educational purposes. All funds raised or donated are used exclusively to support our athletes through initiatives such as tuition assistance, purchasing equipment, providing additional training opportunities, and supporting competition-related needs throughout the 2025–2026 season.

The preparation of this report is the responsibility of the management and Treasurer of the KCX Elite Booster Club. Management is responsible for maintaining accurate financial records in accordance with accepted nonprofit accounting practices and for ensuring that all financial information presented is complete and accurate to the best of its knowledge. The Treasurer, in coordination with any appointed accountants or bookkeepers, compiles and reviews this information to ensure transparency and accountability for all funds received and disbursed.

I reviewed KCX Elite Booster Club's financial statements, including the statement of financial position as of May 2025, statements of activities, functional expenses, and cash flows for the fiscal year 2024-2025, and notes to the financial statements. After reviewing, I cannot see any significant changes needed to ensure compliance with US accounting standards.

This report is for the City of Kissimmee's Board of Directors and administration only.

Sincerely,

Leticia Telleria

Leticia Telleria
KCX Elite Booster Treasurer

Department of the Treasury
Internal Revenue Service
Tax Exempt and Government Entities
P.O. Box 2508
Cincinnati, OH 45201

Date:
04/11/2024
Employer ID number:
93-3956851
Person to contact:
Name: Customer Service
ID number: 31954
Telephone: (877) 829-5500
Accounting period ending:
May 31
Public charity status:
509(a)(2)
Form 990 / 990-EZ / 990-N required:
Yes
Effective date of exemption:
October 9, 2023
Contribution deductibility:
Yes
Addendum applies:
No
DLN:
26053495004204

KCX ELITE BOOSTER CLUB INC
2240 E IRLO BRONSON MEMORIAL HWY
KISSIMMEE, FL 34744

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.

Sincerely,

Stephen A. Martin
Director, Exempt Organizations
Rulings and Agreements

Letter 947 (Rev. 2-2020)
Catalog Number 35152P

0000102 07/23/24

FLORIDA

Consumer's Certificate of Exemption

Issued Pursuant to Chapter 212, Florida Statutes

DR-14
R. 01/18

Certificate Number	Effective Date	Expiration Date	Exemption Category
85-8019543487C-2	07/01/2024	07/31/2029	501(C)(3) ORGANIZATION

This certifies that

KCX ELITE BOOSTER CLUB INC
2240 E IRLO BRONSON MEMORIAL HWY
KISSIMMEE FL 34744-4420

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.

FLORIDA

Important Information for Exempt Organizations

DR-14
R. 01/18

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 about your exemption certificate, please call Taxpayer Services at 850-488-6800. The mailing address is PO Box 6480, Tallahassee, FL 32314-6480.

COMMUNITY BENEFIT EVALUATION FORM

Application Received: 9/25/2025 Evaluated by: Steve Lackey

Event Name: 12th Annual Fund for Hope Gala Event Date: 11/8/2025

	Meets Policy Requirements Yes	No
Applicant Eligibility		
Resident of Osceola County OR 501(c)3, 501(c)4 organization? (if resident, move to next section once eligibility is determined)	✓	
Organization Eligibility (continued)		
Meets incorporation, tax, budget, and audit requirements?	✓	
Does NOT discriminate based on age, race, sex, marital status, Sexual orientation, or national origin?	✓	
Does NOT receive funds from any other City program?	✓	
Meets reporting requirements? (previously funded organizations)	✓	
Request / Use Eligibility		
Will result in positive impact to the City of Kissimmee?	✓	
Will NOT be used for event/activity in any City-owned facility?	✓	
Will NOT be used to promote commercial/private business?	✓	
Will NOT be used to promote/support political party/activity?	✓	
Will NOT be used to promote tobacco or VICE activities?	✓	
Will NOT support or benefit a single individual?	✓	
Will NOT fund or support direct programming?	✓	

Eligibility Determination

Note, a "no" to any question or criteria automatically makes the request ineligible for funding consideration pursuant to City Policy 1605.

Does the request meet or exceed policy requirements?	✓	

Evaluator's Comments

Request $2,500

Year 3 - $1,500 max

Community Benefit Funds Application

CITY OF KISSIMMEE 1883

Submitted on	25 September 2025, 9:29am
Receipt number	36
Related form version	2

Event Information

Event Name	12th Annual "Fund for Hope" Gala Fundraiser
Event Date	11/08/2025
Street Address	201 E Dakin Ave
City	Kissimmee
State	FL
Zip Code	34741

Requestor Information

Name	Michele Herpin
Phone Number	813-525-7434
Address	1712 Kelley Ave Kissimmee, FL 34744
Email	micheleh@claritashouse.com
Eligibility	Organization
501(c) Certification/Notification	EIN CHOM.pdf
Form 990 (If Organization is Required to File)	2024 990 Completed.pdf
Type of Request	Sponsorship
Total amount to be raised/fundraising goal for your event	50,000
Amount Requested from Community Benefit Fund	2500
Last Completed Audit	2025 Account Letter.pdf

Annual Budget	2025 Annual Budget.pdf

General Information

Name of School Represented	Clarita's House Outreach Ministry INC.
Point of Contact for Event or School	Doreen Barker
Point of Contact Phone Mumber	407-443-1210
Event/Competition's Website	www.claritashouse.com
Have you participated in this event in the past?	Yes

Donation / Sponsorship Description

Describe the nature of the event and the process to participate. If the request is for a donation, what will the funds be used towards?	12th Annual Fund for Hope Gala Fundraiser, a night dedicated to raising critical funds for individuals and families experiencing homelessness and hardship in Osceola and Orange County. The process to participate is through sponsorship or ticket sales. The donation/sponsorship will be used directly going into Special Event Fee Waiver Program.
List any other fundraisers planning to raise money for the event or for your participation in the event	"none"
Have you secured funding or funding commitments from any other governmental entity	Yes
If yes, please provide the name(s) of the government entity(ies)	TOHO Water Authority has been a sponsor for 12 years KUA is a city but has also been a sponsor for 12 years

Community Impact

Describe the impact this event will have on the quality of life and/or community pride for residents in the City of Kissimmee.	The 12th Annual "Fund for Hope" Gala Fundraiser is our largest Fundraiser each year. Clarita's House outreach served and impacted over 39,000 individuals in 2024. Proceeds from the Fund for Hope Gala will directly benefit two vital community programs: Feed the Need and LEAP. These initiatives provide essential food assistance and support services to low-income and homeless individuals and families who are struggling to make ends meet. For 18 years, Clarita's House Outreach Ministry Inc. has been assisting the homeless and underprivileged individuals and families who live in motels, streets, in cars, and in low-income multi-family homes to end hunger and achieve self-sufficiency. In Osceola and Orange County, Clarita's House Outreach Ministry Inc.'s goals are not just to end hunger, provide shelter and necessities, and inspire them to reconnect with society productively.

CLARITA'S HOUSE OUTREACH MINISTRY INC.				
2025 Annual Operating Budget				2024 Actual Operating Budget
Income				
Grants, Foundations,			**48000**	39789
Donations & Monthly			**27000**	21073.21
Fundraisers			**35000**	19486.18
Board Contributions			**3600**	1050
Interest				2.01
Total Income			**113600**	81400.4
TOTAL		$0	$113,600	
Salaries & Consultant(s)		**MONTH**	**ANNUAL**	
Director/President Salary	Executive Director	$600	7,200.00	6,649.20
Employee	Admin Assistant	$540	$6,480	4763.89
other Employee (New Position March)	Communications	$500	$6,000	286.74
Consultant	Case Manager	$600	$7,200	1815
consultant	Technology, web maintence	$100	$1,200	1150
Consultant marketing		$0.00	$0.00	500
Employment Benefit Taxes (IRS)		$170.08	$2,041.02	1632
Total		$2,510	$30,121	16.796.83
Expenses				
Office/Building (Rental)		$1,843.00	$22,116.00	23920.5
Utilities for Office/Building		$433.00	$5,200.00	5032.64
Taxes & Licenses		$33.33	$400.00	344.94
OFFICE SUPPLIES (Paper, pens, ink for printer, folders, ECT)		$208.33	$2,500.00	1939.93
ADVERTISING/MARKETING (flyers, social media, donor software+)		$225.00	$2,700.00	1826.03
Postage/Shipping		$20.83	$250.00	175.48
Educational/ Training Classes		$29.17	$350.00	262.45
Travel Expenses			$0	0
Bank Charges (fees)		$50.00	$600	557.63
Membership Dues (Feed the Need food programs		$25.00	$300	287.44
Cell/Office Phone(s)		$121.96	$1,463.50	1463.5
Volunteer APPRECIATION quarterly events, & gas cards		$141.67	$1,700.00	1543.83
Meal & entertainment travel		$0.83	$100.00	67.07
Truck Exp. (insurance, gas, repairs, sunpass& maintenace		$541.67	$6,500.00	2117.14
Paypal fees		$20.83	$250.00	204.59
Insurance Liability		$133.33	$1,600.00	3011
Office and General Administrative		$208.33	$2,500.00	1705.48
Fundraising Expenses		$833.33	$10,000.00	11019.08
LEGAL & Professional Services		$66.67	800	655
Storage Unit (Feed the Need)		$180.00	$2,160.00	484.94
Feed the Need (Food Only) Bulk Food perishable, staples for distrib.		$833.33	$10,000.00	4223.53
Leap Program (Cash Assitance)motel, gas, bus passes, security dep		$718.75	$8,625.00	3719.49
TOTAL Expenses		$6,668.36	$80,114 50	64561.69
Grand Total with Line #18			110.235.50	81.358 52

US 990 Main Information Sheet 2024

For calendar year 2024 or tax year beginning _____ and ending _____

Name: CLARITAS HOUSE OUTREACH MINISTRY
Name line 2:
Address: P O BOX 453257
City, State, and Zip Code: KISSIMMEE FL 34744

EIN: 26-1431256
Telephone No: 407-443-1210

Email address ..... info@claritashouse.com
Web site address ..... WWW.CLARITASHOUSE.COM
Fiduciary name, if applicable .....
Name of officer signing return ..... DOREEN BARKER
Title of officer/trustee/fiduciary signing return ..... EXECUTIVE DIRECTOR
Group exemption number .....
Check if exemption application is pending ..... ☐
Accounting method ..... Cash: ☒ Accrual: ☐ Other: ☐ Specify: _____
List states desired .....

Type of exempt organization:

☐ Organization exempt under section 501(c), 527 or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation) (Form 990)
☒ Organization exempt under section 501(c), 527 or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation) with gross receipts less than $200,000 and total assets less than $500,000 at the end of the year (Form 990-EZ)
☐ Private foundation or section 4947(a)(1) nonexempt charitable trust treated as a private foundation (Form 990-PF)

Preparer ID: _____
Preparer name: LESLIE N BACCHUS

Firm's name: NEPHER INC
Address: 181 SUMMIT ASH WAY
City, State, ZIP Code: APOPKA FL 32703-

Time in this return: 205 minutes
Date: _____
PTIN: P00331306
Self-employed: ☐
Firm's EIN: 26-3581358
Phone: 407-832-4116

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US990MI1

Form **990-EZ**

Department of the Treasury
Internal Revenue Service

Short Form
Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
Do not enter social security numbers on this form, as it may be made public.
Go to *www.irs.gov/Form990EZ* for instructions and the latest information.

OMB No. 1545-0047

2024

Open to Public Inspection

A For the 2024 calendar year, or tax year beginning , and ending

B Check if applicable:
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Final return/terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization
CLARITAS HOUSE OUTREACH MINISTRY

Number and street (or P.O. box if mail is not delivered to street address) | Room/suite
P O BOX 453257

City or town | State | ZIP code
KISSIMMEE | FL | 34744

Foreign country name | Foreign province/state/county | Foreign postal code

D Employer identification number
26-1431256

E Telephone number
407-443-1210

F Group Exemption Number

G Accounting Method: ☒ Cash ☐ Accrual Other (specify)

I Website: WWW.CLARITASHOUSE.COM

J Tax-exempt status (check only one) — ☒ 501(c)(3) ☐ 501(c) ( ) (insert no.) ☐ 4947(a)(1) or ☐ 527

H Check ☐ if the organization is **not** required to attach Schedule B (Form 990).

K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other

L Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are $200,000 or more, or if total assets (Part II, column (B)) are $500,000 or more, file Form 990 instead of Form 990-EZ . . . . . $ 81,410

Part I **Revenue, Expenses, and Changes in Net Assets or Fund Balances** (see the instructions for Part I)
Check if the organization used Schedule O to respond to any question in this Part I . . . . . ☒

Revenue	1	Contributions, gifts, grants, and similar amounts received		1	44,139
	2	Program service revenue including government fees and contracts		2	
	3	Membership dues and assessments		3	
	4	Investment income		4	
	5a	Gross amount from sale of assets other than inventory	5a		
	b	Less: cost or other basis and sales expenses	5b		
	c	Gain or (loss) from sale of assets other than inventory (subtract line 5b from line 5a)		5c	
	6	Gaming and fundraising events:			
	a	Gross income from gaming (attach Schedule G if greater than $15,000)	6a		
	b	Gross income from fundraising events (not including $ 37,271 of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds $15,000)	6b	37,271	
	c	Less: direct expenses from gaming and fundraising events	6c	11,019	
	d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)		6d	26,252
	7a	Gross sales of inventory, less returns and allowances	7a		
	b	Less: cost of goods sold	7b		
	c	Gross profit or (loss) from sales of inventory (subtract line 7b from line 7a)		7c	
	8	Other revenue (describe in Schedule O)		8	
	9	**Total revenue.** Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8		9	70,391
Expenses	10	Grants and similar amounts paid (list in Schedule O)		10	
	11	Benefits paid to or for members		11	
	12	Salaries, other compensation, and employee benefits		12	13,333
	13	Professional fees and other payments to independent contractors		13	3,985
	14	Occupancy, rent, utilities, and maintenance		14	28,954
	15	Printing, publications, postage, and shipping		15	175
	16	Other expenses (describe in Schedule O)		16	23,785
	17	**Total expenses.** Add lines 10 through 16		17	70,232
Net Assets	18	Excess or (deficit) for the year (subtract line 17 from line 9)		18	159
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)		19	-1,333
	20	Other changes in net assets or fund balances (explain in Schedule O)		20	103
	21	Net assets or fund balances at end of year. Combine lines 18 through 20		21	-1,071

For Paperwork Reduction Act Notice, see the separate instructions.
BCA

Form **990-EZ** (2024)

Part II Balance Sheets (see the instructions for Part II)

Check if the organization used Schedule O to respond to any question in this Part II X

		(A) Beginning of year		(B) End of year
22	Cash, savings, and investments	17,831	22	19,835
23	Land and buildings		23	
24	Other assets (describe in Schedule O)	6,500	24	6,500
25	**Total assets**	24,331	25	26,335
26	**Total liabilities** (describe in Schedule O)	25,664	26	27,406
27	**Net assets or fund balances** (line 27 of column (B) **must** agree with line 21)	-1,333	27	-1,071

Part III Statement of Program Service Accomplishments (see the instructions for Part III)

Check if the organization used Schedule O to respond to any question in this Part III . . . . . ☐

Expenses (Required for section 501(c)(3) and 501(c)(4) organizations; optional for others.)

What is the organization's primary exempt purpose? FOOD&CLOTHING SERVICE-HOMELESS

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

28	Feed the Need Program groceries,housekold items,clothin and toiletries.Community events and emergency foods.Low incomefamilies.SERVED 39,601 CLIENTS (Grants $ 33,155) If this amount includes foreign grants, check here . . . ☐	28a	60,572
29	LEAP PROGRAM FOR HOMELESS AND LOW INCOME FAMILIES SEEKI SECURITY DEPOSITS FOR APTS MOTEL ASSISTANCE DAYCARE UTILITIES,MEDICAL AND GAS 15 SERVED (Grants $ 6,634) If this amount includes foreign grants, check here . . . ☐	29a	6,634
30	(Grants $) If this amount includes foreign grants, check here . . . ☐	30a	
31	Other program services (describe in Schedule O) (Grants $) If this amount includes foreign grants, check here . . . ☐	31a	
32	**Total program service expenses.** (add lines 28a through 31a)	32	67,206

Part IV List of Officers, Directors, Trustees, and Key Employees (list each one even if not compensated—see the instructions for Part IV)

Check if the organization used Schedule O to respond to any question in this Part IV . . . . . ☐

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC/ 1099-NEC) (if not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
DOREEN BARKER EXECUTIVE DIRECTOR/PRES	Hr/WK 35	7,200		
ALDWIN BARKER VP/DIRECTOR	Hr/WK 15	0		
MICHELE HERPIN TREASURER	Hr/WK 10	0		
BRENDA CLEMENT SECRETARY	Hr/WK 2	0		
DONNA ELLIOTT MISSION	Hr/WK 1	0		
JACKIE MILLIAN HISPANIC LIAISON	Hr/WK 1	0		
NORRIS MILLS ASST TREASURER	Hr/WK 2	0		
DON HERPIN BUSINESS DEVELOPMENT	Hr/WK 1	0		
	Hr/WK			
	Hr/WK			
	Hr/WK			

Part V **Other Information** (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V.) Check if the organization used Schedule O to respond to any question in this Part V . ☐

			Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O.	33		X
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O. See instructions	34		X
35a	Did the organization have unrelated business gross income of $1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		X
b	If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O.	35b		
c	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c		
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		X
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions. 37a			
b	Did the organization file **Form 1120-POL** for this year?	37b		
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee; **or** were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a		X
b	If "Yes," complete Schedule L, Part II, and enter the total amount involved 38b			
39	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on line 9 39a			
b	Gross receipts, included on line 9, for public use of club facilities 39b			
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ; section 4912 ; section 4955			
b	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		X
c	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization			
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T.	40e		X
41	List the states with which a copy of this return is filed:			
42a	The organization's books are in care of: MICHELE HERPIN Telephone no. 813-525-7434			
	Located at: 13562 AVISTA City TAMPA ST FL ZIP + 4 33624			
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	42b		X
c	At any time during the calendar year, did the organization maintain an office outside the United States? If "Yes," enter the name of the foreign country	42c		X
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of **Form 1041**—Check here ☐ and enter the amount of tax-exempt interest received or accrued during the tax year 43			
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a		X
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b		X
c	Did the organization receive any payments for indoor tanning services during the year?	44c		X
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	44d		
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		X
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ. See instructions.	45b		X

			Yes	No
46	Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I.	46		X

Part VI Section 501(c)(3) Organizations Only

All section 501(c)(3) organizations must answer questions 47–49b and 52, and complete the tables for lines 50 and 51.

Check if the organization used Schedule O to respond to any question in this Part VI ☐

			Yes	No
47	Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	47		X
48	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	48		X
49a	Did the organization make any transfers to an exempt non-charitable related organization?	49a		X
b	If "Yes," was the related organization a section 527 organization?	49b		

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees, and key employees) who each received more than $100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC/ 1099-NEC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
Name NONE Title	Hr/WK			
Name Title	Hr/WK			
Name Title	Hr/WK			
Name Title	Hr/WK			
Name Title	Hr/WK			

f Total number of other employees paid over $100,000

51 Complete this table for the organization's five highest compensated independent contractors who each received more than $100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and business address of each independent contractor	(b) Type of service	(c) Compensation
Name NONE Str City ST ZIP		
Name Str City ST ZIP		
Name Str City ST ZIP		
Name Str City ST ZIP		
Name Str City ST ZIP		

d Total number of other independent contractors each receiving over $100,000

52 Did the organization complete Schedule A? **Note:** All section 501(c)(3) organizations must attach a completed Schedule A ☒ **Yes** ☐ **No**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

Signature of officer — Date

Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
LESLIE N BACCHUS	LESLIE N BACCHUS			P00331306

Firm's name NEPHER INC — Firm's EIN 26-3581358

Firm's address 181 SUMMIT ASH WAY APOPKA FL 32703- — Phone no. 407-832-4116

May the IRS discuss this return with the preparer shown above? See instructions ☒ **Yes** ☐ **No**

```
PCL XL error
    Error:          IllegalOperatorSequence
    Operator:       BezierRelPath
    Position:       221321
```

ITEM 5.D
Fee Waiver Grants - Period II

Item Details
Fee Waiver Grants - Period II

- Kissimmee 5K
- Dine with the Departed
- March for Meals 5K
- Hop on Downtown
- Caribbean Fusion Festival

Attachment(s):
1. Fee Waiver Spreadsheet
2. Kissimmee 5K Binder Final
3. Dine with the Departed Binder Final
4. March for Meals Binder Final
5. Hop on Downtown Binder Final
6. CAFA Binder Final

2025/2026 Fee Grant Request
Period 2, Events occuring February 1 - May 31, 2026

EVENT	Requested Date	24/25 Amount	Requested Amount	Year of award / Sunset year	Est. City Expenses	AWARDED	Scored	Ed	Al	Robin	Hannan	David	Manny	Amarillis	Total
Kissimmee 5K	2/14/2026	$ 1,200.00	$ 3,000.00	4+	$7,118.00										
Dine with the Departed	3/7/2026	$378.00	$1,500.00	4+	$1,228.00										
March for Meals 5K	3/14/2026	$ 1,200.00	$ 3,000.00	4+	$7,118.00										
Hop on Downtown	4/4/2026	$ 1,800.00	$3,000.00	4+	$13,397.50										
Caribbean Fusion Festival	4/26/2026	PS $9,288	$3,000.00	Signature Event	$15,070.58										
					PS $9,427.08										
			$13,500		$43,932.08	$0.00									

PS: = Public Safety Cost

Total amount awarded for Period 2 February 1 - May 31, 2026 $0.00

FEE WAIVER GRANT RANKING FORM

Organization Name: Kissimmee Main Street
Event Name: Kissimmee 5K

Event Date: 2/14/2026 **Year of fee waiver award: 4+**

ORGANIZATION / EXPERIENCE	**50 POINTS**
Has the sponsoring organization previously produced events in Kissimmee? (20 points)	
Has this specific event been produced previously? (10 points)	
What is the uniqueness of the proposed event? (10 points)	
How does the proposed event support the organization's mission and benefit residents? (10 points)	
EVENT REVENUE / ECONOMIC IMPACT	**25 POINTS**
Will the proposed event impact local businesses? If so, please describe. (15 points)	
Evaluation of itemized event budget submitted by sponsoring organization. (10 points)	
MARKETING	**15 POINTS**
How does the proposed event benefit the image/reputation of the City? (5 points)	
Evaluation of the marketing plan, including types of advertisement and a timeline provided? (5 points)	
How much money will the sponsoring organization commit towards advertising? (5 points)	
COLLABORATION	**10 POINTS**
Is the sponsoring organization collaborating with any other non-profit group? (5 points)	
Has the sponsoring organization solicited local vendors to support the event? (5 points)	
Sub Total Points (Possible Score 100)	
POST EVENT EVALUATION For those sponsoring organizations that have previously received a fee waiver, did the organization meet all commitments and complete a Final Grant Report? • Was a final budget submitted? • Was a list of vendors submitted? • Were samples of marketing materials submitted?	**-5 /0/+5 POINTS**
TOTAL POINTS AWARDED	

Percentage of Maximum of Award

PARAB Score (Points)	Year 1	Year 2	Year 3	Year 4
90-100	100	80	60	40
80-89	90	70	50	30
70-79	80	60	40	20
60-69	70	50	30	10
50-59	60	40	20	
40-49	50	30	10	
30-39	40	20		
20-29	30	10		
10-19	20			
0-9	10			

FEE WAIVER GRANT RANKED BY: _____

Fee Waiver Amount Requested: $3,000 **Previous Year's Fee Waiver Award: $1,200**

Fee Waiver Grant Program

Submitted on	1 October 2025, 1:52PM
Receipt number	40
Related form version	7

Requesting Organization Information

Full Legal Name of Organization	Kissimmee Main Street
Name of Chief Officer/Present	Diana Marrero-Pinto
Telephone Number	4078464643
Mobile Number	4407148124
Street Address	421 Broadway
City	Kissimmee
State	Florida
Zip Code	34741
Eligibility/Type	Non-Profit
Upload your 501(c)(3) Certification (If Applicable)	501C3 _statefed.pdf

Event Information

Name of Event	Kissimmee 5K
Has the date and location of the event been confirmed?	Yes
Date of Event	02/14/2026
Start Time of Event	6am
End Time of Event	10am
Description of Event	Kissimmee 5K, an event we are incredibly proud to present as Kissimmee Main Street. This year marks our 18th anniversary of promoting heart-healthy awareness through a professionally organized and fun-filled run/walk.

The Kissimmee 5K is more than just a race; it's a community event that draws participants from around the globe. Last year, we welcomed runners from Puerto Rico, the UK, and Brazil, all eager to experience the scenic route through historic downtown Kissimmee. Our race is professionally timed using the ChronoTrack system, offering prizes for the top three male and female finishers across ten age categories. Many runners utilize our 5K as an excellent opportunity to pace themselves for larger marathons in the area, including those at Disney. Additionally, we incorporate unique and engaging elements with "super fun ancillary prizes" like "The Cutest Cupid" and "The Prettiest Pair," ensuring it's also a delightful fun run for everyone.

Starting at the beautiful Kissimmee Lakefront Park, our event features health-related vendors, aligning with our purpose to inspire more than just a day's activity. We aim to encourage individuals to make lifelong healthy changes and develop sustainable healthy habits. The day kicks off with a dynamic warm-up led by professional personal trainers and concludes with an energetic awards ceremony, all accompanied by a DJ providing lively music throughout. We believe in demonstrating that working out can indeed be a good time for all ages.

Furthermore, we strongly encourage both runners and spectators to extend their stay in downtown Kissimmee after the race. They can enjoy a warm breakfast at one of our many local mom-and-pop restaurants, which provides a significant economic boost for our cherished downtown businesses.

We are incredibly excited about this year's Kissimmee 5K and believe it will be our most successful yet in fostering health, community, and local economic growth.

Estimated Number of Attendees	600
Location of Event	Kissimmee Lakefront Park
Grant Request Amount	$3000
Is this event free and open to the public?	Yes

Event Contact

Contact Person	Diana Marrero-Pinto
Title of Contact Person	Executive Director
Contact Phone	4407148124
Contact Email	dmarreropinto@kissimmeemainstreet.org

Event Setup and Strike

Event Setup - Date	02/14/2026
Event Setup - Start Time	5:30 am
Event Strike - Date	02/14/2026

Event Strike - Time	10am

Event Logistics

Will your event require outdoor staging?	No
Will your event require tents?	Yes
Will your event require vehicle access to the park?	No
Will your event require road closures?	Yes
Will your event require portable restrooms?	No
Will your event require utilities?	Power
Will your event require the use of additional space?	None
Where will your event take place?	Outdoors
Will you have vendors at this event?	Yes

Fishing Tournament

Is the event a fishing tournament?	No
Will your event require a boat ramp?	
How many boats are expected to participate	
Will your event require space for a tournament draw?	
Will your event require space for a weigh-in?	

Entertainment

Will your event have performers?	No
Please describe the type of performers you will have at this event.	
Does your entertainer have special requirements and/or technical rider?	No
Will your event require a DJ?	Yes
Will your event require alcoholic beverages to be dispensed or sold?	No

Audio/Visual

What audio/visual needs do you have for your event?	None
Will you hire an outside production company for this event?	No

Promotions

How will you promote your event?	Kissimmee Main Street has started promoting early and create a strong online presence with a dedicated website and social media profiles. We are leveraging multiple channels, including email campaigns, local media, and physical flyers in community hubs like gyms and running clubs. Partner with local businesses, sponsors, and running groups to expand your reach and offer incentives to encourage early registration. Finally, engage with the community with interactive content and user-generated stories, and track your efforts to refine your strategy for future events.
At what level will your event be promoted?	Local Regional National
WIll the media be invited?	Yes
If the media will be invited, what type of media will be expected?	All media will be invited through a press release.
Facebook	https://www.facebook.com/share/1ACASU282Y/?mibextid=wwXIfr
Instagram	Kissimmee Main St
If you have one, please share your event web page	www.kissimmeemainstreet.org

Organisational Structure

How long has the sponsoring organization been incorporated?	Kissimmee Main Street has been incorporated for twenty-seven years.
How long has the sponsoring organization physically been in operation?	Kissimmee Main Street has been incorporated existing for twenty-eight years.
Please provide an organization chart of the Local Organizing Committee and describe how the sponsoring organization recruits volunteers to facilitate the event.	Kissimmee Main Street Board of Directors | Executive Director | Staff

Organization and Experience

Has the sponsoring organization previously produced an event in Kissimmee?	Yes
Has this specific event been previously produced?	Yes

Where and when has this event taken place previously?	The last Kissimmee 5K was held at Kissimmee Lakefront Park on Saturday, February 15 and hosted a record number of runners, 495.
What is the uniqueness of this proposed event?	The Kissimmee 5K holds the distinction of being the oldest race in the City of Kissimmee. Furthermore, it is the only professionally timed race available in the city. This particular feature makes the event especially attractive to professional runners and those dedicated to improving their race times, as it offers a precise and official record of their performance. We believe this unique aspect significantly enhances the experience for participants and contributes to the prestige of the event.
How does the proposed event support the organization's mission and impact to residents?	Beyond the race itself, this event impacts the community and its small businesses in several ways. The increased attendance brings new eyes to our beautiful Lakefront Park, as well as to the local shops and restaurants. With its heart health focus, the Kissimmee 5K also contributes to an overall healthier community.

Event Revenue & Economic Impact

How will your proposed event impact local businesses?	The positive economic impact of the Kissimmee Main Street's Kissimmee 5K on our local establishments can be seen and felt. Our recent surveys confirms that the event consistently provides a significant boost to Saturday morning sales for businesses in Historic Downtown Kissimmee. Through our targeted event marketing and promotional efforts, we actively encourage both runners and spectators to extend their stay in the downtown area after the race. We specifically highlight and recommend they enjoy the fresh-made, homestyle breakfast options offered by our wonderful locally owned and operated family-run restaurants. This initiative not only enhances the overall experience for our event participants but also directly contributes to the vitality and success of our cherished local businesses. We are committed to continuing these efforts to support the economic growth and community spirit of Historic Downtown Kissimmee.
Please attach you itemized event budget	K5K Event Budget 2024.pdf

Marketing

How does the proposed event benefit the image or reputation of the City?	I would like to provide some information about the upcoming Kissimmee 5K, which aims to promote Kissimmee as "The Big, Bold Heart of Florida." This slogan, often used by Experience Kissimmee, highlights the city's significant attractions, natural landscapes, and adventurous character. The Kissimmee 5K will further reinforce this image by guiding participants from the tranquil Kissimmee Lakefront Park through a scenic route showcasing our most historic homes. In line with the city's commitment to being "Open for Business," we also encourage runners and visitors to extend their stay after the race to experience the diverse offerings of downtown Kissimmee.
Please identify all forms of advertisement to be used and provide a timeline for all promotion and advertising.	We are excited to share our comprehensive marketing strategy for the upcoming event. Kissimmee Main Street plans to leverage our extensive social media reach to engage a wide online audience. In addition to our digital efforts, we will be utilizing strategically placed billboards throughout the community to maximize visibility. We will also

	be advertising on local radio shows and podcasts to reach an even broader audience. We are confident that this multi-channel approach will effectively promote the event and ensure a strong turnout.
How much money will the sponsoring organization commit towards advertising?	Kissimmee Main Street will contribute a total combined budget of $7,000 to market the 2026 Kissimmee 5k after receiving a grant of $6,000 from Experience Kissimmee.

Collaboration

Is the sponsoring organization collaborating with any other non-profit groups?	No
Please list all other non-profit groups you will be collaborating with for this event.	None at the time

2024 Kiss-Im Mee 5K

Event Budget for *2026 Kiss- Im Mee*: EXPENSES

Operational	Estimated	Actual
Laughing Rhino	$5,000.00	
City Fees	$9,000.00	
DJ	$500.00	
Bibs	$0.00	
Total	**$14,500.00**	**$0.00**

Decorations	Estimated	Actual
Table Clothes	$0.00	$0.00
Plates	$100.00	$0.00
Cups	$100.00	$0.00
	$0.00	$0.00
Napkins	$25.00	$0.00
Total	**$0.00**	**$0.00**

Design/Print	Estimated	Actual
Graphics work		
Printing		
Postage		
Total	**$0.00**	**$0.00**

Miscellaneous	Estimated	Actual
Photo Booth	$150.00	$0.00
Total	**$150.00**	**$0.00**

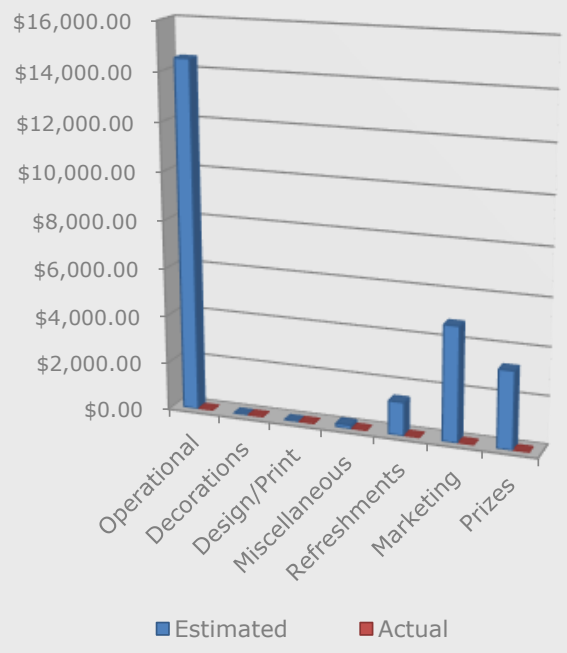
Refreshments	Estimated	Actual
Food	$700.00	
Fruit	$300.00	
Water	$150.00	$0.00
coffee	$250.00	
Total	**$1,400.00**	**$0.00**

Marketing	Estimated	Actual
T-Shirts	$4,000.00	
Swag Bags	$700.00	
Facebook Boost	$100.00	
Total	**$4,800.00**	**$0.00**

Prizes	Estimated	Actual
Ribbons/Plaques/Trophies	$3,000.00	
Prizes	$250.00	$0.00
Total	**$3,250.00**	**$0.00**

Total Expenses	Estimated	Actual
	$24,100.00	**$0.00**

Estimated vs. Actual



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Department of the Treasury
Internal Revenue Service
Tax Exempt and Government Entities
P.O. Box 2508
Cincinnati, OH 45201

KISSIMMEE MAIN STREET PROGRAM INC
421 BROADWAY AVE
KISSIMMEE, FL 34741

Date:
08/05/2020
Employer ID number:
20-1867527
Person to contact:
Name: Renee Railey Norton
ID number: 0203263
Telephone: (877) 829-5500
Accounting period ending:
September 30
Public charity status:
170(b)(1)(A)(vi)
Form 990 / 990-EZ / 990-N required:
Yes
Effective date of exemption:
February 2, 2017
Contribution deductibility:
Yes
Addendum applies:
No
DLN:
26053564004070

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 with your application, we approved your request for reinstatement under Revenue Procedure 2014-11. Your effective date of exemption, as listed at the top of this letter, is retroactive to your date of revocation.

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.

FLORIDA

Consumer's Certificate of Exemption

DR-14
R. 01/18

Issued Pursuant to Chapter 212, Florida Statutes

85-8013677049C-4	09/30/2021	09/30/2026	501(C)(3) ORGANIZATION
Certificate Number	Effective Date	Expiration Date	Exemption Category

This certifies that

KISSIMMEE MAIN STREET PROGRAM
INCORPORATED
421 BROADWAY
KISSIMMEE FL 34741-5719

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.

FLORIDA

Important Information for Exempt Organizations

DR-14
R. 01/18

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 about your exemption certificate, please call Taxpayer Services at 850-488-6800. The mailing address is PO Box 6480, Tallahassee, FL 32314-6480.

CITY OF KISSIMMEE 1883

Organization: Kissimmee Main Street | **Event Name: Kissimmee 5K** | **Event Date: Saturday, February 14th, 2026**

Administration Fee	**One time fee**		**Notes/Comments**	**Total**
	$100.00		**One time charge**	**$100.00**
Premises Rented:	**Associated fee**		**Notes/Comments**	**Total Premises rented**
Veterans Lawn	**$1,295.00**			$1,295.00
				$0.00
Rental Items:	**Associated Fee**		**Notes/Comments**	**Total Rental items**
Traffic Barricades	**$467.00**	1	Road Closure	$467.00
Light Tower	**$100.00**	1		$100.00
PortaLets	**$300.00**	1		$300.00
	$0.00	0		$0.00
	$0.00	0		$0.00
	$0.00	0		$0.00
	$0.00	0		$0.00
Non Taxed Rental Items:	**Associated Fee**		**Notes/Comments**	**Total Taxes:**
	$0.00	0		$0.00
	$0.00	0		$0.00
Taxes:	**Tax Rate**		**Notes/Comments**	**Total Taxes:**
	7.50%		Tax Exempt	$0.00
Staffing and Personnel Requirments:	**Hourly Rate**	**Count**	**Notes/Comments**	**Total for Staffing/Personnel (Non Taxable Fees)**
Event Monitor	$20.00	**12**	2 Event Monitors x 6 Hrs	$240.00
Facility Technician	$20.00	**6**	1 Facility Tech x 6 Hrs	$120.00
Fire Inspector	$64.77	**0**		$0.00
EMT (Emergency Medica l Technician)	$35.00	**8**	2 EMT x 4 Hrs	$280.00
Security	$30.00	**0**		$0.00
KPD	$62.00	**68**	17 KPD Positions x 4 Hrs	$4,216.00
Crowd Managers	$25.00	**0**		$0.00
			Notes/Comments	
Total Fee's and Charges:				**$7,118.00**
Damage Deposit			**20% of Facility Rental fee;Refundable; Additional Fee on Total Charges**	$259.00
Fee Waiver Amount (if applicable)			**Must apply via kissimmee.gov; only available to non profit organizations**	$0.00
Remaining Balance Due			**Due 30 days in advance of event date**	**$7,377.00**
Reservation Deposit			**Required at time of booking; Applied to total due; Non refundable Fee)**	$0.00

***Event Quote is subject to change based off of clients event needsand requests**

FEE WAIVER GRANT RANKING FORM

Organization Name: Osceola County Historical Society
Event Name: Dine with the Department

Event Date: 3/7/2026 **Year of fee waiver award: Year 5**

ORGANIZATION / EXPERIENCE	**50 POINTS**
Has the sponsoring organization previously produced events in Kissimmee? (20 points)	
Has this specific event been produced previously? (10 points)	
What is the uniqueness of the proposed event? (10 points)	
How does the proposed event support the organization's mission and benefit residents? (10 points)	
EVENT REVENUE / ECONOMIC IMPACT	**25 POINTS**
Will the proposed event impact local businesses? If so, please describe. (15 points)	
Evaluation of itemized event budget submitted by sponsoring organization. (10 points)	
MARKETING	**15 POINTS**
How does the proposed event benefit the image/reputation of the City? (5 points)	
Evaluation of the marketing plan, including types of advertisement and a timeline provided? (5 points)	
How much money will the sponsoring organization commit towards advertising? (5 points)	
COLLABORATION	**10 POINTS**
Is the sponsoring organization collaborating with any other non-profit group? (5 points)	
Has the sponsoring organization solicited local vendors to support the event? (5 points)	
Sub Total Points (Possible Score 100)	
POST EVENT EVALUATION For those sponsoring organizations that have previously received a fee waiver, did the organization meet all commitments and complete a Final Grant Report? • Was a final budget submitted? • Was a list of vendors submitted? • Were samples of marketing materials submitted?	**-5 /0/+5 POINTS**
TOTAL POINTS AWARDED	

Percentage of Maximum of Award

PARAB Score (Points)	Year 1	Year 2	Year 3	Year 4
90-100	100	80	60	40
80-89	90	70	50	30
70-79	80	60	40	20
60-69	70	50	30	10
50-59	60	40	20	
40-49	50	30	10	
30-39	40	20		
20-29	30	10		
10-19	20			
0-9	10			

FEE WAIVER GRANT RANKED BY: _____

Fee Waiver Amount Requested: $1,500 **Previous Year's Fee Waiver Award: $378**

Fee Waiver Grant Program

Submitted on	30 September 2025, 12:47PM
Receipt number	42
Related form version	7

Requesting Organization Information

Full Legal Name of Organization	OSCEOLA COUNTY HISTORICAL SOC.
Name of Chief Officer/Present	Dawn Snell
Telephone Number	4073968644
Mobile Number	(216) 215-6692
Street Address	4155 W. VINE STREET
City	KISSIMMEE
State	FL
Zip Code	34741
Eligibility/Type	Non-Profit
Upload your 501(c)(3) Certification (If Applicable)	IRS tax exempt letter.pdf

Event Information

Name of Event	Dine with the Departed
Has the date and location of the event been confirmed?	Yes
Date of Event	03/07/2026
Start Time of Event	6 pm
End Time of Event	9 pm
Description of Event	An evening outdoor fundraiser to help Osceola History's mission to collect, preserve, and share the County's history, promoting the area's cultural and natural heritage. Enjoy a catered meal and bid on unique items during both a silent and live auction. After dinner, venture out on

	guided lantern-lit tours where you will encounter Osceola County's "passed" residents with lively stories to share.
Estimated Number of Attendees	180
Location of Event	Rose Hill Cemetary
Grant Request Amount	$1500
Is this event free and open to the public?	Yes

Event Contact

Contact Person	Dawn Snell
Title of Contact Person	Executive Director
Contact Phone	2162156692
Contact Email	dawn@osceolahistory.org

Event Setup and Strike

Event Setup - Date	03/07/2026
Event Setup - Start Time	12 pm
Event Strike - Date	03/08/2026
Event Strike - Time	10 am

Event Logistics

Will your event require outdoor staging?	No
Will your event require tents?	Yes
Will your event require vehicle access to the park?	No
Will your event require road closures?	No
Will your event require portable restrooms?	Yes
Will your event require utilities?	Power Water
Will your event require the use of additional space?	None
Where will your event take place?	Outdoors

Will you have vendors at this event?	No

Fishing Tournament

Is the event a fishing tournament?	No
Will your event require a boat ramp?	
How many boats are expected to participate	
Will your event require space for a tournament draw?	
Will your event require space for a weigh-in?	

Entertainment

Will your event have performers?	Yes
Please describe the type of performers you will have at this event.	Violinist
Does your entertainer have special requirements and/or technical rider?	No
Will your event require a DJ?	No
Will your event require alcoholic beverages to be dispensed or sold?	Yes

Audio/Visual

What audio/visual needs do you have for your event?	Speakers, microphone
Will you hire an outside production company for this event?	Yes

Promotions

How will you promote your event?	Direct mail, email, social media, local newspapers
At what level will your event be promoted?	Local
WIll the media be invited?	No
If the media will be invited, what type of media will be expected?	
Facebook	osceolahistory
Instagram	osceolahistory

If you have one, please share your event web page	https://osceolahistory.org/dwd-permanent/

Organisational Structure

How long has the sponsoring organization been incorporated?	1949
How long has the sponsoring organization physically been in operation?	2012
Please provide an organization chart of the Local Organizing Committee and describe how the sponsoring organization recruits volunteers to facilitate the event.	Osceola History staff organize this event from the Executive Director to the Venue Manager, Curator, Marketing Manager and Education manager. The Education Manager also works with volunteers to recruit and train for this event through a volunteer website and we use past volunteers. We use volunteers for historical interpreters that we get through local theater programs or schools.

Organization and Experience

Has the sponsoring organization previously produced an event in Kissimmee?	Yes
Has this specific event been previously produced?	Yes
Where and when has this event taken place previously?	Every first Saturday in March at the Rose Hill Cemetary.
What is the uniqueness of this proposed event?	A cemetary is an unusual place to hold a nice dinner and fundraiser which people enjoy. We host at this location so we can highlight past residents and share their life stories with the community.
How does the proposed event support the organization's mission and impact to residents?	By sharing local history of the county and raising money to continue our efforts to preserve local history and artifacts.

Event Revenue & Economic Impact

How will your proposed event impact local businesses?	We use local businesses by using local caterers. We also look for sponsors to promote their logo on our print material and donations of gift baskets, gift cards for our silent auction which would promote local business.
Please attach you itemized event budget	Dine budget 2026.docx

Marketing

How does the proposed event benefit the image or reputation of the City?	It shines light on the true roots of the City, and the people who impacted it for what it is today.
Please identify all forms of advertisement to be used and provide a timeline for all promotion and advertising.	Postcards to Save the date would be sent out in December. Social Media posting will start early December. Promoting for sponsors would start in January. We would run local ads in January and February.
How much money will the sponsoring organization commit towards advertising?	$1,500

Collaboration

Is the sponsoring organization collaborating with any other non-profit groups?	No
Please list all other non-profit groups you will be collaborating with for this event.	

DINE WITH THE DEPARTED

MARCH 7, 2026

REVENUE	Projected	Actual
Tickets	$22,500.00	
Table sponsors		
Event sponsors	$15,000.00	
Fund a Need	$5,000	
Live Auction	$2,500	
Silent Auction	$8,000	
Raffle	$2,000.00	
Donations	$1,000.00	
TOTAL	$48,800.00	
EXPENSE		
Supplies (plates, lights, wrap, etc)	$750.00	
Printing (invites, signs, etc)	$200.00	
Postage	$135.00	
Catering $40 x 180	$7200.00	
Dessert	$300.00	
Tent, table, chair, etc. rental	$6897.00	
Luxe Flush	$1525.00	
Beverages and ice	$1000.00	
Volunteer food and drink	$400.00	
Music	$200	
Insurance	$1000.00	
Permits and city fees	$1270.00	
Truck rental	$150.00	
Sound system		
Advertising	$1500.00	
TOTAL	$24,277.00	

Internal Revenue Service
District Director

Department of the Treasury

C - 1130
ATLANTA, GA 30301

Date: JAN 29 1990

OSCEOLA COUNTY HISTORICAL
SOCIETY INC
P O BOX 552
KISSIMMEE, FL 34742

Employer Identification Number:
59-2713072
Contact Person:
VICKY BAKER
Contact Telephone Number:
(404) 331-0928

Accounting Period Ending:
05-31
Foundation Status Classification:
509(a)(1)
Advance Ruling Period Begins:
09-07-89
Advance Ruling Period Ends:
05-31-94
Addendum Applies:
No

Dear Applicant:

Based on information 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 be expected to be a publicly supported organization described in sections 509(a)(1) and 170(b)(1)(A)(vi).

Accordingly, you will be treated as a publicly supported organization, and not as a private foundation, during an advance ruling period. 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 submit to us 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, you will be classified 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, you will be classified as a private foundation for future periods. Also, if you are classified as a private foundation, you will be treated as a private foundation from the date of your inception for purposes of sections 507(d) and 4940.

Grantors and contributors may rely on the determination that you are not a private foundation until 90 days after the end of your advance ruling period. If you submit the required information within the 90 days, grantors and contributors may continue to rely on the advance determination until the Service makes a final determination of your foundation status.

Letter 1045(DO/CG)

OSCEOLA COUNTY HISTORICAL

If notice that you will no longer be treated as a publicly supported organization is published in the Internal Revenue Bulletin, grantors and contributors may not rely on this determination after the date of such publication. In addition, if you lose your status as a publicly supported organization and a grantor or contributor was responsible for, or was aware of, the act or failure to act, that resulted in your loss of such status, that person may not rely on this determination from the date of the act or failure to act. Also, if a grantor or contributor learned that the Service had given notice that you would be removed from classification as a publicly supported organization, then that person may not rely on this determination as of the date such knowledge was acquired.

If your sources of support, or your purposes, character, or method of operation change, please let us know so we can consider the effect of the change on your exempt status and foundation status. In the case of an amendment to your organizational document or bylaws, please send us a copy of the amended document or bylaws. Also, you should inform us of all changes in your name or address.

As of January 1, 1984, you are liable for taxes under the Federal Insurance Contributions Act (social security taxes) on remuneration of $100 or more you pay to each of your employees during a calendar year. You are not liable for the tax imposed under the Federal Unemployment Tax Act (FUTA).

Organizations that are not private foundations are not subject to the private foundation excise taxes under Chapter 42 of the Code. However, you are not automatically exempt from other Federal excise taxes. If you have any questions about excise, employment, or other Federal taxes, please let us know.

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.

Contribution deductions are allowable to donors only to the extent that their contributions are gifts, with no consideration received. Ticket purchases and similar payments in conjunction with fundraising events may not necessarily qualify as deductible contributions, depending on the circumstances. See Revenue Ruling 67-246, published in Cumulative Bulletin 1967-2, on page 104, which sets forth guidelines regarding the deductibility, as charitable contributions, of payments made by taxpayers for admission to or other participation in fundraising activities for charity.

You are required to file Form 990, Return of Organization Exempt From Income Tax, only if your gross receipts each year are normally more than $25,000. However, if you receive a Form 990 package in the mail, please file the return even if you do not exceed the gross receipts test. If you are not required to file, simply attach the label provided, check the box in the head-

ing to indicate that your annual gross receipts are normally $25,000 or less, and sign the return.

If a return is required, it must be filed by the 15th day of the fifth month after the end of your annual accounting period. A penalty of $10 a day is charged when a return is filed late, unless there is reasonable cause for the delay. However, the maximum penalty charged cannot exceed $5,000 or 5 percent of your gross receipts for the year, whichever is less. This penalty may also be charged if a return is not complete, so please be sure your return is complete before you file it.

You are not required to file Federal income tax returns unless you are subject to the tax on unrelated business income under section 511 of the Code. If you are subject to this tax, you must file an income tax return on Form 990-T, Exempt Organization Business Income Tax Return. In this letter we are not determining whether any of your present or proposed activities are unrelated trade or business as defined in section 513 of the Code.

You need an employer identification number even if you have no employees. If an employer identification number was not entered on your application, a number will be assigned to you and you will be advised of it. Please use that number on all returns you file and in all correspondence with the Internal Revenue Service.

Our records indicate that your notice was postmarked 09-07-89, which is more than 15 months from the end of the month in which you were organized. Since the provisions of section 508(a)(2) are applicable to you, the effective date of your exemption is 09-07-89. Contributions made to you on or after this date are tax deductible.

You may also seek relief from Federal income tax for the period prior to the effective date of this exemption by filing Form 1024, requesting recognition of exemption under section 501(c)(4) for that period. Contributions to organizations exempt under section 501(c)(4) are not deductible.

If you elect to file Form 1024, be sure to indicate that it is intended only to cover the period during which you could not qualify under section 501(c)(3) of the Code.

You have agreed on your application for exemption under section 501(c)(3) of the Code that your exemption is effective 09-07-89, the date your completed application was filed.

If we have indicated in the heading of this letter that an addendum applies, the addendum enclosed is an integral part of this letter.

Because this letter could help resolve any questions about your exempt status and foundation status, you should keep it in your permanent records.

OSCEOLA COUNTY HISTORICAL

If you have any questions, please contact the person whose name and telephone number are shown in the heading of this letter.

Sincerely yours,

Paul Williams
District Director

Enclosure(s):
Form 872-C

CITY OF KISSIMMEE 1883

Organization: Osceola Historical Society | **Event Name: Dine With The Departed** | **Event Date: March 2026**

Administration Fee	One time fee		Notes/Comments	Total
	$100.00		**One time charge**	**$100.00**
Premises Rented:	**Associated fee**		**Notes/Comments**	**Total Premises rented**
Rose Hill Cemetary	**$350.00**			$350.00
				$0.00
Rental Items:	**Associated Fee**		**Notes/Comments**	**Total Rental items**
Light Tower	**$150.00**	1	1 Light Tower x $150	$150.00
Barricades	**$25.00**	12	12 Barricades x $25	$300.00
Non Taxed Rental Items:	**Associated Fee**		**Notes/Comments**	**Total Taxes:**
	$0.00	0		$0.00
	$0.00	0		$0.00
Taxes:	**Tax Rate**		**Notes/Comments**	**Total Taxes:**
	7.50%			EXEMPT
Staffing and Personnel Requirments:	**Hourly Rate**	**Count**	**Notes/Comments**	**Total for Staffing/Personnel (Non Taxable Fees)**
Event Monitor	$20.00	**4**	1 Event Monitor x 4 hours	$80.00
KPD	$62.00	**4**	1 KPD Officers x 4 hours	$248.00
			Notes/Comments	
Total Fee's and Charges:				**$1,228.00**
Damage Deposit			**20% of Facility Rental fee;Refundable; Additional Fee on Total Charges**	$70.00
Fee Waiver Amount (if applicable)			**Must apply via kissimmee.gov; only available to non profit organizations**	$0.00
Remaining Balance Due			**Due 30 days in advance of event date**	**$1,048.00**
Reservation Deposit			**Required at time of booking; Applied to total due; Non refundable Fee)**	$250.00

***Event Quote is subject to change based off of clients event needsand requests**

FEE WAIVER GRANT RANKING FORM

Organization Name: Osceola Council on Aging
Event Name: March for Meals 5K

Event Date: 3/14/2025 **Year of fee waiver award: 4+**

ORGANIZATION / EXPERIENCE	**50 POINTS**
Has the sponsoring organization previously produced events in Kissimmee? (20 points)	
Has this specific event been produced previously? (10 points)	
What is the uniqueness of the proposed event? (10 points)	
How does the proposed event support the organization's mission and benefit residents? (10 points)	
EVENT REVENUE / ECONOMIC IMPACT	**25 POINTS**
Will the proposed event impact local businesses? If so, please describe. (15 points)	
Evaluation of itemized event budget submitted by sponsoring organization. (10 points)	
MARKETING	**15 POINTS**
How does the proposed event benefit the image/reputation of the City? (5 points)	
Evaluation of the marketing plan, including types of advertisement and a timeline provided? (5 points)	
How much money will the sponsoring organization commit towards advertising? (5 points)	
COLLABORATION	**10 POINTS**
Is the sponsoring organization collaborating with any other non-profit group? (5 points)	
Has the sponsoring organization solicited local vendors to support the event? (5 points)	
Sub Total Points (Possible Score 100)	
POST EVENT EVALUATION For those sponsoring organizations that have previously received a fee waiver, did the organization meet all commitments and complete a Final Grant Report? • Was a final budget submitted? • Was a list of vendors submitted? • Were samples of marketing materials submitted?	**-5 /0/+5 POINTS**
TOTAL POINTS AWARDED	

Percentage of Maximum of Award

PARAB Score (Points)	Year 1	Year 2	Year 3	Year 4
90-100	100	80	60	40
80-89	90	70	50	30
70-79	80	60	40	20
60-69	70	50	30	10
50-59	60	40	20	
40-49	50	30	10	
30-39	40	20		
20-29	30	10		
10-19	20			
0-9	10			

FEE WAIVER GRANT RANKED BY: _____

Fee Waiver Amount Requested: $3,000 **Previous Year's Fee Waiver Award: $1,200**

Fee Waiver Grant Program

Submitted on	2 October 2025, 10:12AM
Receipt number	45
Related form version	7

Requesting Organization Information

Full Legal Name of Organization	Osceola Council on Aging
Name of Chief Officer/Present	Wendy Ford
Telephone Number	407-846-8541
Mobile Number	407-383-0012
Street Address	700 Generation Point
City	Kissimmee
State	FL
Zip Code	34744
Eligibility/Type	Non-Profit
Upload your 501(c)(3) Certification (If Applicable)	OCCOA W-9 2024.pdf

Event Information

Name of Event	March for Meals St. Patrick's 5k Run & Walk
Has the date and location of the event been confirmed?	Yes
Date of Event	03/14/2026
Start Time of Event	8am
End Time of Event	11am
Description of Event	March for Meals St. Patrick's 5K Run/Walk is a fun run event to create awareness of senior hunger and to raise money for the Meals on Wheels program in Osceola County through the Osceola Council on Aging. It is a fun run with a clock, so you can catch your time at the finish line!
Estimated Number of Attendees	750
Location of Event	Kissimmee Lakefront Park
Grant Request Amount	$3000

Is this event free and open to the public?	No

Event Contact

Contact Person	Jacob Davis
Title of Contact Person	Owner - Southern Timing, LLC
Contact Phone	4072145595
Contact Email	jacob@southerntimingfl.com

Event Setup and Strike

Event Setup - Date	03/14/2026
Event Setup - Start Time	4:30am
Event Strike - Date	03/14/2026
Event Strike - Time	11am

Event Logistics

Will your event require outdoor staging?	No
Will your event require tents?	Yes
Will your event require vehicle access to the park?	Yes
Will your event require road closures?	Yes
Will your event require portable restrooms?	No
Will your event require utilities?	Power
Will your event require the use of additional space?	None
Where will your event take place?	Outdoors
Will you have vendors at this event?	Yes

Fishing Tournament

Is the event a fishing tournament?	No
Will your event require a boat ramp?	
How many boats are expected to participate	
Will your event require space for a tournament draw?	
Will your event require space for a weigh-in?	

Entertainment

Will your event have performers?	No
Please describe the type of performers you will have at this event.	
Does your entertainer have special requirements and/or technical rider?	No
Will your event require a DJ?	Yes
Will your event require alcoholic beverages to be dispensed or sold?	No

Audio/Visual

What audio/visual needs do you have for your event?	We will have speakers at the start & start line to play music and make announcements.
Will you hire an outside production company for this event?	Yes

Promotions

How will you promote your event?	Social media posts & ads, print marketing (postcards, posters etc), digital marketing (Google ads), radio ads, news station interviews, email marketing
At what level will your event be promoted?	Regional
Will the media be invited?	Yes
If the media will be invited, what type of media will be expected?	Local news
Facebook	https://www.facebook.com/OsceolaCouncilOnAging
Instagram	https://www.instagram.com/osceolacouncilonaging
If you have one, please share your event web page	https://runsignup.com/Race/FL/Kissimmee/MarchforMealsStPatricks5kRunWalkpresent

Organisational Structure

How long has the sponsoring organization been incorporated?	54
How long has the sponsoring organization physically been in operation?	54 years
Please provide an organization chart of the Local Organizing Committee and describe how the sponsoring organization recruits volunteers to facilitate the event.	Organization will utilize internal volunteers that participate in different programs to assist with the planning and production of this event

Organization and Experience

Has the sponsoring organization previously produced an event in Kissimmee?	Yes
Has this specific event been previously produced?	Yes
Where and when has this event taken place previously?	March, 2025

What is the uniqueness of this proposed event?	This is a chip timed 5K with a St. Patricks Day theme encouraging participants to dress in their best festive attire for the run
How does the proposed event support the organization's mission and impact to residents?	By raising the funds and awareness needed to continue the programs to benefit seniors in Osceola County & Kissimmee

Event Revenue & Economic Impact

How will your proposed event impact local businesses?	Local businesses will be invited to sponsor the race and showcase their services/products as vendors at the event
Please attach you itemized event budget	March for Meals Budget.xlsx

Marketing

How does the proposed event benefit the image or reputation of the City?	By bringing the community together to celebrate a local non-profit organization
Please identify all forms of advertisement to be used and provide a timeline for all promotion and advertising.	Social media will begin now through the end of the event, print will be handed out now until the end of the event, radio & news will be in the last 30 days before the event
How much money will the sponsoring organization commit towards advertising?	$500

Collaboration

Is the sponsoring organization collaborating with any other non-profit groups?	No
Please list all other non-profit groups you will be collaborating with for this event.	N/a

Expenses	
Expense	Amount
Permitting	$6,500.00
Police	$5,000.00
Light Towers	$150.00
Barricades	$500.00
Race Timing	$3,500.00
Race Management	$2,000.00
Shirts	$3,000.00
Medals	$2,500.00
Food/Drink	$200.00
Misc Event Supplies	$400.00
Revenue	
Registration Fees	$15,000.00
Sponsorship	$30,000.00
Grant	$3,000.00
Profit(Loss)	**$24,250.00**

Form **W-9**
(Rev. March 2024)
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.

Before you begin. For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

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

1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.)

Osceola County Council on Aging, Inc.

2 Business name/disregarded entity name, if different from above.

Osceola Council on Aging

3a Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only **one** of the following seven boxes.

☐ Individual/sole proprietor ☑ C corporation ☐ S corporation ☐ Partnership ☐ Trust/estate

☐ LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) _____

Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead 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) 501 c 3

Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any) _____

(Applies to accounts maintained outside the United States.)

3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions ☐

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

700 Generation Point

6 City, state, and ZIP code

Kissimmee, FL 34744

Requester's name and address (optional)

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. See also *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number

			–			–				

or

Employer identification number

5	9	–	1	5	9	5	3	9	8

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** 9/23/2024

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*.

What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they

CITY OF KISSIMMEE 1883

Organization: The Osceola Council on Aging **Event Name: March for Meals 5K** **Event Date: Saturday, March 14th, 2026**

Administration Fee	**One time fee**		**Notes/Comments**	**Total**
	$100.00		**One time charge**	**$100.00**
Premises Rented:	**Associated fee**		**Notes/Comments**	**Total Premises rented**
Veterans Lawn	**$1,295.00**			$1,295.00
				$0.00
Rental Items:	**Associated Fee**		**Notes/Comments**	**Total Rental items**
Traffic Barricades	**$467.00**	1	Road Closure	$467.00
Light Tower	**$100.00**	1		$100.00
PortaLets	**$300.00**	1		$300.00
	$0.00	0		$0.00
	$0.00	0		$0.00
	$0.00	0		$0.00
	$0.00	0		$0.00
Non Taxed Rental Items:	**Associated Fee**		**Notes/Comments**	**Total Taxes:**
	$0.00	0		$0.00
	$0.00	0		$0.00
Taxes:	**Tax Rate**		**Notes/Comments**	**Total Taxes:**
	7.50%		Tax Exempt	$0.00
Staffing and Personnel Requirments:	**Hourly Rate**	**Count**	**Notes/Comments**	**Total for Staffing/Personnel (Non Taxable Fees)**
Event Monitor	$20.00	**12**	2 Event Monitors x 6 Hrs	$240.00
Facility Technician	$20.00	**6**	1 Facility Tech x 6 Hrs	$120.00
Fire Inspector	$64.77	**0**		$0.00
EMT (Emergency Medica l Technician)	$35.00	**8**	2 EMT x 4 Hrs	$280.00
Security	$30.00	**0**		$0.00
KPD	$62.00	**68**	17 KPD Positions x 4 Hrs	$4,216.00
Crowd Managers	$25.00	**0**		$0.00
			Notes/Comments	
Total Fee's and Charges:				**$7,118.00**
Damage Deposit			**20% of Facility Rental fee;Refundable; Additional Fee on Total Charges**	$259.00
Fee Waiver Amount (if applicable)			**Must apply via kissimmee.gov; only available to non profit organizations**	$0.00
Remaining Balance Due			**Due 30 days in advance of event date**	**$7,377.00**
Reservation Deposit			**Required at time of booking; Applied to total due; Non refundable Fee)**	$0.00

***Event Quote is subject to change based off of clients event needsand requests**

FEE WAIVER GRANT RANKING FORM

Organization Name: Kissimmee Main Street
Event Name: Hop on Downtown

Event Date: 4/4/2026 **Year of fee waiver award: 4+**

ORGANIZATION / EXPERIENCE	**50 POINTS**
Has the sponsoring organization previously produced events in Kissimmee? (20 points)	
Has this specific event been produced previously? (10 points)	
What is the uniqueness of the proposed event? (10 points)	
How does the proposed event support the organization's mission and benefit residents? (10 points)	
EVENT REVENUE / ECONOMIC IMPACT	**25 POINTS**
Will the proposed event impact local businesses? If so, please describe. (15 points)	
Evaluation of itemized event budget submitted by sponsoring organization. (10 points)	
MARKETING	**15 POINTS**
How does the proposed event benefit the image/reputation of the City? (5 points)	
Evaluation of the marketing plan, including types of advertisement and a timeline provided? (5 points)	
How much money will the sponsoring organization commit towards advertising? (5 points)	
COLLABORATION	**10 POINTS**
Is the sponsoring organization collaborating with any other non-profit group? (5 points)	
Has the sponsoring organization solicited local vendors to support the event? (5 points)	
Sub Total Points (Possible Score 100)	
POST EVENT EVALUATION For those sponsoring organizations that have previously received a fee waiver, did the organization meet all commitments and complete a Final Grant Report? • Was a final budget submitted? • Was a list of vendors submitted? • Were samples of marketing materials submitted?	**-5 /0/+5 POINTS**
TOTAL POINTS AWARDED	

Percentage of Maximum of Award

PARAB Score (Points)	Year 1	Year 2	Year 3	Year 4
90-100	100	80	60	40
80-89	90	70	50	30
70-79	80	60	40	20
60-69	70	50	30	10
50-59	60	40	20	
40-49	50	30	10	
30-39	40	20		
20-29	30	10		
10-19	20			
0-9	10			

FEE WAIVER GRANT RANKED BY: _____

Fee Waiver Amount Requested: $3,000 **Previous Year's Fee Waiver Award: $1,800**

Fee Waiver Grant Program

Submitted on	2 October 2025, 9:36AM
Receipt number	41
Related form version	7

Requesting Organization Information

Full Legal Name of Organization	Kissimmee Main Street Program, Inc.
Name of Chief Officer/Present	Lance Soencer
Telephone Number	4078464643
Mobile Number	4407148124
Street Address	421 Broadway
City	Kissimmee
State	Florida
Zip Code	34741
Eligibility/Type	Non-Profit
Upload your 501(c)(3) Certification (If Applicable)	IMG_8842.jpeg

Event Information

Name of Event	Hop on Downtown
Has the date and location of the event been confirmed?	Yes
Date of Event	04/04/2026
Start Time of Event	11am
End Time of Event	3pm
Description of Event	We are thrilled to announce Kissimmee Main Street's signature event, "Hop on Downtown," Osceola County's largest Spring celebration! This free, family-friendly event will be held on Saturday, April 4, 2026, right here in downtown Kissimmee.

	"Hop on Downtown" promises a day filled with festive activities for all ages, including live uplifting music, the popular Jelly Bean Hop, engaging scavenger hunts, a children's karaoke contest, and a grand Easter Egg Hunt generously provided by the City of Kissimmee. Of course, no Easter celebration would be complete without the opportunity to take pictures with the Easter Bunny himself! Additionally, a variety of vendors and spring-themed activities will add to the fun and excitement.
Estimated Number of Attendees	5,000
Location of Event	Broadway
Grant Request Amount	$3,000
Is this event free and open to the public?	Yes

Event Contact

Contact Person	Diana Marrero-Pinto
Title of Contact Person	Executive Director
Contact Phone	4407148124
Contact Email	dmarreropinto@kissimmeemainstreet.org

Event Setup and Strike

Event Setup - Date	04/04/2026
Event Setup - Start Time	9 am
Event Strike - Date	04/04/2026
Event Strike - Time	3pm

Event Logistics

Will your event require outdoor staging?	Yes
Will your event require tents?	Yes
Will your event require vehicle access to the park?	No
Will your event require road closures?	Yes
Will your event require portable restrooms?	Yes
Will your event require utilities?	Power

Will your event require the use of additional space?	None
Where will your event take place?	Outdoors
Will you have vendors at this event?	Yes

Fishing Tournament

Is the event a fishing tournament?	No
Will your event require a boat ramp?	
How many boats are expected to participate	
Will your event require space for a tournament draw?	
Will your event require space for a weigh-in?	

Entertainment

Will your event have performers?	Yes
Please describe the type of performers you will have at this event.	Kissimmee Main Street will have a dj along with performance by faith based artist including but not limited to, Joyful Noise.
Does your entertainer have special requirements and/or technical rider?	No
Will your event require a DJ?	Yes
Will your event require alcoholic beverages to be dispensed or sold?	No

Audio/Visual

What audio/visual needs do you have for your event?	Kissimmee Main Street will employ a professional soundman for the artist.
Will you hire an outside production company for this event?	Yes

Promotions

How will you promote your event?	Kissimmee Main Street will utilize our strong social media reach, strategically placed billboards, and local radio show and podcast to advertise the event.
At what level will your event be promoted?	Local Regional National

Will the media be invited?	Yes
If the media will be invited, what type of media will be expected?	Kissimmee Main Street will invite local media and social media influencers to the event.
Facebook	Kissimmee Main Street
Instagram	Kissimmee Main St
If you have one, please share your event web page	www.kissimmeemainstreet.org

Organisational Structure

How long has the sponsoring organization been incorporated?	Kissimmee Main Street was established on August 19, 1997.
How long has the sponsoring organization physically been in operation?	Kissimmee Main Street has been in operation since 1996.
Please provide an organization chart of the Local Organizing Committee and describe how the sponsoring organization recruits volunteers to facilitate the event.	Board of Directors | Executive Director | Staff - Volunteers

Organization and Experience

Has the sponsoring organization previously produced an event in Kissimmee?	Yes
Has this specific event been previously produced?	Yes
Where and when has this event taken place previously?	Hop on Downtown was last held in April 2025.
What is the uniqueness of this proposed event?	Kissimmee Main Street operates with the core belief that "Kissimmee Should Have Something for Everyone." In line with this stance, we are proud to host "Hop on Downtown," our largest event specifically designed to attract the faith-based community in Kissimmee. While "Hop on Downtown" is open and welcoming to all members of our community, we have thoughtfully incorporated elements such as positive music and a variety of faith-based vendors. This creates a unique and special environment for those who have historically felt underserved by local community events. By integrating these new additions with popular existing attractions like the Easter Bunny and traditional egg hunts, we believe we have crafted a truly unique and inclusive event experience for everyone to enjoy. We are excited about the positive impact "Hop on Downtown" has on fostering a sense of belonging and celebration within our diverse community.
How does the proposed event support the organization's mission and impact to residents?	Kissimmee Main Street's mission is to, "preserve and promote Historic Downtown Kissimmee for the enjoyment and enrichment of current and future generations". There is no way better way to achieve that than by creating an event of this caliber for all ages to enjoy.

Event Revenue & Economic Impact

How will your proposed event impact local businesses?	Kissimmee Main Street historically sees an increase in sales at all our events, this event has proven through surveys to be no less of a positive financial impact to our small businesses.
Please attach you itemized event budget	Hop on Downtown 2026.pdf

Marketing

How does the proposed event benefit the image or reputation of the City?	The City of Kissimmee partners with Hop on Downtown as an event that assist businesses, is inviting, safe, and entertaining for the entire family, and an overall positive impression on the city.
Please identify all forms of advertisement to be used and provide a timeline for all promotion and advertising.	Kissimmee Main Street will utilize our strong social media presence to promote Hop on Downtown, alongside local media outlets.
How much money will the sponsoring organization commit towards advertising?	Kissimmee Main Street will budget $1,000 for social media boost.

Collaboration

Is the sponsoring organization collaborating with any other non-profit groups?	Yes
Please list all other non-profit groups you will be collaborating with for this event.	Kissimmee Utility Authority and Toho Water are long standing partners of Hop on Downtown and local churches and nonprofits are vendors and collaborators.

2026 Hop on Downtown

Event Budget for *2026 Hop on Downtown* : EXPENSES

Operational	Estimated	Actual
Entertainment	$5,000.00	
City Street Closure Fee	$12,000.00	
DJ	$500.00	
Stage	$7,000.00	
Total	**$24,500.00**	**$0.00**

Games/Attractions	Estimated	Actual
Bubbles	$100.00	$0.00
Flowers	$250.00	$0.00
Family Games	$500.00	$0.00
Esater Bunny	$300.00	$0.00
		$0.00
Total	**$0.00**	**$0.00**

Design/Print	Estimated	Actual
Graphics work	$250.00	
Printing	$300.00	
Postage		
Total	**$550.00**	**$0.00**

Miscellaneous	Estimated	Actual
Photo Booth	$300.00	$0.00
tshirts	$500.00	
Total	**$800.00**	**$0.00**

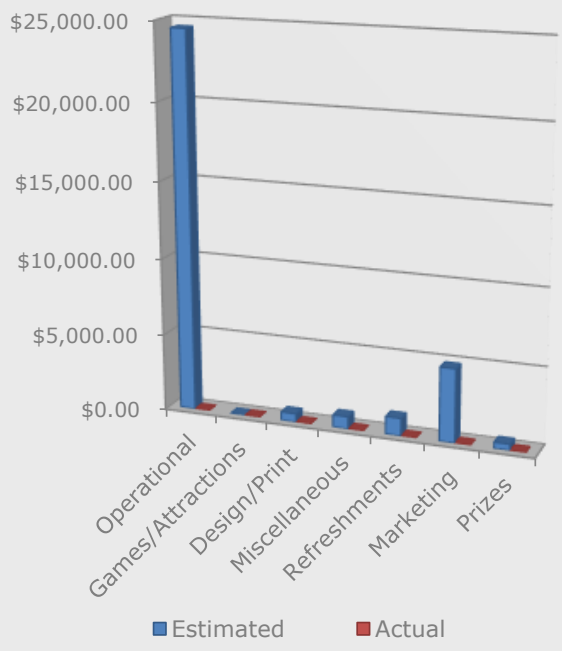
Refreshments	Estimated	Actual
Food	$700.00	
Snacks	$300.00	
Water	$150.00	$0.00
Total	**$1,150.00**	**$0.00**

Marketing	Estimated	Actual
T-Shirts	$4,000.00	
Swag Bags	$700.00	
Facebook Boost	$100.00	
Total	**$4,800.00**	**$0.00**

Prizes	Estimated	Actual
Prizes (Karaoke)	$400.00	
		$0.00
Total	**$400.00**	**$0.00**

Total Expenses	Estimated	Actual
	$32,200.00	**$0.00**

Estimated vs. Actual



Made in Office 2007 for office2007.com

Department of the Treasury
Internal Revenue Service
Tax Exempt and Government Entities
P.O. Box 2508
Cincinnati, OH 45201

KISSIMMEE MAIN STREET PROGRAM INC
421 BROADWAY AVE
KISSIMMEE, FL 34741

Date:
08/05/2020
Employer ID number:
20-1867527
Person to contact:
Name: Renee Railey Norton
ID number: 0203263
Telephone: (877) 829-5500
Accounting period ending:
September 30
Public charity status:
170(b)(1)(A)(vi)
Form 990 / 990-EZ / 990-N required:
Yes
Effective date of exemption:
February 2, 2017
Contribution deductibility:
Yes
Addendum applies:
No
DLN:
26053564004070

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 with your application, we approved your request for reinstatement under Revenue Procedure 2014-11. Your effective date of exemption, as listed at the top of this letter, is retroactive to your date of revocation.

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.

Letter 947 (Rev. 2-2020)
Catalog Number 35152P

CITY OF KISSIMMEE 1883

Organization: Kissimmee Main Street | **Event Name: Hop on Downtown** | **Event Date: April 2026**

Administration Fee	**One time fee**		**Notes/Comments**	**Total**
	$100.00		**One time charge**	**$100.00**
Premises Rented:	**Associated fee**		**Notes/Comments**	**Total Premises rented**
	$0.00			$0.00
Rental Items:	**Associated Fee**		**Notes/Comments**	**Total Rental items**
Traffic Barricades (type II)	**$1.00**	40		$40.00
Traffic Barricades (type III)	**$2.00**	15		$30.00
Crowd Control Barricades	**$10.00**	30		$300.00
Portalets	**$415.00**	3	3 locations (2reg, 1ada, 1sink)	$1,246.50
Non Taxed Rental Items:	**Associated Fee**		**Notes/Comments**	**Total Taxes:**
	$0.00	0		$0.00
	$0.00	0		$0.00
Taxes:	**Tax Rate**		**Notes/Comments**	**Total Taxes:**
	0.00%		Tax Exempt	$0.00
Staffing and Personnel Requirments:	**Hourly Rate**	**Count**	**Notes/Comments**	**Total for Staffing/Personnel (Non Taxable Fees)**
Event Monitor/Crowd Control	$20.00	**42**	6 Staff- 7hrs	$840.00
EMT (Emergency Medica l Technician)	$35.00	**16**	4 EMT's - 4hrs	$560.00
KPD Officers	$62.00	**126**	18 officers x 7hrs	$7,812.00
KPD Supervisors	$67.00	**14**	2 Officers x 7hrs	$938.00
KPD Lt.	$67.00	**7**	1 Officer x 7hrs	$469.00
Public Works	$31.00	**18**	Traffic & Streets	$558.00
Security	$28.00	**18**	6 Security 11am-2	$504.00
			Notes/Comments	
Total Fee's and Charges:				**$13,397.50**
Damage Deposit			**20% of Facility Rental fee;Refundable; Additional Fee on Total Charges**	$500.00
Fee Waiver Amount (if applicable)			**Must apply via kissimmee.gov; only available to non profit organizations**	
Remaining Balance Due			**Due 30 days in advance of event date**	**$13,897.50**
Reservation Deposit			**Required at time of booking; Applied to total due; Non refundable Fee)**	$500.00

***Event Quote is subject to change based off of clients event needsand requests**

FEE WAIVER GRANT RANKING FORM

Organization Name: Caribbean and Floridian Association
Event Name: Caribbean Fusion Festival

Event Date: 4/26/2026 **Year of fee waiver award: Signature Event**

ORGANIZATION / EXPERIENCE	**50 POINTS**
Has the sponsoring organization previously produced events in Kissimmee? (20 points)	
Has this specific event been produced previously? (10 points)	
What is the uniqueness of the proposed event? (10 points)	
How does the proposed event support the organization's mission and benefit residents? (10 points)	
EVENT REVENUE / ECONOMIC IMPACT	**25 POINTS**
Will the proposed event impact local businesses? If so, please describe. (15 points)	
Evaluation of itemized event budget submitted by sponsoring organization. (10 points)	
MARKETING	**15 POINTS**
How does the proposed event benefit the image/reputation of the City? (5 points)	
Evaluation of the marketing plan, including types of advertisement and a timeline provided? (5 points)	
How much money will the sponsoring organization commit towards advertising? (5 points)	
COLLABORATION	**10 POINTS**
Is the sponsoring organization collaborating with any other non-profit group? (5 points)	
Has the sponsoring organization solicited local vendors to support the event? (5 points)	
Sub Total Points (Possible Score 100)	
POST EVENT EVALUATION For those sponsoring organizations that have previously received a fee waiver, did the organization meet all commitments and complete a Final Grant Report? • Was a final budget submitted? • Was a list of vendors submitted? • Were samples of marketing materials submitted?	**-5 /0/+5 POINTS**
TOTAL POINTS AWARDED	

Percentage of Maximum of Award

PARAB Score (Points)	Year 1	Year 2	Year 3	Year 4
90-100	100	80	60	40
80-89	90	70	50	30
70-79	80	60	40	20
60-69	70	50	30	10
50-59	60	40	20	
40-49	50	30	10	
30-39	40	20		
20-29	30	10		
10-19	20			
0-9	10			

FEE WAIVER GRANT RANKED BY: _____

Fee Waiver Amount Requested: $3,000 **Previous Year's Fee Waiver Award: $9,288**

PS: $9,427.08

Fee Waiver Grant Program

Submitted on	1 October 2025, 10:53AM
Receipt number	43
Related form version	7

Requesting Organization Information

Full Legal Name of Organization	Caribbean And Floridian Association, Inc. (CAFA)
Name of Chief Officer/Present	Arnold King
Telephone Number	407-694-7497
Mobile Number	407-694-7497
Street Address	12467 Beacontree Way
City	Orlando
State	Florida
Zip Code	32837
Eligibility/Type	Non-Profit
Upload your 501(c)(3) Certification (If Applicable)	CAFA Tax Exempt Certificate.pdf

Event Information

Name of Event	Caribbean Fusion Festival
Has the date and location of the event been confirmed?	Yes
Date of Event	04/26/2026
Start Time of Event	12 noon
End Time of Event	7 pm
Description of Event	Caribbean Fusion Festival, is the largest free of it's kind in Osceola County. It brings together an unforgettable experience of music, folklore, and mouthwatering cuisine that will transport you to the heart of our diverse cultures. Experience the vibrant celebration of

	Caribbean/American culture at the 2026 Caribbean Fusion Festival, happening Sunday, April 26th, 2026, from 12 to 7 PM at Kissimmee's Lakefront Park
Estimated Number of Attendees	10,000
Location of Event	Veteran's Lawn-Lakefront Park, Kissimmee
Grant Request Amount	$10,000
Is this event free and open to the public?	Yes

Event Contact

Contact Person	Donna Cadogan
Title of Contact Person	Coordinator
Contact Phone	407-257-0283
Contact Email	cody2357c@aol.com

Event Setup and Strike

Event Setup - Date	04/26/2026
Event Setup - Start Time	8 am
Event Strike - Date	04/26/2026
Event Strike - Time	9 pm

Event Logistics

Will your event require outdoor staging?	Yes
Will your event require tents?	Yes
Will your event require vehicle access to the park?	Yes
Will your event require road closures?	No
Will your event require portable restrooms?	Yes
Will your event require utilities?	Power Water
Will your event require the use of additional space?	None
Where will your event take place?	Outdoors

Will you have vendors at this event?	Yes

Fishing Tournament

Is the event a fishing tournament?	No
Will your event require a boat ramp?	
How many boats are expected to participate	
Will your event require space for a tournament draw?	
Will your event require space for a weigh-in?	

Entertainment

Will your event have performers?	Yes
Please describe the type of performers you will have at this event.	Musicians, Dancers, DJ's, Singers,
Does your entertainer have special requirements and/or technical rider?	Yes
Will your event require a DJ?	No
Will your event require alcoholic beverages to be dispensed or sold?	Yes

Audio/Visual

What audio/visual needs do you have for your event?	Power onstage
Will you hire an outside production company for this event?	Yes

Promotions

How will you promote your event?	Flyers, social media, billboards, newspapers, news bulletins, radio, TV, Street signs, etc,
At what level will your event be promoted?	Local Regional National
WIll the media be invited?	Yes
If the media will be invited, what type of media will be expected?	Radio, TV, Social Influencers, Newspapers, Video, etc.

Facebook	https://www.facebook.com/CAFAFusionFestival/
Instagram	
If you have one, please share your event web page	https://cafainc.org/fusion/

Organisational Structure

How long has the sponsoring organization been incorporated?	1991
How long has the sponsoring organization physically been in operation?	1990
Please provide an organization chart of the Local Organizing Committee and describe how the sponsoring organization recruits volunteers to facilitate the event.	Arnold King-President Casmore Shaw-Vice-President Shelley Briggs-Recording Secretary Cheryl Reid-Payne-Corresponding Secretary Nicole Reid-Treasurer Penny Phipps-Asst. Treasurer Donna Cadogan-Fusion Coordinator Additionally, CAFA Member Volunteers: 1. Noel Cadogan 2. Mike Randolph 3. Pearl Williams 4. Urla King 5. Veronica Murrell 6. Jerome Chisolm 7. Andrew Browne 8. Junie Monroe 9. Lloyd Phillips 10. Malcolm Kirwan 11. Jada Murray 12. Colwin Rigby 13. Andre Hardrick 14. Althea Lee 15. Frank Ambroise 16. Reynold Baptiste 17. Arthur Braddy 18. Dennis Briggs 19. Al Clarke 20. Pauline Clarke 21. Marilyn Dias 22. Margaret Etkins 23. Ann Fraser 24. Eslyn Fung 25. Ramona Martin 26. Leroy Parker 27. Joan Randolph 28. Janet Sam 29. Christina Joseph 30. Maitlan Sampson 31. Ann Sylvester 32. Colin Telford 33. Leroy Thomas 34. Veronique Waterman 35. Wendel Wilkie Plus, we acquire volunteers from our sister NGO's: Trinbago Association of Central Florida, Solid Rock Community Church, Barbados Association, and others.

Organization and Experience

Has the sponsoring organization previously produced an event in Kissimmee?	Yes
Has this specific event been previously produced?	Yes
Where and when has this event taken place previously?	Lakefront Park, Kissimmee April 27, 2025
What is the uniqueness of this proposed event?	This Spring Festival is a tribute to the rich tapestry of the City of Kissimmee/Osceola County's and the immediate Central Florida community, showcasing the colorful melding of African, Indian, Asian, European, and Hispanic influences that define Caribbean culture.
How does the proposed event support the organization's mission and impact to residents?	CAFA, a dedicated 501(c)(3) non-profit organization, proudly brings this spectacular event to life with the support of sponsors and vendors, celebrating the spirit of unity and cultural richness. We extend an invitation to businesses and community partners to join us in creating this festival. Whether you're looking to sponsor or host a booth, your contribution will help ignite the magic of the Caribbean Fusion Festival. Surplus funds realized from this event is immediately converted to our Annual Scholarship Fund which saw us awarding in excess of $8,000 to 5 deserving graduating High School students, September 27, 2025. It also supports our Annual Turkey Drive (last year we giveaway 500 turkeys/meals to residents of Kissimmee. We also host senior events (wellness, etc.)

Event Revenue & Economic Impact

How will your proposed event impact local businesses?	By increasing foot traffic and customer spending, leading to higher sales and greater brand visibility. The event also fosters community connections, develop loyal customer relationships, and provide a platform for local businesses to showcase their products and services to a broader audience
Please attach you itemized event budget	CAFA-Fusion Festival 2026-Budget-City of Kissimmee.xlsx

Marketing

How does the proposed event benefit the image or reputation of the City?	The festival showcases the vibrant cultures of the Caribbean—including music, dance, cuisine, and crafts—highlighting Kissimmee as a city that embraces multiculturalism and celebrates diversity. This fosters a welcoming image for both residents and visitors. By bringing together thousands of attendees from various backgrounds, the event promotes community cohesion and pride. Families, neighbors, and visitors gather to enjoy shared experiences, reinforcing Kissimmee's reputation as a community-oriented city. [Caribbean...the Senses] With over 75 vendors and exhibitors participating, the festival stimulates local business activity and attracts tourists, which benefits the city's economy. The involvement of organizations like Experience Kissimmee also positions the city as a destination for cultural tourism. The festival receives coverage from local media outlets and community platforms, showcasing Kissimmee in a positive light. This visibility helps build a favorable public image and encourages future investment and participation. The event is organized by the Caribbean and Floridian Association, Inc. (CAFA), a nonprofit that supports educational and charitable initiatives. Kissimmee's support for such events reflects its

	commitment to civic engagement and social responsibility.
Please identify all forms of advertisement to be used and provide a timeline for all promotion and advertising.	Digital & Online Media Social Media Campaigns Platforms: Facebook, Instagram, TikTok, X (Twitter), YouTube Content: Countdown posts, artist spotlights, behind-the-scenes, giveaways, reels/stories. Email Marketing Newsletters to CAFA members, past attendees, and partner organizations. Event Listing Websites Sites like Eventbrite, Visit Orlando, and local community calendars. Online Ads Google Ads, Facebook Ads, Instagram Ads (geo-targeted and interest-based) Festival Website Updates Dedicated landing page with event details, ticket info, and sponsor highlights Traditional Media Radio Advertising Caribbean and urban stations (e.g., WOKB, 104.5 The Beat) TV Spots Local stations and community access channels Print Media Flyers, posters, and banners in local businesses, churches, and community centers Ads in Caribbean-focused publications and local newspapers Billboards & Transit Ads Strategic placements near high-traffic areas and public transportation routes Community Engagement Press Releases & Media Outreach Sent to local news outlets and Caribbean media networks Partnerships & Cross-Promotion Collaborations with local businesses, influencers, and cultural organizations Street Teams & Pop-Up Promotions Appearances at local events, farmers markets, and college campuses October – December 2025 Finalize branding and theme Begin teaser posts on social media Secure media partners and sponsors Launch festival website updates January – February 2026 Announce date and location Start email marketing and press outreach Begin social media countdown and artist reveals March - April 2026 Launch full advertising campaign (radio, print, digital) Distribute flyers and posters Begin influencer and partner promotions Run contests and giveaways
How much money will the sponsoring organization commit towards advertising?	$25,000

Collaboration

Is the sponsoring organization collaborating with any other non-profit groups?	Yes
Please list all other non-profit groups you will be collaborating	TTAC, BECC, JCC

with for this event.

Caribbean Fusion Festival 2026					
Proposed Event Budget					
Proposed Income:					**Amount**
Sponsorships					9,975.00
Experience Kissimmee-Ad Sponsorship					25,000.00
CAFA-Beer & Wine Bar Sales/Concession					5,500.00
Licensing/Insurance					525.00
Vendor Booth Sales					15,750.00
Total Income:					**56,750.00**
Expenses:					
Advertising & Promotions					25,000.00
Tent Rentals					7,075.00
Stage Rental					2,625.00
Talent/Entertainment					14,700.00
CAFA-Beer & Wine Bar Sales/Concession					2,100.00
Ground/Security/Administrative/Misc. etc.					5,250.00
Total Expenses:					**56,750.00**

FLORIDA Department of Revenue

Consumer's Certificate of Exemption

Issued Pursuant to Chapter 212, Florida Statutes

DR-14
R. 01/18

Certificate Number	Effective Date	Expiration Date	Exemption Category
85-8012645776C-3	06/30/2022	06/30/2027	501(C)(3) ORGANIZATION

This certifies that

CARIBBEAN AND FLORIDIAN ASSOCIATION INC
12467 BEACONTREE WAY
ORLANDO FL 32837-6304

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.

FLORIDA Department of Revenue

Important Information for Exempt Organizations

DR-14
R. 01/18

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 about your exemption certificate, please call Taxpayer Services at 850-488-6800. The mailing address is PO Box 6480, Tallahassee, FL 32314-6480.

CITY OF KISSIMMEE 1883

Organization: CAFA **Event Name: Carribbean Fusion Festival** **Event Date: 04/26/2026**

Administration Fee	**One time fee**		**Notes/Comments**	**Total**
	$100.00		**One time charge**	**$100.00**
Premises Rented:	**Associated fee**		**Notes/Comments**	**Total Premises rented**
Veterans Lawn	**$1,295.00**		1 Day Rental x $1295.00	$1,295.00
Hawk / Osprey Pavilion - included	**$0.00**		Pavilions included with Lawn	$0.00
Rental Items:	**Associated Fee**		**Notes/Comments**	**Total Rental items**
Portalets	**Market Rate**	0	2 ADA ($118 each), 5 Regular ($82.50 each), 2 Hand wash sinks ($80 each) + Delivery and Cleaning fees	$1,048.50
Picnic Tables	**$15.00**	8	8 Picnic Tables x $15	$120.00
Barricades	**$10.00**	30	30 Barricades x $10	$300.00
	$0.00	0		$0.00
	$0.00	0		$0.00
	$0.00	0		$0.00
Non Taxed Rental Items:	**Associated Fee**		**Notes/Comments**	**Total Taxes:**
	$0.00	0		$0.00
	$0.00	0		$0.00
Taxes:	**Tax Rate**		**Notes/Comments**	**Total Taxes:**
	7.50%		Tax Exempt	$0.00
Staffing and Personnel Requirments:	**Hourly Rate**	**Count**	**Notes/Comments**	**Total for Staffing/Personnel (Non Taxable Fees)**
Event Monitor	$20.00	**56**	4 Opening Shift Monitors (7:30AM-2:30PM) x $20 x 7hrs + 4 Closing Shift Monitors (2:30PM-9:30PM) x $20 x 7hrs	$1,120.00
Facility Technician	$20.00	**28**	2 Opening Shift Techs (7:30AM-2:30PM) x $20 x 7hrs + 2 Closing Shift Techs (2:30PM-9:30PM) x $20 x 7hrs	$560.00
Fire Inspector	$64.77	**4**	1 KFD Inspector (8AM-12PM) x $64.77 x 4hrs	$259.08
EMT (Emergency Medica l Technician)	$35.00	**40**	5 EMS Staff x $35 x 8hrs	$1,400.00
Security	$30.00	**70**	5 Security x $30 x 14hrs	$2,100.00
KPD Officer	$62.00	**108**	1 Officer (8AM-12PM) x 4hrs x $62 + 13 Officers (12pm-8pm) x 8hrs x $62	$6,696.00
KPD Supervisor	$67.00	**16**	2 KPD Supervisors (12PM-8PM) x $67 x 8hrs	$1,072.00
			Notes/Comments	
Total Fee's and Charges:				**$16,070.58**
Damage Deposit			**20% of Facility Rental fee;Refundable; Additional Fee on Total Charges**	$259.00
Fee Waiver Amount (if applicable)			**Must apply via kissimmee.gov; only available to non profit organizations**	TBD
Remaining Balance Due			**Due 30 days in advance of event date**	
Reservation Deposit			**Required at time of booking; Applied to total due; Non refundable Fee)**	$500.00

***Event Quote is subject to change based off of clients event needsand requests**