2025 - 2026 North Port & Non-profits United (NP2) Program Application

Submitted on 7 August 2025, 1:34am

Receipt number 11

Related form version 2

Agency Name:	Kiwanis Club of North Port
Tax ID Number:	83-1972432
Agency Website:	www.kiwanisclubofnorthport.org
Agency Street Address:	5662 Gabo Road
Unit/Suite:	Kiwanis Club
City:	North Port
State:	FL
What county will your program serve?	Sarasota
What city will your program serve:	North Port

Application Contact Information

Prefix:	Mrs.
First Name:	Elaine
Last Name:	Allen-Emrich
Job Title:	Secretary, board member, past president
Phone Number:	19412237120
Email Address:	eallenemrich@gmail.com

Requested Mission Support Item Information

What is your non-profits mission?

Kiwanis serves the 10 schools in the city. Kiwanis works with guidance counselors and social workers to help fill basic needs for children and families in need including homeless and foster care families.

Title of Project:	Compute it	
Amount Requested:	\$584	
Please describe the item needed:	Dell Inspiron 3530 Laptop- 15.6-inch FHD 120Hz Display, Intel Core i5-1334U Processor, 16GB DDR4 RAM, 512GB SSD, Intel Iris Xe Graphics, Windows 11 Home, Migrate Services - Platinum Silver	
Are there any known or anticipated barriers to installing or using this item at your agency (e.g., space limitations, permitting requirements, or code compliance)?	None	
In detail, how will this item assist the North Port community?	Kiwanis does an average of 15-17 community events each year. Kiwanis makes Save the Date flyers for free events like the annual fishing tournament, free breakfast with Santa, the Health Expo and quarter auctions. The club relies on members to use their own computers and printers for club business. Having a club computer will ensure record keeping is in one location on a computer. It will have all of the templates for flyers and can help with any registration or emailing families the club adopts for Christmas. If the club reopens a Kids Kloset, a computer is needed to log all families to keep track of users of the program for grant purposes and communicate with them throughout the year.	
Please describe the expected impact:	The impact is important because it helps both the Kiwanis Club and the families. The club helps 400 or more children for Christmas. We would like to keep track of them. Having a computer will allow the club to convert the paper binder into a digital file. It can be used to register families and then invite them to free events or help them when we have extra items like food, snacks, socks and underwear that may help them throughout the school year and summer months.	
Please describe what data or statistics will be utilized to measure the impact:	Having digital copies of files instead of just paper is vital for the club and the community. It's important to have everything in one place because it's digital. It will also be helpful with the Do the Right Thing program which the Kiwanis Club partners with the city of North Port Police Department. The club creates the keepsake program. Again, it has to be done on member's computers instead of a club computer. So the impact will be as instant as quickly as it takes to set up files and import the data from paper copies. It will also be used to give presentations, which is very important for attracting new members and working with schools.	
Is your impact reliant on a partnership with an external agency?	No	

Strategic Pillars

Under what Strategic Pillar does your mission support item most align with and why?

Kiwanis sponsors a health expo providing free screenings and mammograms for women who can't afford them. Kiwanis sponsors a Your Child Matters Expo to provide resources including mental health, outdoor activities, insurance opportunities, free school uniforms and more to help the underserved in the community. Kiwanis partners with the NPPD, the Sarasota County Schools Police Department and Holly's Hope for the Do the Right Thing Program. The program has a special component that likely no other have which is a life safety award. This allows students who helped save someone's life to be honored and celebrated in a very public manner. It brings very good publicity to the city, police department, the club and most of all students. It's a completely free program for children and their families. The club embarks in many partnerships to help schools fill the gaps that teachers and administrators can't afford and shouldn't be paying for including personal care products for teen girls and underwear for preschoolers and

Pillar 2: Quality of Life

Uploads

Articles of Incorporation	ConvertTiffToPDF.pdf
IRS 501(c)3 Non-profits Determination Letter	Kiwanis IRS letter pdf.pdf
Most Recent IRS 990 Form	990-N form Kiwanis.pdf
Example/Image/Link of Support Item	71tSRRISOFLAC_SX679jpg
Link	https://www.amazon.com/Dell-Inspiron-3530-Laptop-15-6-inch/dp/B0D1KS5VX9?th=1

Signature

Elaine Allen-Emrich

Link to signature



Reviewed By: C. Estrada



NP2 Non-Profit Application Checklist

Review each application submitted by the non-profit agency to ensure completion of application and all required documentation.

Agency Name: KIWCINIS Club of North

Tax ID: 83-1972432 Requested Amount: \$584		
Agency Street Address: 562 Gabo Road		
City: North Port State: FL Zip Code: 34287		
Documents	Complete	Notes
Application		
Articles of Incorporation		
501 (c) 3 Non-Profit	ØYES ○NO	
Determination Letter		
IRS 990 Form (if applicable)	\emptyset ,YES \bigcirc NO	
Sunbiz Information	Ø YES ○ NO	
Cost of Mission Support Item	ØYES ○ NO	\$584
Reasonable Purpose		
Notes Did not submit 6 month reports for FY 2023-2024. Dell Laptop		

Date: 8/12/15

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Pillar 2: Quality of Life

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Signature	

Elaine plen-Emrich

Link to signature

Electronic Articles of Incorporation For

N18000010141 FILED September 20, 2018 Sec. Of State dlokeefe

KIWANIS FOUNDATION OF NORTH PORT, INC.

The undersigned incorporator, for the purpose of forming a Florida not-for-profit corporation, hereby adopts the following Articles of Incorporation:

Article I

The name of the corporation is:

KIWANIS FOUNDATION OF NORTH PORT, INC.

Article II

The principal place of business address:

2557 WURTSMITH LANE NORTH PORT, FL. US 34286

The mailing address of the corporation is:

12737 TAMIAMI TRAIL NORTH PORT, FL. US 34287

Article III

The specific purpose for which this corporation is organized is:

TO PROMOTE AND FACILITATE KIWANIAN CHARITABLE GIVING ANDSUPPORT TO THE NORTH PORT COMMUNITY

Article IV

The manner in which directors are elected or appointed is:

AS PROVIDED FOR IN THE BYLAWS.

Article V

The name and Florida street address of the registered agent is:

ROBERT MALLOY 12737 TAMIAMI TRAIL NORTH PORT, FL. 34287

I certify that I am familiar with and accept the responsibilities of registered agent.

Registered Agent Signature: R.J. MALLOY

Article VI

The name and address of the incorporator is:

WILLIAM HAUGH 2631 TOMASO RD

NORTH PORT, FL 34287

Electronic Signature of Incorporator: WILLIAM HAUGH

I am the incorporator submitting these Articles of Incorporation and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of this corporation and every year thereafter to maintain "active" status.

Article VII

The initial officer(s) and/or director(s) of the corporation is/are:

Title: DIR WILLIAM HAUGH 2631 TOMASO RD NORTH PORT, FL. 34287 US

Title: DIR KENT ANDERSON 2557 WURTSMITH LANE NORTH PORT, FL. 34286

Article VIII

The effective date for this corporation shall be:

09/30/2018

N18000010141 FILED September 20, 2018 Sec. Of State INTERNAL REVENUE SERVICE P. O. BOX 2508 CINCINNATI, OH 45201

Date: SEP 27 2018

KIWANIS FOUNDATION OF NORTH PORT INC 12737 TAMIAMI TRAIL NORTH PORT, FL 34287-0000

Employer Identification Number: 83-1972432 DLN: 26053667003028 Contact Person: CUSTOMER SERVICE ID# 31954 Contact Telephone Number: (877) 829-5500 Accounting Period Ending: December 31 Public Charity Status: 509(a)(2) Form 990/990-EZ/990-N Required: Effective Date of Exemption: September 20, 2018 Contribution Deductibility: Yes Addendum Applies: No

Dear Applicant:

We're pleased to tell you we determined you're exempt from federal income tax under Internal Revenue Code (IRC) Section 501(c)(3). Donors can deduct contributions they make to you under IRC Section 170. You're also qualified to receive tax deductible bequests, devises, transfers or gifts under Section 2055, 2106, or 2522. This letter could help resolve questions on your exempt status. Please keep it for your records.

Organizations exempt under IRC Section 501(c)(3) are further classified as either public charities or private foundations. We determined you're a public charity under the IRC Section listed at the top of this letter.

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.

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Form 990-N

Electronic Notice (e-Postcard)

OMB No. 1545-2

Department of the Treasury Internal Revenue Service for Tax-Exempt Organization not Required to File Form 990 or 990-EZ

2024

Open to Public Inspe

D Employee Identificati

Number 83-1972432

A For the 2024 Calendar year, or tax year beginning 2024-01-01 and ending 2024-12-31

B Check if available

Terminated for Business

Gross receipts are normally \$50,000 or less

C Name of Organization: KIWANIS FOUNDATION OF NORTH

PORT INC

PO Box 7222, North Port, FL,

US, 34290

E Website:

kiwanisclubofnorthport.org

F Name of Principal Officer: Chris Street

PO Box 7222, North Port, FL,

US, 34287

Privacy Act and Paperwork Reduction Act Notice: We ask for the information on this form to carry out the Internal Revenue laws of the Unital You are required to give us the information. We need it to ensure that you are complying with these laws.

The organization is not required to provide information requested on a form that is subject to the Paperwork Reduction Act unless the form covalid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become mate administration of any Internal Revenue law. The rules governing the confidentiality of the Form 990-N is covered in code section 6104.

The time needed to complete and file this form and related schedules will vary depending on the individual circumstances. The estimated aver is 15 minutes.

Note: This image is provided for your records only. Do Not mail this page to the IRS. The IRS will not accept this filing via paper. You your Form 990-N (e-Postcard) electronically.

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 740204

Entity Name: KIWANIS CLUB OF NORTH PORT, INC.

FILED Feb 13, 2025 Secretary of State 3340371625CC

Current Principal Place of Business:

2548 ORALE LANE NORTH PORT, FL 34286

Current Mailing Address:

PO BOX 7222

NORTH PORT, FL 34290-0222

FEI Number: 51-0211185

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

EMMERICH, ELAINE 2548 ORALE LANE NORTH PORT, FL 34286 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: ELAINE EMMERICH

02/13/2025

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title

PRESIDENT

Title

SECRETARY

Name

ALLEN-EMRICH, ELAINE

Name

STREET, CRYSTALRAE M

Address

5662 GABO ROAD

Address

4263 WORCESTER AVENUE

City-State-Zip: NORTH PORT FL 34287-3058

City-State-Zip: NORTH PORT FL 34287-3942

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CRYSTALRAE M. STREET

SECRETARY

02/13/2025



Type With Ease

Write and calculate quickly with roomy keypads, separate numeric keypad and calculator hotkey.

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SIGNATURE: ELAINE EMMERICH 02/13/2025

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title PRESIDENT Title SECRETARY

NameALLEN-EMRICH, ELAINENameSTREET, CRYSTALRAE MAddress5662 GABO ROADAddress4263 WORCESTER AVENUECity-State-Zip:NORTH PORT FL 34287-3058City-State-Zip:NORTH PORT FL 34287-3942

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02/13/2025