

April 20, 2021

Kristina Maricic
Administrative Officer
City of Delray Beach Police Department
Delray Beach, Fl. 33444

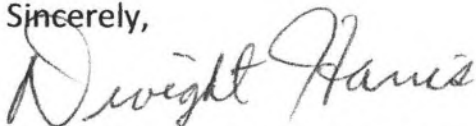
Dear Ms. Maricic,

On behalf of Omega Uplifts Foundation, I am submitting to you the application for a grant of \$14,500.00.

Omega Uplifts Foundation, Inc. is a non profit corporation based in Delray Beach, Florida since 1998. Please note that we recently changed our name from Questers Community Service Fund to Omega Uplifts Foundation, Inc. The federal tax identification number is still the same

Thank you for your very kind and knowledgeable assistance.

Sincerely,

A handwritten signature in cursive script that reads "Dwight Harris". The signature is written in dark ink and is positioned above the printed name of the signatory.

Dwight Harris, Treasurer—Omega Uplifts Foundation, Inc.



DELRAY BEACH POLICE DEPARTMENT LAW ENFORCEMENT TRUST FUND (LETF) REQUEST FOR FUNDING FORM

Chief Javaro Sims

The Delray Beach Police Department has a long-standing commitment to the reduction of crime and the implementation of crime and drug prevention initiatives throughout the city. Use of LETF funds requires approval from the City Commission, in accordance with Fla. Stat. § 932.7055, upon request by the Chief of Police. The Statute requires that a portion of the revenues be donated or expended for the support or operation of drug treatment, drug abuse education, drug prevention, crime prevention, safe neighborhood, or school resource officer programs, in accordance with Fla. Stat. § 932.7055.

Applicant Agency Information

Applicant Agency Legal Name (as listed on Sunbiz.org): Omega Uplifts Foundation, Inc.	
Program Title:	Omega Uplifts Delray Beach Youth & Families
Main Administrative Address: 3905 NW 10th Street	
City & State, Zip Code: Delray Beach, FL 33445	
Telephone Number: 561- 424-6448	
Website: https://www.omegauplifts.org/	
CEO/Executive Director: Markus Johnson	
Office Phone Number: 954-399-1623	E-mail Address: treasurer@omegauplifts.org
Name/ Title of Program Contact:	Dwight Harris - Treasurer
Cell Phone: 310-980-2509	Email: treasurer@omegauplifts.org
Primary Program Activity Location:	Delray Beach
City, State, Zip Code:	Delray Beach, FL 33444
Program Performance Period (Date):	From: 8/1/2021 To: 7/31/2021
	October 1, 2021 to: September 30, 2022

Organization's Background: Provide a concise description of the Applicant Agency, including its history, years of operation, general mission statement, and primary services provided.

Omega Uplifts Foundation was established in 1998 as a 501 c (3) Non-Profit charity by members of the Lambda Alpha Alpha Chapter of the Omega Psi Phi Fraternity Inc., to sponsor programs that empower youth, seniors, and families in south Palm Beach County communities. The Omega Uplifts Foundation, Inc. was established as a public charity organization to support the perpetual development of under-served communities of Palm Beach County. Our mission is to support families in need and ensure all students are productive and have access to education and empowering resources. Over the years, Omega Uplifts has advocated for and mentored children, sponsored senior programs and provided quality programming to empower families in southern Palm Beach County. Omega Uplifts Foundation focuses on sponsoring programs that mitigate obstacles facing disenfranchised communities through scholarships, health initiatives, voter registration, and other social action programs.

PROGRAM INFORMATION

1. Program Summary (3-5 sentences): Provide an overview of proposed program services.

The Omega Uplifts Delray Beach Youth & Families program is comprised of various sub-programs to empower Delray Beach and south Palm Beach County. Our mission is to ensure all students are productive and have access to an education by awarding scholarships and assistance to families in need. Omega Uplifts sponsors the Lamplighters mentor program to promote life/soft skills, crime prevention, academic achievement, etc. We also sponsor annual scholarship awards to Palm Beach County students to subsidize their college financial needs. Omega Uplifts has provided direct scholarships in Palm Beach County for over 20 years and continue to promote academic excellence among undergraduate and local high school students through our Lamplighters mentoring and Scholarship programs.

These two programs offer promising young people a better opportunity to attend the college of their choice and to realize their full potential. We provide this assistance to young men and women of all races and backgrounds. The Lamplighters mentoring program is administered by local professionals delivering an empowering and impactful experience to young men attending middle and high schools in South Palm Beach County. Our crime prevention strategies are based on identifying opportunities to expose our youth to life experiences that they would not likely experience (at home or in their neighborhoods), and open their mind to productive behavior and experiences. We realize that organizations must go beyond law enforcement and criminal justice to tackle the risk factors that cause crime because it is more cost effective and leads to greater social benefits than the standard ways of responding to crime.

LETF CATEGORY/STATUTORY REQUIREMENT (Place an "X" to the left of one program area for which you intend to Apply):

<input checked="" type="checkbox"/>	1. Crime Prevention
<input type="checkbox"/>	2. Safe Neighborhood
<input type="checkbox"/>	3. Drug Abuse Education and Prevention

2. How do you feel your proposed project addresses the LETF Criteria

Our Lamplights mentoring & Annual Scholarship programs have a successful history of achieving results because of our diversified approach of educating individuals to make better choices in life. We focus on empowering youth to choose a better quality of life; to be respectful of themselves and others; recognize their potential; know right from wrong; and prosper. These values, when learned and realized results in young people that are less likely to break the law and more likely to become productive citizens.

Since 1998, through our Scholarship Fund, we've Raised Over \$224,000 to provide scholarships and award-winning programs empowering disenfranchised families in Palm Beach County. Your support will help to impact more more families and improve our community as a whole which will help reduce or eliminate youth crime by influencing our youth to seek higher education rather than the negative peer pressure of criminal activity. Through the programs and services below, we feel that the LETF Criteria will be addressed through:

1. Mentoring - Tutoring, Advise, Life skills, Friendship and Brotherhood guide our Lamp Lighters mentoring program
2. Scholarships - Consistently providing monetary and non-monetary support and resources to our graduates
3. Community Empowerment - Dedicated to support the perpetual development of under-served communities in Delray Beach

Lastly, we annually sponsor the Achievement Week Program that highlighting the achievements of our Lamplighter participants, scholarship award program winners, along with community spotlights; all to encourage noble and respectable citizenship.

STATEMENT OF NEED

3. Why is this program needed (What community problem does it address)? What data suggests that this program should be implemented with this population or in this geographical location? (USE RECENT, RELEVANT DATA)

As economic times change and the costs of college education increases it has become more challenging to meet the scholarships needs and support for our promising youth to attend college. We are therefore reaching out to the business community and individuals who understand how important it is to continue this program.

The Lamplighters strategy is an approach to crime prevention that addresses the root causes of crime. The focus is mainly on the social elements that lead to crime such as lack of community cohesion, ignorance, breakdown in family societal values and poor environmental conditions.

In Delray Beach, too many youth, particularly youth in poverty; youth of color; youth with learning disabilities; youth with mental health and family substance abuse challenges; youth subjected to neglect, abuse and/or other violence; are pushed out of their schools and homes into the juvenile justice or adult criminal justice systems. Sadly, many local Delray Beach students are growing up without a sound family structure and missing a father figure and many times find their way into the wrong crowds, including gangs. This generally leads to a very troubled future that becomes their reality.

Intervention techniques are directed at youth who are at high risk to commit crime, and especially focus on youth who drop out of school or get involved in gangs. It targets social programs and law enforcement at neighborhoods where crime rates are high. Much of the crime that is happening in neighborhoods with high crime rates is related to social and physical problems. Although there have been a substantial reduction in the crime rate from 1998 to last year, a problem still exist among Juveniles. See statistics below:
<https://www.fdle.state.fl.us/FSAC/County-Profiles/Palm-Beach.aspx>

4. Describe the program in detail and how it will be implemented: (Describe Who, What, Where, and When) All programs must address a specific population and the narrative should indicate the number of clients served, services provided, etc.

Omega Uplifts sponsors empowering programming including but not limited to, mentoring, scholarship contests, community revitalization initiatives, and many more that impact dozens of youth, seniors and families in south Palm Beach County (with a focus on Delray Beach). Our participants from the Lamplighters mentor program (serving approximately 10 students annually) are encouraged to apply for our Annual Scholarship Award program (serving approximately 15 students annually). The 2021 Scholarship Award Program is presented by members of the Lambda Alpha Alpha Chapter of the Omega Psi Phi Fraternity, Inc. & Omega Uplifts Foundation, Inc. at our Annual Achievement Week Program (serving approximately 30 students and families annually) to provide scholarship awards to Delray Beach senior high school students who are entering a college, university or a post-secondary education program as a full-time student fall 2021. The purpose of these scholarships are to motivate the students to excel in their academics in order to qualify for the scholarships that will alleviate some of the financial stress they might be experiencing. By remaining academically astute, they avoid negative peer pressure and focus on a positive future in a college or university and upon completion, gainful employment. These scholarships have provided promising young people the opportunity to attend the college of their choice to realize their full potential. The program provides this assistance to high school seniors of all races and backgrounds who attend either Atlantic High School or Village Academy (along with other south Palm Beach County High Schools).

To qualify, the students must meet the following requirements:

- Cumulative Grade Point Average of 2.5 or higher
- Complete a scholarship award application
- Submit an official copy of your high school transcript
- Submit two letters of recommendation
- Application and attachments submitted by Monday, March 08, 2021
- Interviews were conducted on Tuesday or Wednesday, March 30-31, 2021

PROJECT BUDGET (Project budget should ONLY include costs related to your funding request. Other match funds should not be included below.)

LETF Line Item Budget	Calculation	Total Amount
Program Expenses		
Personnel Costs/Salaries	\$ 0.00	
Fringe Benefits	\$ 0.00	
Travel	\$ 0.00	
Equipment	\$ 0.00	
Supplies	\$ 2,000.00	
Printing and Copying	\$ 2,500.00	
Other (specify)	\$ 10,000.00	
Total LETF REQUEST:		\$ 14,500.00

BUDGET NARRATIVE (Required for ALL applications. Provide a detailed narrative explanation of what the budget will include and its relevance to the project in #4. Please explain any anomalies in the budget above.)

The Lamplighter program workshops and activities will require various supplies to function successfully (\$2,000.00). Our Achievement Week Program will require the purchase of award plaques (\$500) and printing for the souvenir book (\$2,000.00) highlighting the achievements of our Lamplighter participants, scholarship award program winners, along with community spotlights. The rest of grant funds will be used to pay out scholarship awards presented to selected applicants (\$10,000.00).

SIGNATURE/CERTIFICATION

CERTIFICATION AND ASSURANCES (Please initial next to each in **blue ink**. By initialing and signing this application for funding the applicant agrees to comply with the following terms and conditions if awarded LETF Funding.

PERIOD OF PERFORMANCE

Initial MF APPLICANT shall commence services as soon as practical and reasonable under the circumstances. All program activities must be completed within one (1) year of disbursement, unless said date is extended by DBPD. Any request for extension of time must be submitted no later than 30 days before the end of the performance period of the award.

REPORTS AND DELIVERABLES

Initial MF APPLICANT will keep clear and accurate records throughout the Program period so that the progress of the services rendered may be readily evaluated by the DBPD at mutually agreed upon times.

Initial MF APPLICANT will provide DBPD with a **quarterly program report** which shall include the current Program status by APPLICANT in completing/servicing the Program, expenditure of funds, backup documentation supporting expenses, in addition to such other pertinent information as requested by Delray Beach Police Department on the report form to DBPD no later than **fifteen (15) days** of the end of each quarter.

Initial MF A **final report** of activities and expenditures documented by receipts or other financial proof of expenditure of the Program shall be submitted by APPLICANT on the report form to DBPD no later than **forty-five (45) days** of the end of the performance period. All cost and expense in generating and delivery of such documentation shall be burdened by APPLICANT and the documents shall be delivered in a format acceptable to DBPD. Failure to comply with the reporting requirements shall result in APPLICANT having to return LETF.

RETURN OF FUNDS

Initial MF If APPLICANT fails to perform; or is determined later to not be qualified to receive LETF; or if there was an untruthful statement made by APPLICANT within its Request for Funding Application (Application); or fails to provide the necessary reporting documents to DBPD, then all LETF disbursed to the APPLICANT shall be returned to DBPD within ten (10) business days of DBPD's written demand for the same and APPLICANT may be ineligible for any future LETF disbursements.

SPECIAL PROVISIONS

All services should be provided exclusively in Delray Beach to Delray Beach residents.

Initial MF APPLICANT will not qualify for subsequent year funding from DBPD and will not be able to receive subsequent year funding until a complete report, approved by DBPD has been obtained for prior year activities that were funded by LETF award. Notwithstanding the foregoing, DBPD shall not be obligated to award any subsequent funding unless and until the APPLICANT reapplies for the same and is approved for disbursements, at the discretion of DBPD.

Initial MF Failure to spend grant funds in accordance with the approved project budget will result in return of funds to DBPD.

Initial MF Failure of the APPLICANT to submit a complete report with backup documentation to DBPD, at no cost to DBPD, will result in immediate return of funds to DBPD.

Initial MF Failure of the APPLICANT to comply with sub-recipient monitoring will result in immediate return of funds.

False statements or claims made in connection with this LETF Funding Application may result in fines, imprisonment, and/or any other remedy available by law. I certify that the assurances provided are true and accurate to the best of my knowledge.

APPLICANT AGENCY NAME: Omega Uplifts Foundation, Inc.

OFFICIAL AUTHORIZED TO SIGN AND BIND APPLICANT AGENCY TO APPLICATION:

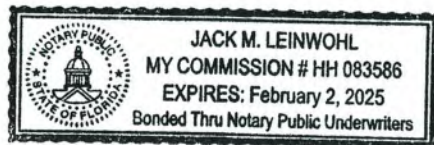
Signature: [Signature] Date: 5/8/2021
Markus Johnson
(Printed Name & Title)

STATE OF FLORIDA
COUNTY OF PALM BEACH

The foregoing instrument was acknowledged before me by means of ☒ physical presence or ☐ online notarization, this 8 day of MAY, 2021, by MARKUS JOHNSON (name of person), as Chairman (type of authority) for Omega Uplifts Foundation, Inc. (name of party on behalf of whom instrument was executed).

Personally known ☐ OR Produced Identification
Type of Identification Produced Driver License

[Signature]
Notary Public – State of Florida



State of Florida

Department of State

I certify from the records of this office that OMEGA UPLIFTS FOUNDATION, INC. is a corporation organized under the laws of the State of Florida, filed on September 30, 1998.

The document number of this corporation is N98000005640.

I further certify that said corporation has paid all fees due this office through December 31, 2021, that its most recent annual report/uniform business report was filed on April 18, 2021, and that its status is active.

I further certify that said corporation has not filed Articles of Dissolution.

*Given under my hand and the
Great Seal of the State of Florida
at Tallahassee, the Capital, this
the Eighteenth day of April, 2021*



Randy R. Lee
Secretary of State

Tracking Number: 4556486616CC

To authenticate this certificate, visit the following site, enter this number, and then follow the instructions displayed.

<https://services.sunbiz.org/Filings/CertificateOfStatus/CertificateAuthentication>



[Department of State](#) / [Division of Corporations](#) / [Search Records](#) / [Search by Entity Name](#) /

Detail by Entity Name

Florida Not For Profit Corporation
OMEGA UPLIFTS FOUNDATION, INC.

Filing Information

Document Number	N98000005640
FEI/EIN Number	65-0850816
Date Filed	09/30/1998
State	FL
Status	ACTIVE
Last Event	AMENDMENT AND NAME CHANGE
Event Date Filed	10/26/2020
Event Effective Date	12/01/2020

Principal Address

3905 NW 10TH STREET
Delray Beach, FL 33445

Changed: 04/18/2021

Mailing Address

3905 NW 10TH STREET
DELRAY BEACH, FL 33445

Changed: 04/18/2021

Registered Agent Name & Address

JOHNSON, MARKUS
4781 N. Congress Avenue
1136
BOYNTON BEACH, FL 33482

Name Changed: 03/11/2020

Address Changed: 04/18/2021

Officer/Director Detail

Name & Address

Title Director

MOSES, DEREK

1553 nw 3rd terr
pompano beach, FL 33060

Title Director

DAVIS, LARRY
6592 Lurais DRIVE
WEST PALM BEACH, FL 33436

Title Director

PAYNE, OTIS
POB 6445
DELRAY BEACH, FL 33482

Title Director, Chairman

JOHNSON, MARKUS
4781 N Congress Ave
1136
Boynton Beach, FL 33426

Title Director

BROWN, WILBERT
10341 W. TARA BLVD
BOYNTON BEACH, FL 33437

Title Director

Petty, Ricky
217 N Seacrest Blvd
593
Boynton BEACH, FL 33426

Title Director

marsh, Derrick
5027 Nautica Lake cir
Greenacres, FL

Title Director, Secretary

crawford, terry
360 N 20th avenue
pompano beach, FL 33069

Title Director

rosier, len
8502 michael dr
boynton beach, FL 33472

Title Director

spear,jr, samuel
701 n swinton ave
delray beach, FL 33444

Title Director, VC

alexander, percy
9940 baywater dr
boca raton, FL 33496

Title Director

jones, vincent
4280 banyan trails dr
coconut creek, FL 33043

Title Director

BARBER, ZEDRICK
4440 PGA Blvd.
Suite 600
Palm Beach Gardens, FL 33410

Title Director, Treasurer

HARRIS, DWIGHT
686 Normandy
O
DELRAY BEACH, FL 33484

Annual Reports

Report Year	Filed Date
2019	04/05/2019
2020	03/11/2020
2021	04/18/2021

Document Images

04/18/2021 -- ANNUAL REPORT	View image in PDF format
10/26/2020 -- Amendment and Name Change	View image in PDF format
03/11/2020 -- ANNUAL REPORT	View image in PDF format
04/05/2019 -- ANNUAL REPORT	View image in PDF format
03/29/2018 -- ANNUAL REPORT	View image in PDF format
04/09/2017 -- ANNUAL REPORT	View image in PDF format
03/27/2016 -- ANNUAL REPORT	View image in PDF format
04/13/2015 -- ANNUAL REPORT	View image in PDF format
04/20/2014 -- ANNUAL REPORT	View image in PDF format
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[04/27/2006 -- ANNUAL REPORT](#)
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[04/22/2004 -- ANNUAL REPORT](#)
[04/28/2003 -- ANNUAL REPORT](#)
[06/30/2002 -- ANNUAL REPORT](#)
[05/10/2001 -- ANNUAL REPORT](#)
[05/08/2000 -- ANNUAL REPORT](#)
[05/17/1999 -- Amendment](#)
[03/09/1999 -- ANNUAL REPORT](#)
[09/30/1998 -- Domestic Non-Profit](#)

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Consumer's Certificate of Exemption

Issued Pursuant to Chapter 212, Florida Statutes

DR-14
R. 01/18

85-8013755160C-3	09/23/2018	09/30/2023	501(C)(3) ORGANIZATION
Certificate Number	Effective Date	Expiration Date	Exemption Category

This certifies that

OMEGA UPLIFTS FOUNDATION INC
125 NW 3RD AVE
DELRAY BEACH FL 33444-2623

is exempt from the payment of Florida sales and use tax on real property rented, transient rental property rented, tangible personal property purchased or rented, or services purchased.



Important Information for Exempt Organizations

DR-14
R. 01/18

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.

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

DEPARTMENT OF THE TREASURY

Date: **AUG 30 2012**

QUESTERS COMMUNITY SERVICE FUND INC
PO BOX 7212
DELRAY BEACH, FL 33482

Employer Identification Number:
65-0850816
DLN:
17053193323032
Contact Person:
JUSTIN R PALMER ID# 31674
Contact Telephone Number:
(877) 829-5500
Accounting Period Ending:
December 31
Public Charity Status:
170(b)(1)(A)(vi)
Form 990 Required:
Yes
Effective Date of Exemption:
May 15, 2010
Contribution Deductibility:
Yes
Addendum Applies:
Yes

Dear Applicant:

We are pleased to inform you that upon review of your application for tax exempt status we have determined that you are exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code. Contributions to you are deductible under section 170 of the Code. You are also qualified to receive tax deductible bequests, devises, transfers or gifts under section 2055, 2106 or 2522 of the Code. Because this letter could help resolve any questions regarding your exempt status, you should keep it in your permanent records.

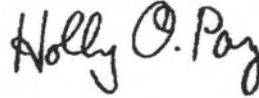
Organizations exempt under section 501(c)(3) of the Code are further classified as either public charities or private foundations. We determined that you are a public charity under the Code section(s) listed in the heading of this letter.

Please see enclosed Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, for some helpful information about your responsibilities as an exempt organization.

Letter 947 (DO/CG)

QUESTERS COMMUNITY SERVICE FUND INC

Sincerely,

A handwritten signature in cursive script that reads "Holly O. Paz".

Holly O. Paz
Director, Exempt Organizations
Rulings and Agreements

Enclosure: Publication 4221-PC

QUESTERS COMMUNITY SERVICE FUND INC

Based on the information submitted with your application, you meet the requirements for retroactive reinstatement under Notice 2011-43.

Request for Taxpayer Identification Number and Certification

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

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

Print or type.
See Specific Instructions on page 3.

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

OMEGA UPLIFTS FOUNDATION, INC

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

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

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

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

Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is **not** disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.

☐ Other (see instructions) ►

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

Exempt payee code (if any) --

Exemption from FATCA reporting code (if any) --

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

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

3905 NW 10TH STREET

6 City, state, and ZIP code

DELRAY BEACH, FL 33445

7 List account number(s) here (optional)

Requester's name and address (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number

 - -

or

Employer identification number

6 5 - 0 8 5 0 8 1 6

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 ►

Dwight Harris

Date ►

5-6-2021

General Instructions

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

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.

City of Delray Beach
Purchasing Department
100 N.W. 1st Avenue
Delray Beach, Florida 33444
Phone: (561) 243-7161
E-mail: purchasing@mydelraybeach.com



VENDOR APPLICATION

Taxpayer Identification Number	Business Name	Phone Number
65-0850816	OMEGA UPLIFTS FOUNDATION INC.	561-424-6448
Remittance Street Address	Business Street Address	E-mail address
65-0850816	3905 NW 10th Street	treasurer@omegauplifts.org
Remittance City, State and Zip	Business City, State and Zip	Fax Number
Boynton Beach, FL 33426	Delray Beach, FL 33445	N/A

Using the Commodity Code List as a reference, please select up to 10 Commodity Codes that identify the goods and/or services which your firm can supply. These codes will be used by the Purchasing Department when alerting vendors regarding new opportunities to do business. Only the 10 unique codes specified on this application will be accepted, any additional codes submitted will not be honored. The Category Code List may be found at:

<http://mydelraybeach.com/finance/purchasing/vendor-resources>

Type of Business				Commodity Codes	
Corporation		Public Company			
Partnership		State Incorporated	FL		
Sole Proprietorship					
Non-Profit Organization	X				
Limited Liability					

Disclosure of Employment Employees of the City of Delray Beach

All bidders, proposers, vendors and contractors are required to disclose the names of any of their employees who serve as agents, principals, subcontractors, employees or consultants and are currently employed or have been employed by the City of Delray Beach within the last two (2) years.

Name	Dwight Harris	Position in your Company	Treasurer
Name	Markus Johnson	Position in your Company	Chairman

I certify that the information supplied herein is correct to the best of my knowledge.

Signature

5/7/2021

Markus Johnson

Date

Print Name

Purchasing Use Only

Vendor Number		Entered by:	
		Date:	