# **Application Form**

# Organization Information

An informational webinar about this application is available to watch.

The rubric that will be used to score this proposal can be downloaded here.

If you would like to complete this application first in Microsoft Word, you may download a Word version here. Please pay attention to character limits.

## **Brief Project Descriptor**

Please briefly describe this organization's request.

# Organization Name\*

Palm Harbor Historical Society Inc. (PHHS)

# Project Name\*

Please choose a short name to identify this project within the grant portal:

Palm Harbor Museum Capital Improvements 2023

#### EIN\*

59-3246072

# Incorporation Year\*

What year did your organization incorporate? This will be the year listed on your determination letter from the Internal Revenue Service.

1983

## Mission Statement\*

Printed On: 2 November 2023

What is your organization's mission statement?

To collect, preserve, and share the heritage of the Palm Harbor area within the context of Pinellas County, Florida and national history.

40 years ago our founders embarked on a mission to gather first person oral histories, written memoirs, letters, documents, photos, and relics pertaining to the cultural history of our shared past. This effort resulted in the collection and exhibits now housed at Palm Harbor Museum. Preservation work is ongoing. Records

presently on paper or existing as objects are being digitized (recorded in the form of scans and photos) in a data base. Present exhibits feature our region's ancient history, reveal African American contributions, tell about community action against bigotry, celebrate women, document the story and legacy of Faith Mission Children's Home, educate in regard to pioneer living and industry, including the Hartley Ladder Factory and Agricultural history, particularly ranching and citrus.

## **Unique Entity ID (SAM)**

Please provide your organization's Unique Entity ID number. This is a specific number used by the federal government to identify your organization. This is different from a DUNS number, which the federal government no longer uses.

If you do not have a Unique Entity ID number, you can create an account on SAM.gov and apply for one here (it is free and may take 3-4 days for approval): https://sam.gov/content/home

This field is optional as to not stop a qualifying organization from applying. HOWEVER, a Unique Entity ID number will be required if your organization is approved for a grant. Your organization should apply for a number now if it does not yet have one.

Character Limit: 12 UM2MPY4HZES3

# **Annual Operating Budget\***

Please provide the amount of your annual operating budget (expenditures only) for your entire organization. \$55,483.35

# **Amount Requested\***

Printed On: 2 November 2023

The maximum grant amount is \$500,000.

\$190,313.34

# Does the total project cost exceed the amount your organization is requesting?\*

Please note: Answering "Yes" will cause additional questions to load later in this application.

#### Examples

ABC Childcare is seeking funding for a new playground. ABC Childcare is asking PCF to fund \$150,000 for certain equipment, and will seek other funding and donations for the remaining \$20,000 of the playground. ABC Childcare would select "Yes" for this question.

Better Tomorrow, a mental health provider, is looking to expand their counseling center by two rooms to meet increased service demand arising from the pandemic. Better Tomorrow has secured \$25,000 in private contributions, and wants to request the remaining \$125,000 in this grant. Better Tomorrow would select "Yes" for this question.

DBE Food Pantry is seeking funding a new HVAC unit for their pantry, and is requesting \$40,000 from PCF to cover the entire cost. DBE Food Pantry would select "No" for this question.

No

## Rent vs. Own\*

Does your organization rent or own the property for which you are proposing modifications?

Rent

# Parent Non-Profit/Subsidiaries:\*

If your organization has a parent non-profit that has multiple subsidiaries, will multiple subsidiaries be applying in this process?

#### Example

Better Tomorrow is the parent non-profit of three organizations. Two of those organizations want to apply in this process. Both would select "Yes" on this question.

No

# Request Specifics

# Pinellas County Priority Areas\*

For Round 2 of this funding process, the ARPA Nonprofit Capital Project Fund is prioritizing organizations that offer programming, and whose capital purchase is related to, the following areas:

- Individuals with Disabilities
- Food Security
- Specialized Healthcare
  - o Mental Health
  - o Dental Care
  - o Substance Use Disorders
- Housing

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Not offering programming in these areas does not disqualify you from applying. However, this prioritization will result in 10 bonus points being awarded to eligible requests when scored.

Does your organization and its proposed capital purchase fit into one of these areas?

No

## Programming Background\*

Please describe the programming your organization offers to the community and the length of time it has been doing so. What does your organization **do** and **how long** has it been doing it?

If you have indicated above that your programming and proposed purchase fit into the priority areas for this funding round, please be sure to describe the relevant programming.

Since 1983 Palm Harbor Historical Society, Inc. has been dedicated to the preservation of area history and is the sole organization dedicated as steward and interpreter of the history of the greater Palm Harbor area. The collection and archive resides at the Hartley House aka Palm Harbor Museum, built in 1914 and designated a Pinellas County historic landmark in 1996. The Museum building was once actual home to Thomas and Ida Hartley and family. Exhibits are multi-sensory and interactive. Seating is offered in every room to make visitation more comfortable for those with mobility challenges.

The museum is supported entirely by memberships, donations, grants and the generous activity of volunteer labor. Our members and volunteers are our "stakeholders." They are diverse in identity and age. Group tours for special needs adults and congregate care facilities are hosted. Individuals living with mobility challenges or those who are differently abled find our Museum to be a welcoming and inspiring place to visit. With the addition of the Living Landscape, an outdoor display of native and historical plants, with interpretive signage for self touring, the museum offers interactive and educational components across the entire Museum campus.

Prominently located at the intersection of Curlew and Belcher Roads, the Palm Harbor Museum offers indoor and outdoor space for community use.

The addition of the requested capital improvements provides essential service to visitors and volunteers, accommodating children, adults, the elderly, especially those who live with disability. The renovated ramp and ADA restroom are safe, convenient and necessary to providing service for our target audience.

# Community Need\*

Printed On: 2 November 2023

Please describe the community need that exists for your programming. If you are able to cite quantitative, local data, that will strengthen your proposal.

The pandemic created individual isolation and a loss of social activity. Emerging from this challenge, the Palm Harbor Museum supports residents by offering free activities and events that provide a sense of reconnection and inspiration close to home. The PHM is all about community, offering historical resources and public events, creating social networks, and inspiring creativity through education. The PHM celebrates our collective heritage and culture by providing a volunteer-driven, local space for re-building social participation and connection.

A diverse volunteer group guides Museum operations and projects; everything from cataloging the collections, giving guided tours, developing interactive exhibits, filming oral history, making minor repairs, and tending the outdoor landscape. Over 70 volunteers support their neighbors and community by involvement that enables PHM to be the unique and important institution for historical context serving the 93,000 residents of our greater Palm Harbor area.

Providing safe access and convenient facilities is essential to serving community members as volunteers share this historically designated site as a go-to destination for social networking, education, research, and care of historically significant items. We seek to offer fun, enriching tours and events to be shared with family and friends of every age and level of ability.

Palm Harbor Demographics according to the 2020 census:

\*Nearly 40% of residents are retirement-age (over 55 years) with median income of \$64,222; 95.0% have graduated HS; 35.5% have BA or higher.

- Race/Ethnicity: 89.5% White; 3.0% Asian; 2.1% African American; <1% Native American; 4.1% Two or more races; 7.8% Hispanic.
- Gender: 52.8% female
- Age: 16.1% under age 18; 27.2% age 65+
- Disability: 8.5% of Palm Harbor residents have a disability.
- Disability: 10% of Pinellas residents have a disability

## Negative Economic Impact\*

The following question is the keystone of a strong application in this process. If your organization cannot demonstrate a negative economic impact from the pandemic, your application will not qualify for committee review. If you are uncertain about what constitutes negative economic impact or how to demonstrate it, please contact PCF staff for technical assistance.

The more quantifiable your negative economic impact is, whether it be fiscal losses/pressures or increased service demand, the stronger your answer will be. Use numbers whenever possible. The more specific your evidence, the better.

Describe your organization's negative economic impact arising from the COVID-19 pandemic. Examples could include:

- A reduction in revenue from 2019 to 2020
- Inflationary pressures
- Increases in demand for services that have not been compensated for through new revenue
- The use of reserves for unbudgeted expenses since the onset of the pandemic, and such use of reserves has prevented the purchase of capital assets
- A need for capital assets to offset community need for which your organization does not have the resources to purchase due to the negative economic harm from the pandemic
- A need for additional capital assets to adapt operations to accommodate health and safety guidelines by the CDC
- Growth in restricted pandemic-related revenue that does not permit capital asset acquisition

#### **Negative Economic Impact**

1. Changes in Financial Status:

	2019	2020	2021	2022	% Change 2019 to 2021	
Income	\$94,036.43	\$90,210.67	\$77,863.89	\$105,117.01	l -17.20%	
Expenses	\$29,808.43	\$50,232.44	\$45,830.42	\$55,483.35	53.75%	
In-Kind Income	\$35,380.88	\$25,046.74	\$27,873.64	\$35,161.02	-21.22%	
(Labor & Supplies)						

Net Ordinary Income (Operating Revenue - Expenses)

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2019 2020 2021 2022 % Change 2019 to 2021 $64,228.00 $39,978.23 $32,033.47 $49,633.66 -50.13%
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Net Income (Bottom Line includes in-kind and depreciation)

2019 2020 2021 2022 % Change 2019 to 2021 \$25,460.18 \$1,211.16 \$(13,424.00) \$10,873.71 -152.73%

2. Decrease in Volunteer Hours: 2019 - 4,516.0

2020 - 3,021.5 2021 - 1,175.5 2022 - 3,029.0

3. Decrease in Visitors: 2019 - 2,441

2020 - 1,001 2021 - 650 2022 - 1,796

- 3. Resignation of part-time Operations Manager due to lack of community programs and Museum closure. The additional tasks fell to volunteers, Board members or were postponed.
- 4. Loss of five volunteers who excelled in cataloging the historical collections. They were not able to return when the Museum re-opened.
- 5. Loss of docent volunteers necessitated scheduling only one per day, down from two, resulting in fewer guided tours and in-person resources available to guests.
- 6. Fewer operating days. Prior to the pandemic the Museum was open Wednesday Saturday, today Thursday Saturday.
- 7. Use of savings to maintain basic Museum operations utilities, lawn maintenance, insurance, building repairs, security.

The Palm Harbor Museum is located in a Difficult Development Area (HUD - DDA) with higher construction costs than other areas of Pinellas County. Being located in a DDA and the financial & personnel losses above make undertaking any capital improvements projects impossible at this time.

# **Negative Economic Impact - Uploads**

You have the option to upload supporting documentation regarding negative economic impact. However, please limit your upload to no more than five pages. Word, Excel, JPG and PDF files are accepted.

# Pandemic Relief Funding\*

Please describe all government pandemic relief funding your organization has received since the onset of the pandemic (March 2020). This includes but is not limited to the Pinellas CARES Nonprofit Partnership Fund, other ARPA funding, PPP (Paycheck Protection Program), and Community Block Development Grants specifically targeting COVID-19 relief.

Explain why or how this pandemic-relief funding has not alleviated the negative economic impact you have described above. Potential reasons include expiration dates on certain funding, inflationary pressures, restrictions prohibiting capital expenditures, or the funding simply not being enough to remedy the harm you've indicated above. The more concrete your numbers, the better.

If you have not received government relief funding for your organization since the onset of the pandemic, write "No pandemic relief funding received" below.

The Palm Harbor Historical Society received \$6,000 in CARES relief in 2020 and \$9,500 in 2021. The funds were used for critical operational expenditures. In 2022, ARPA funds of \$5,000 were awarded for the specific purchase of cabinets for collection displays. While valuable funding for the Museum, the pandemic-relief funding amount was insufficient to remedy the losses listed above and the harm experienced from the loss of momentum imposed by the COVID crisis. Palm Harbor Museum continues to "soldier on" due to the incredible volunteers who work with delight and dedication on many projects to preserve and promote and care for this landmark institution.

## **Proposal Description\***

The American Rescue Plan Act requires a request that is reasonable and proportional to the level of negative economic impact your organization experienced. This means the request you describe below should not be greater than the economic harm your organization has suffered.

Please describe your project proposal and address the following:

- What project will be undertaken with these funds?
- What is the estimated lifespan of the project/property improvement?
- How does it address the negative economic harm you described in the previous question?

The Board of Directors for the Palm Harbor Museum is requesting funds for two capital projects:

#### A. Entry Ramp Replacement.

Currently, the Museum has an aging wooden entrance ramp. The ramp is gently sloping to provide an ADA compliant entrance for mobility impaired and wheelchair bound visitors, volunteers and patrons. The foot boards and top handrails are deteriorating. Dedicated volunteers have been replacing, patching and painting these ramp areas for years. The project will replace the wooden ramp with a new, sturdy composite material ramp. Composite materials are resistant to sun, wind and rain damage and have a life expectancy of at least ten years, and likely longer.

The project steps include:

- Approval of the final drawing, specifications, and construction contract by the Pinellas County Planning Dept. who will steer our permitting with Pinellas Building Services Dept.
- Building permit to be obtained by the construction company.
- Materials ordered using the final measurements.
- 2 Replacement will be completed in two phases upper ramp and the lower ramp. This will allow use of one ramp while the other is replaced.
- 2 A final inspection will be made by the Pinellas County Building and Development Review Services.
- 2 The construction company will be responsible for any adjustments needed.
- Estimated time needed: 8 months.

#### B. Installation of Outdoor Lavatory.

The historic Hartley House, home of the Palm harbor Museum, has one indoor, residential style restroom. During mid-size or large event overuse of the restroom causes plumbing issues. The indoor restroom is also inconvenient for hosting outdoor events. This project will provide an outdoor lavatory similar to the style found in many parks.

The project steps include:

- Approval of the final drawing, specifications, and construction contract by the Pinellas County Building and Development Review Services. This includes pre-approval for plumbing hook-up to the current septic tank
- Building permit to be obtained by the Palm Harbor Historical Society.
- ② Order will be placed for an approved prefabricated, single door, ADA compliant lavatory, complete with all fixtures.

- Foundation will be prepared.
- Upon delivery, installation will begin.
- Plumbing will be connected to water supply and sewer to current septic tank, by Pinellas County designated plumbers.
- 2 A final inspection will be made by the Pinellas County Building Services.
- Estimated time needed: 8 months.

## Number Served\*

How many people will directly benefit from this capital purchase annually?

3150

# Unduplicated vs. Duplicated\*

Is the number indicated above duplicated or unduplicated?

**Duplicated:** A client is counted each time they access services

Unduplicated: A client is counted once, regardless of the number of times they access services

**Example:** ABC Food Bank operates two mobile food pantries, one in Clearwater and one in St. Petersburg. Taylor, a Pinellas County resident, goes to both food pantries. If ABC Food Bank counts Taylor's visit TWICE, it is **duplicated**. If ABC Food Bank counts Taylor's visit ONCE, it is **unduplicated**.

Duplicated

# Other (Explanation Required)\*

If you selected "Other" in the previous question, please explain how your organization determined the number of clients that will benefit from the proposed capital project.

3,150 = Goal of 3,000 Visitors and 150 Volunteers will directly benefit from this capital purchase annually.

# Organizational Sustainability\*

How does this project contribute to the long-term sustainability of your organization and the work it does? That is, what impact will this project have on your organization and/or its clients over the long-term?

Examples include increased service capacity, reduced cost of delivering services over time, higher-quality or more equitable service delivery, and increased lifespan/quality of property.

Quantifiable numbers will strengthen your answer.

The ramp replacement will provide:

- At least 10 years of safe, ADA compliant access to the Museum.
- Decrease the amount of time and volunteer hours (approx. 5 hr per month, 60 hours per year) spent on repairs, mending and painting.
- Decrease the annual funds spent on repairs, mending and painting (material cost = \$150 per year as we have repurposed existing lumber on hand)
- Replacing the wood with composite material decreases the vulnerability to Florida weather.

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- Improved aesthetics of the Museum.
- \* Increased safety for visitors and volunteers as the new ramp will do away with tripping hazards and rotting boards.
- \* Increased accessibility, as obstacles must be placed when boards become rotten to keep people from stepping on these. Most recent repair work for the worst area was a done by a volunteer on September 22, 2023
- \* Higher quality, more equitable accessibility to our Museum for all volunteers (30-50 per week) and visitors (6-150 per week).

The outdoor lavatory will provide:

- Convenience for all visitors and volunteers, especially the elderly and disabled.
- Encourage rental use of the grounds for mid-size to large events.
- \* Reduction of expenses as PHHS will not need to rent a porta-potty for fundraising events (\$250 per event)
- \* Ease of ADA accessibility. One restroom, first added to the home in the 1960s, was upgraded in 1997. It is able to be entered by those with a walker or wheelchair but entry is off a narrow hallway with minimal clearance. The outdoor restroom will be much easier for those with mobility challenges to negotiate.
- \* Greatly lessen the concern of only having one restroom during events, and the consequences when this one restroom becomes inoperable.

# **Project Specifics**

#### Permits\*

Please describe any permits necessary for the successful completion of this proposed project. Be sure to include any permits already obtained or in progress, and/or what the timeline is to acquire permits.

Building permits will be required for both projects.

The construction company will apply for the Ramp Replacement permit.

The Palm Harbor Historical Society, Inc. will apply for the Outdoor Lavatory permit (Certificate of Appropriateness). Due to the high volume of requests after Hurricane Idalia, 2-3 months is estimated for this phase.

#### Plan Set\*

Do you have a plan set for this project?

A plan set refers to the "batch" of plans, drawings, prints, files, etc., that you receive from an architect that explains what needs to be built, how, and where. **Not all qualifying projects in this process require a plan set.** 

If you answer Yes, you should upload the Plan Set in the question below.

Yes

## Plan Set Upload

If you answered "Yes" above, please upload the Plan Set here. If you have trouble with file size limitations, please reach out to Rose Cervantes at rcervantes@pinellascf.org. If you have any narrative to accompany the plan set, you may write it below.

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#### PDF files are permitted.

SitePlanPHHS.pdf
Orange is the Entrance Ramp Replacement.
Yellow is the Outdoor Lavatory.

# Construction Schedule/Timeline\*

Given a spending deadline of December 31, 2026, give a detailed and **realistic construction schedule**/timeline as to how this large capital project will be executed and completed. If there are phases to this project, indicate so in the narrative below. If you specified that permits were needed for this project above, ensure you include the acquisition time in the schedule.

#### Please include the following:

- 1. How the timeline/schedule was developed, and by whom.
- 2. Timeline of planning and execution. Please include start and end dates by month and year. For example, April 2023 June 2023.

#### Example:

Better Tomorrow is proposing the expansion of their counseling center. This requires a 2-month planning phase, one month to obtain all necessary permits, and four months to build. Better Tomorrow would list each phase, a brief description of what takes place in each phase, and an estimated start and completion date for each phase, and an explanation of how the schedule was developed.

The Timeline/Schedule was developed by a recently retired professional from Pinellas County, now a PH Museum volunteer, who has frequently worked on projects within Pinellas County. PH Museum Board and Volunteer grant writers consult with our County Liaison, Nancy McKibben and Principal Planner, Tom Scofield.

## Ramp Replacement:

December, 2023 - February, 2024 Planning Final Measurements, Final Site Drawing, Final Approval from Historical Planning Office, Certificate of Appropriateness Application submitted.

February, 2024 - April, 2024 Materials ordered and delivered.

April, 2024 - June, 2024 Lower Ramp & Upper Ramp replacement.

June, 2024 - July, 2024 Final Inspection, Corrective Action, if needed, Ribbon Cutting.

#### **Outdoor Lavatory:**

April, 2024 - June, 2024 Planning Final Measurements, Site Drawing, Final Approval from Historical Planning Office, Permit Application.

June, 2024 - August, 2024 Manufacturing and delivery of lavatory building, ordering. Scheduling of plumbing team.

August, 2024- September, 2024- Foundation Construction.

September, 2024 - October, 2024 Installation of lavatory, Plumbing hook-up.

October, 2024 - November, 2024 Final Inspection, Corrective Action, if needed, Ribbon Cutting.

# Team Leadership\*

Please describe the following:

- 1. The team and leaders that will be overseeing this proposed project.
- 2. Their relationship to your organization
- 3. Their role in this project

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#### 4. Whether or not they have overseen similar projects

Nancy McKibben, MPA, CPM

Assistant to the County Administrator Representing Unincorporated North County Communities at Pinellas County Government

1190 Georgia Ave.

Palm Harbor, Fl 34683

(727)464-4812

nmckibben@pinellas.gov

Ms. McKibben serves as liaison and advisor between the Palm Harbor Historical Society and the Pinellas County Administrator. She provides resources for Unincorporated North Pinellas County and approves all projects for the County. She has 14 years' experience with Pinellas County Public Works in Engineering and Project Management and 4 years in her current position.

Tom Scofield Preservation Planner for Pinellas County 310 Court Street 1st Flo Clearwater, Florida 33756 (727) 464-8200

Mr. Scofield reviews, advises and approves all projects for the Museum to assure historical appropriateness. He has over 30 years' experience in Historical Planning.

For Palm Harbor Historical Society:

Bob Fortner, President unityphrev@gmail.com Jean Barnes, Past President jeanbarnes@aol.com Erhan Ozey, Treasurer erhanozey@msn.com

Stephanie Andrews, Secretary stephanie.andrews@ymail.com Terry Fortner, Volunteer tcf53@hotmail.com

Lynn Geist, Volunteer tct53@notmail.com geistlynn8@gmail.com

Board Members and volunteers planned the projects. They will coordinate the construction at the Museum including contracts, scheduling, timelines and financial accountability to assure all aspects of the grant requirements are met. Projects previously overseen by team members include Smithsonian "Meet Me at the Museum" via Florida Humanities Council, Pinellas Community Foundation Faith Mission projects, Pinellas County Municipal Services Taxing Units Grant Project, Grant Projects at the Florida Botanical Gardens, and Grants in excess of \$500,000.00 for Pinellas County Schools Food and Nutrition Department.

# Geographic Impact and Priority Populations

The ARPA Nonprofit Capital Project Fund seeks to offset the negative economic impact Pinellas nonprofits faced due to the COVID-19 pandemic. Organizations who serve disproportionately impacted communities will be considered as serving a priority population. There are several ways to determine if your clients were disproportionately impacted.

Examples of disproportionately impacted communities include those who meet at least one of the following descriptions:

- Low- and moderate-income household and communities
- Households that qualify for federal assistance programs, such as SNAP and TANF

- Historically marginalized communities (BIPOC communities, persons with disabilities, LGTBQ+, religious minorities, and other communities that fit in the Equity definition provided on the ARPA website and application)
- Organization located or serve households within a Qualified Census Tract (QCTs)
  - Defined by U.S. Department of Housing and Urban Development (HUD)
  - o To assess if your organization serves or is headquartered in a QCT, use this link. In the top righthand corner, choose the state of Florida and Pinellas County. Then on the left-hand side of the screen, click the box next to "Color QCT Qualified Tracts." The QCT zones are denoted in purple. You can also map your address by adding it into the address box at the top to see if your location is inside the zones.

## Benefits and Geography of Project\*

Please describe how the communities/clients that will benefit from this capital purchase, and how they were disproportionately impacted by the pandemic according to the examples above.

The immediate area of Palm Harbor and East Lake has a population of over 93,000 (US Census, 2020): all potential Palm Harbor Museum visitors.

Palm Harbor Demographics:

- \*Nearly 40% of residents are retirement-age (over 55 years) with median income of \$64,222; 95.0% have graduated HS; 35.5% have BA or higher.
- Race/Ethnicity: 89.5% White; 3.0% Asian; 2.1% African American; <1% Native American; 4.1% Two or more races; 7.8% Hispanic.
- Gender: 52.8% female
- Age: 16.1% under age 18; 27.2% age 65+
- Disability: 8.5% of Palm Harbor residents have a disability.
- Disability: 10% of Pinellas residents have a disability (US Census, 2020).

Ease of accessibility to Palm Harbor Museum for clients living with disability, retirees and lower income households is the goal of our capital purchase of a renovated, safe entry ramp and the addition of the ADA restroom.

During the difficult months of COVID closure, our Museum pursued "duties of care":

- 1. To survive the pandemic with ability to emerge and resume our role in service to our community,
- 2. To care for the volunteers and members who make the museum itself possible.
- 3. To provide programming and education in spite of COVID. However, during the months of Museum closure retirees, special needs individuals, and low and moderate-income households could not be served.

Based on SNAP data Florida has the second highest level of welfare recipients in the nation. Our visitors and volunteers include racially/ethnically diverse individuals. We see "with our own eyes": single parents with children, young people with tattoos and creative, colorful hairstyles, grandparents with visiting relatives, groups of adults living with mental challenges, individuals using walkers or wheelchairs, school tours, individuals from historically marginalized communities. We cannot assess the pandemic impact for these guests as no visitor fills out any personal data form. Museum services are free.

Our mission of sharing appreciation & knowledge of history is important as a factual basis for decisions all citizens face, as we engage in civic interactions & responsibilities.

# **Headquaters Location\***

Please provide your organization's headquarters address as it appears on your Sunbiz account. To check your registration with Sunbiz, you may search their database.

Palm Harbor Museum 2043 Curlew Rd, Palm Harbor, FL 34683

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# Project Location\*

Please provide the address or intersection where the property being modified is.

Palm Harbor Museum 2043 Curlew Rd, Palm Harbor, FL 34683

# Rented Property

You have indicated that the property involved in this proposal is rented. Please answer the questions below.

## Tenant Responsibility\*

Please explain how your organization is responsible for modifying the building despite being rented. Be sure to describe the length of your organization's lease and to indicate whether or not you have obtained permission from the landlord for the proposed project.

The Lease Agreement was executed on September 24, 2014 and is automatically renewed for three successive 5-year terms. The Palm Harbor Historical Society has approval for these projects based on these lease provisions:

10. Alterations, Mechanic's Liens: Lessee (Palm Harbor Historical Society) will not make alterations, improvements, or additions in or to the Premises, or install any equipment of any kind that will require any alteration or addition to, or use of the water, heating, air-conditioning or electrical or other building systems or equipment, without prior consent of COUNTY. Lessee shall pay for all charges for labor, services, and materials used in connection with any improvements or repairs to the Premises undertaken by Lessee.

Exhibit "B": Museum Responsibility: Remove the existing old wood stairs, decking and ramp and replace with new (suggest composite material).

Tom Scofield, Principal Planner, Historic Preservation Specialist, Housing & Community Development Department, Pinellas County Government, provided this statement in support:

"From the historic preservation perspective, pursuing the grant for a new stand-alone accessible public restroom facility meeting ADA standards at Palm Harbor Museum will substantially improve the current situation for visitors and will mitigate the impact of providing such a facility within the designated historic building."

## Landlord\*

Please enter the name and address of the property owner/landlord.

Pinellas County Board of County Commissioners, 315 Court St., Clearwater, FL 33756

## Lease Upload\*

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Please upload the executed lease you currently have with your landlord. If there are any important circumstances to note, use the text box below.

PH Museum Lease Agreement 2014 (1).pdf Please see:

Page 3, #10 - Alterations and Mechanics Liens

Page 12, Exhibit "B" - Repairs and Renovations List, Museum Responsibility, last bullet.

# Community Connection

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PCF understands the value of authentic and diverse representation in philanthropy and in Pinellas County. To this end, we ask demographic and representation questions to gauge the human impact your organization has on the communities you serve.

PCF has generalized the demographic data questions more than it has in other processes because of the public nature of this process. PCF understands that identity disclosure can be a sensitive matter and wants to respect your organization's board and staff. If your organization feels comfortable sharing more detailed demographic information, it may do so in the "Community Representation and Connection" section.

## Community Representation and Connection\*

Describe how your organization is representative of, or has authentic connections to, the community your proposal seeks to serve. You can list other community-based organizations that work on programming with you and/or list examples of your work within this community.

If your staff, board, executive leadership, or long-term volunteers have personal identities or experiences that allow for a meaningful connection with your clients, please feel free to describe this connection below. When possible, please use internal data or specific details to describe how your organization is representative and connected to the communities you serve.

Palm Harbor Museum constantly strives to provide accessibility and services for our elderly and special needs population: elders with family members, group tours from retirement homes, group visits from congregate care facilities (including physically mentally challenged adults). We have invaluable older volunteers, who live with handicaps, yet wish to be at the Museum to give of their expertise. Palm Harbor Museum seeks to be inclusive for anyone challenged with mobility issues or living with physical handicaps. We serve volunteers and visitors who deal with visual, sensory, or auditory issues and including those who live with Autism or PTSD.

Palm Harbor Museum is fortunate to attract dedicated volunteer docents and hosts who have deep interest in sharing history. We have a dependable team of 70+ volunteers and in fact at times there are more volunteers working at the Museum on various longterm projects (collection care and data entry, oral history filming, museum upkeep, landscape care) than drop in visitors. Some volunteers are lifelong residents of the area with deep and wide community connections. Some are retired professionals experienced in communications and interactions. Some are students or recent graduates of Museum Studies programs. Volunteers are passionate about helping at a facility where their talent and passion is put to use. Core volunteer team members include those who self identify as BIPOC, LGBTQ and/or Neurodiverse/Physically disabled.

We partner with Palm Harbor Library, providing themed exhibit materials for display in the Library's community room and in a designated display case. Monthly Museum programs are presented in the Community Room there. This collaboration has increased visibility for Palm Harbor Museum as it enriches what the Library can showcase of area history.

Whenever possible our volunteer archival research team responds to questions in regard to local history. These questions are often received in email queries or phone messages. About 1/4 of the inquiries are made

from out of our immediate region. Of special significance was a recent request from a producer at 60 Minutes. Our volunteer researchers were able to steer images and information that became part of an important investigative segment regarding the "Uncovering Black Cemeteries Paved Over in Florida."

# **Board Membership\***

Do your board members consider themselves a member of one or more of the following populations?

- BIPOC defined as Black, Latino, and Indigenous and Native American persons, Asian Americans and Pacific Islanders and other persons of color
- LGBTQ+ (Lesbian, Gay, Bisexual, Transgender, Queer+)
- Neurodiverse/physically disabled

Neurodiverse/physically disabled

## Executive Level Leadership Team\*

Does your executive leadership team consider themselves a member of one or more of the following populations?

- BIPOC defined as Black, Latino, and Indigenous and Native American persons, Asian Americans and Pacific Islanders and other persons of color
- LGBTQ+ (Lesbian, Gay, Bisexual, Transgender, Queer+)
- Neurodiverse/physically disabled

None of the above

## CEO/Executive Director\*

Does your CEO/Executive Director consider themselves a member of one or more of the following populations?

- BIPOC defined as Black, Latino, and Indigenous and Native American persons, Asian Americans and Pacific Islanders and other persons of color
- LGBTQ+ (Lesbian, Gay, Bisexual, Transgender, Queer+)
- Neurodiverse/physically disable

None of the above

# Financial Overview

Printed On: 2 November 2023

#### BIDS MUST BE DATED JULY 5, 2023 OR LATER.

• The file attached below should contain current, verifiable bids, estimates, or price lists [from your potential vendor(s)]. *Please ensure there is a date noted on the bid or some annotation as to when when you obtained these estimates/bids.* 

- If your project costs LESS than \$75,000, you must upload TWO verifiable bids or estimates for the proposed project.
- If your project is <u>EQUAL TO</u> or <u>MORE THAN</u> \$75,000, you must upload THREE verifiable bids or estimates for your proposed project.
- If you have already selected a contractor for this process and do not have multiple bids to upload, please ensure you answer the narrative questions below thoroughly.

## Bid/Estimate #1\*

PDF files are accepted.

CoverLttr\_Ramp.pdf

## Bid/Estimate #2

PDF files are accepted.

Outdoor Lavatory Project Bids.pdf

## Bid/Estimate #3

PDF files are accepted.

#### Selected Contractor\*

If you have not yet selected a contractor and have uploaded multiple bids above, please write N/A below or you will not be able to submit your application.

If your organization has already selected a contractor for this proposed capital project, please describe the process through which this contractor was chosen, and be sure to answer:

- 1. Was there a competitive bid process? That is, were multiple bids collected in order to evaluate multiple contractors? Describe this process (names of contractors, number of bids collected, prices, and why the contractor was chosen).
- 2. What personnel members at your organization selected the contractor?
- Has a contract been executed with this contractor? If yes, upload the contract here. If no, please describe the status of contract.

If a contractor has already been selected AND a competitive bidding process was not used, the project will lose points.

N/A

No contracts have been executed, all the bid/estimate files are provided.

Project A: Ramp Replacement

Bid/Estimate #1 Bid for ramp Big Fish Exteriors, Inc.

We sought a competitive bid process. Only two local companies responded. One refused to bid. We have included the responsive bid.

Project B: Outdoor Lavatory

- 1. We sought a competitive bid process. All inquiries directed us to contact Leesburg Concrete Company as the single business designated in Florida to supply the prefabricated plumbed outdoor restroom facility we seek. We have included the bid directly from Leesburg Concrete Company.
- 2. Plumbing: We sought a competitive bid process. We received 2 estimates as attached.
- 3. Bid for Foundation Construction proved difficult to obtain. We sought a competitive bid process. Outreach was done to contractors (web search, phone calls and email inquiries). We were told contractors are "fully booked." As attempts to procure a bid for cinderblock foundation were non productive we attach a bid/estimate prepared by a qualified independent contractor familiar with Palm Harbor Museum.

Museum volunteers and board president met with contractors on site (Ramp and Plumbing) and/or had phone conversations or email communications (Restroom Bid and Foundation Bid) previous to receiving bid/estimates.

## **Minority/Woman-Owned Business**

Is your selected contractor, or the bid you are going to choose if funded, one of the following:

- Small-business enterprise (SBE)
- Disadvantaged business enterprise (DBE)
- Minority and/or woman-owned business (MWBE)

Yes

## Related Parties\*

Are any of the contractors/vendors that have provided bids/estimates a related party to your organization?

#### **Examples of Related Parties**

- A board member that owns the contracting company that provided a bid
- The relative of a director, officer, or executive team member owns a company that provided an estimate
- The CEO of the applying organization has a financial interest in the construction company providing a bid

If yes, identify the vendor and describe the relationship.

If no, write "No related parties below."

No related parties.

# **Budget Detail\***

Please upload a clear, easily readable budget that breaks out costs for this proposed project. Ensure that it is clear what portion would be paid for through this grant funding and what would be paid for from other sources. **Be sure that the budget includes 10-20% for contingencies and any costs related to performance and payment bonds for construction projects.** 

If you are going to request the permitted indirect cost of up to 5%, please be sure this is represented in your budget.

An example budget is available here.

If you have additional notes to add to your budget summary, you may do so in the text box below.

#### PDF and Excel files are allowed.

Budget Summary and Details.pdf

## Other Funding Sources\*

Please describe any other funding that your organization has applied for or obtained for this project. This includes but is not limited to Community Development Block Grants (CDBG), local government grants (including Tourist Development Council funding), foundation grants, and donors (you do not need to disclose donor identities, simply amount raised that is allocated to this project). This includes any matching grants or in-kind contributions you may have obtained.

If none, please explain why no additional funding sources have been pursued.

Please be sure all funding sources below are represented in the "Applicant Match" column in the Budget Summary you have uploaded above.

No additional funding sources are required for these projects. Palm Harbor Museum relies on volunteers (Inkind contributions) for the operations and upkeep of Palm Harbor Museum itself including the research and effort to prepare this grant application. The Pinellas County Board of County Commissioners and Building Department provide staffing resources in support of the Museum for specific capital improvements, also inkind.

# Changes in Operating Costs\*

Please answer this question based on the descriptions below:

- If this project **increases** ongoing operational costs (programmatic, operating maintenance or other costs), how will you compensate for the difference?
- If this project **decreases** ongoing operating costs, how will it do so?
- If this project does not affect operating costs, please note so below.

Ramp Replacement- Decrease in operating costs. The Museum will no longer need to purchase paint, replacement lumber, and related supplies. Volunteer time currently spent on repairs to the ramp will be reallocated to address other Museum needs.

Outdoor Restroom – Acceptable increase in operating costs. Additional water for toilet and sink, possible additional treatment & pumping of septic tank and additional paper & cleaning supplies. These will be covered by using operating revenue generated due to expanded Events. Regular volunteer hours will be assigned for cleaning. Additional expenses will also be offset by fewer plumbing repairs for indoor restroom.

# Fund Management Capacity\*

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Please describe your organization's capacity to manage these potential ARPA funds in terms of fiscal management and financial infrastructure.

This includes, but is not limited to, the use of accounting software that can track a general ledger and multiple accounts and the ability to work on a reimbursement-basis.

The inability to handle a reimbursement-based grant does not disqualify your organization from applying.

A separate sub-account will be added to the Museum's financial software, QuickBooks. All income and expenses will be reported separately from other financial activities. The contracted Museum accountant and Board treasurer will be responsible for accurate and thorough record-keeping. Board President and Volunteers will assure requests for reimbursement are accurate and timely.

The Board of the Palm Harbor Historical Society and Volunteers have a long track record of providing responsible stewardship of grant funds and will continue to do so with these ARPA funds.

## Corrective and Investigative Action/Grant Recall\*

In the past three (3) years, has your organization had any of the following occur:

- 1. Been under legal investigation by a local, state, or federal institution?
- 2. Been placed on a corrective action plan by a funder?
- 3. Had grant funding recalled by a funder?

If yes, please describe the investigation, corrective action plan and/or grant recall, and the current status of such incidents. If no, write "N/A"

No Corrective or Investigative Action/Grant Recall.

# Organization Documentation

Please reach out to PCF staff if you have trouble uploading the files below. We are able to assist with file conversion and file compression.

# **Organization Budget\***

Please upload your most recent, board-approved organizational budget for this fiscal year. PDF and Excel documents are accepted.

2023 Budget.xlsx

#### **Board of Directors List\***

Please upload a current list of members of your organization's Board of Directors. Excel, Word, and PDF formats are acceptable.

2023 PHHS Board.pdf

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#### IRS Form 990\*

Please upload a PDF copy of your most recently submitted IRS Form 990.

If Form 990 from your most recent fiscal year is delayed or you have received an extension, please explain in the text space below. You may also explain if you don't have a Form 990 due to organization type. You should still upload the most recent publicly available 990.

If you file a Form 990-EZ and do not have anything to attach, please note so below.

PHHS 990 for 2022.pdf

#### **Most Recent Financial Statements**

Upload a PDF version of your most recent financial statements. If you have audited financial statements, please upload the most recently conducted audit. If you do not have a recent audit, please explain why.

2022 12 PHHS Financial Stmts Pkg.pdf

Palm Harbor Museum does not have an audit due to the smaller size of our operations budget & the expense of having an audit conducted.

We do however work with a certified accountant who reviews finances, files PHHS 990 and tax documents. The PHHS Board reviews finances monthly.

In every way possible volunteers operate the PHHS non profit operation with care and integrity.

# Insurance

# **Evidence of Insurance Coverage\***

Grantees of the ARPA Nonprofit Capital Project Fund will be required to maintain appropriate insurance related to your operations and this project. PCF will determine whether this coverage is appropriate.

Please upload evidence of insurance.

If your organization does not have evidence of insurance coverage, please provide an explanation as to why.

COI - County 2023-2024.pdf

# Insurance Requirement\*

If you are awarded a contract from the ARPA Nonprofit Capital Project Fund, you will be required to list Pinellas Community Foundation as an additional insured through your general liability insurance or other appropriate coverages for the duration of the contract. If you would like to check with your insurance carrier on how to do this, here is the information about PCF you will need:

Pinellas Community Foundation

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17755 US Highway 19 N Suite 150 Clearwater, FL 33764 727-531-0058

Please check the box below to indicate that you understand and will be able to comply with this requirement if you are awarded a contract.

PCF will not ask for a certificate naming us as additional insured until the contracting stage.

Yes, I understand and will comply with this requirement if awarded a contract.

# **Post-Grant Requirements**

## Reporting Requirements Acknowledgment\*

Grantees will be required to submit a pre-award agreement within two weeks of receiving an award notice. In addition, grantees will be required to submit monthly expenditure reports until their project is completed and their contract is closed out.

Financial information justifying all expenditures will also need to be provided. This includes but is not limited to:

- Invoices
- Canceled checks
- Credit card statements, along with a record of paying the credit card.

If you have any questions, please contact Rose Cervantes, ARPA Program Officer at rcervantes@pinellascf.org. Yes, I agree to submit this grant agreement and impact report within the specified timeframes.

# Additional Information

# **Additional Upload**

If you have something to share, you can upload it here in PDF format.

# Anything else to share?

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Is there anything else that you would like Pinellas Community Foundation to know or other information your organization would like to share that isn't addressed elsewhere in this application?

We are grateful for this opportunity to fund a replacement ramp and additional restroom. Both projects are critical to the ability of Palm Harbor Museum to serve a wide range of community members. Our "clients" include permanent local residents, individuals who are tourists to our region, and an impressive number of dedicated, active volunteers. Everyone is enriched due to interactions and involvement at Palm Harbor Museum.

Thank you.

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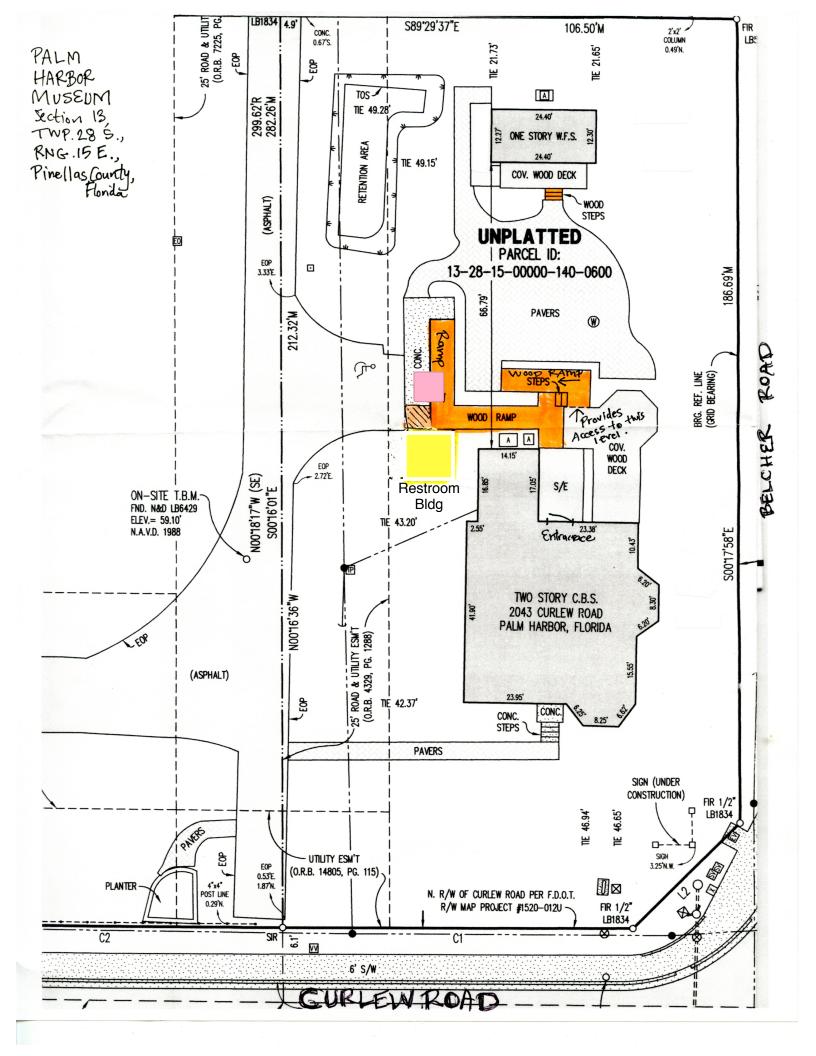
# File Attachment Summary

# Applicant File Uploads

- SitePlanPHHS.pdf
- PH Museum Lease Agreement 2014 (1).pdf
- CoverLttr\_Ramp.pdf
- Outdoor Lavatory Project Bids.pdf
- Budget Summary and Details.pdf
- 2023 Budget.xlsx

Printed On: 2 November 2023

- 2023 PHHS Board.pdf
- PHHS 990 for 2022.pdf
- 2022 12 PHHS Financial Stmts Pkg.pdf
- COI County 2023-2024.pdf



Current 1000

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#### LEASE AGREEMENT

THIS LEASE AGREEMENT, made this 23 nd day of Signature, 2014, by and between PINELLAS COUNTY, a political subdivision of the State of Florida, hereinafter referred to as "COUNTY," which terms shall include COUNTY'S designated agent(s) and/or successors in interest, and PALM HARBOR HISTORICAL SOCIETY, INC. a Florida Non Profit corporation, hereinafter referred to as the "LESSEE," or "PHHS" jointly referred to as the "Parties."

#### WITNESSETH

WHEREAS, the historical Judge Hartley homestead at 2043 Curlew Road, Palm Harbor, Florida was acquired by Pinellas County in 1996 as part of the Belcher Road widening project; and

WHEREAS, County Administrator Fred E. Marquis recommended adoption of Resolution (96-52) in March 1996 designating the "Judge Hartley House" as part of the Heritage Village, and establishing the Palm Harbor Historical Museum on the site; and further recommended approval of an Agreement for Management and Maintenance of the aforementioned museum with the Palm Harbor Historical Society, Inc.; and

WHEREAS, the PALM HARBOR HISTORICAL SOCIETY was formed to help promote retention and preservation of north Pinellas County historical artifacts and foster education and appreciation for Pinellas County's heritage; and

WHEREAS, PHHS has expressed interest in leasing the Premises from COUNTY in order to continue its current activities.

NOW THEREFORE, the Parties agree to the following:

- 1. PREMISES: In consideration of the rent hereinafter agreed to be paid by the LESSEE to COUNTY, and in consideration of the covenants of the respective Parties hereto, COUNTY does hereby lease to LESSEE those certain Premises located at 2043 Curlew Road, Palm Harbor, Florida, also known as the North Pinellas Historical Museum, as shown in Exhibit "A" attached hereto and made a part hereof, and hereafter referred to as "Premises."
- 2. TERM: This Lease shall be for a term of ten (10) years. The Lease shall commence upon execution by the Board of County Commissioners and continue in full force and effect until terminated. The rental for the term shall be One Dollar (\$1.00) dollar(s) per year, [receipt of which is hereby acknowledged.]

This Lease shall automatically renew for Three (3) successive Five (5) year terms. LESSEE or COUNTY may terminate this Lease at anytime in writing, not less than One Hundred Eighty (180) days prior to its intent to terminate.

3. USE: The Parties hereto agree and LESSEE further covenants that during the continuance of the Lease the Premises shall be used and occupied for use as a public museum, and for such "private events" and "special events" as are customary for support of PHHS and for no other purpose or purposes, without the written consent of the COUNTY The LESSEE shall conduct its business at all times in a reputable manner. "Private events" as used above may include events such as weddings and receptions and other fundraising events for the revitalization program. This Lease is made on the express condition that the Premises shall be used only in conformance with the applicable laws and ordinances. LESSEE shall not make or permit any offensive or unlawful use of said Premises. All rights of LESSEE hereunder may be terminated by the COUNTY in the event that any other use be made thereof. PHHS shall be permitted one (1) on site "recurring market event" per month.

The LESSEE shall be permitted to serve alcoholic beverages on the Premises, subject to the provisions of Exhibit "C" in the attached insurance addendum.

LESSEE shall not allow the Premises to be used for activities that are prohibited in all COUNTY-owned or COUNTY-occupied buildings or land under the provisions of Federal, State, or local laws, rules, regulations, or ordinances. By way of illustration and not limitation, State law prohibits the use of COUNTY-occupied buildings or land for political fund raisers [see §106.15(4), Florida Statutes], and Federal and State law prohibits use of COUNTY-occupied buildings or land for any implied promotion of a religion. LESSEE shall not make or permit any offensive or unlawful use of said Premises. All rights of LESSEE hereunder may be terminated by the COUNTY in the event that any other use be made thereof.

- 4. TAXES: In the event that as a result of this Lease any ad valorem, rental, sales or similar taxes are levied upon the leased Premises, LESSEE shall pay all such taxes so imposed.
- 5. UTILITIES: LESSEE agrees to promptly pay all charges for gas and electricity supplied the Premises, whether determined by meter or otherwise. COUNTY shall not be liable in any manner for damages to LESSEE'S business and/or inventory, or for any other claim by LESSEE, resulting from any interruption in utility services. The LESSEE will also pay for all water consumption, sewer charges, trash collection, and telecommunication service.
- 6. MAINTENANCE, REPARIS AND SERVICES: COUNTY shall be responsible for roof replacement and repairs, foundation and subflooring, exterior walls including dormers, windows, and

HVAC replacement. TENANT shall be responsible for the HVAC (preventative and corrective maintenance), signage, plumbing leaks and obstructed drains, light bulb replacement, interior aesthetics, future fence repairs, electrical repairs, telecommunications wiring/equipment, water heater and appliances, septic tank maintenance, and any other items not specifically maintained by COUNTY. TENANT shall be responsible for lawn and landscape maintenance. COUNTY will be responsible for tree trimming as they affect structures on the premises.

In the event COUNTY pays any monies required to be paid by TENANT hereunder, COUNTY shall demand repayment of same from TENANT within ten (10) days of payment and TENANT shall make such payment within ten (10) days of receipt of demand. TENANT'S failure to timely reimburse COUNTY shall be deemed a breach of contract.

COUNTY shall be responsible to complete repairs and renovations prior to December 31, 2014 as provided in the attached Exhibit "B".

- 7. INSURANCE: LESSEE shall procure and maintain during the term of the lease insurance pursuant to the requirements noted in Exhibit "C," attached hereto and made a part hereof.
- 8. LIABILITY OF COUNTY: COUNTY shall not be liable to LESSEE or any other persons for any injury, loss, or damage to property or to any person on said Premises.
- 9. ASSIGNMENT AND SUBLETTING: LESSEE agrees not to assign or in any manner transfer this Lease or any estate or interest therein without the previous written consent of the COUNTY, and not to sublet said Premises or any part or parts thereof or allow anyone to come in with, through or under it without like consent. Such consent is at the sole discretion of COUNTY. Consent by the COUNTY to one or more assignments of this Lease or to one or more sublettings of said Premises shall not operate as a waiver of COUNTY's rights under this section.
- 10. ALTERATIONS, MECHANIC'S LIENS: LESSEE will not make any alterations, improvements or additions in or to the Premises, or install any equipment of any kind that will require any alteration or addition to, or use of the water, heating, air-conditioning or electrical or other building systems or equipment, without the prior written consent of COUNTY. LESSEE shall pay for all charges for labor, services, and materials used in connection with any improvements or repairs to the Premises undertaken by LESSEE. All such additions, improvements or fixtures, except movable office furniture, shall become the property of COUNTY and remain upon the Premises and be surrendered at the end of the Lease.

Any mechanics liens against the Premises, LESSEE'S leasehold, or the land and building arising out of work performed by or for LESSEE are hereby expressly prohibited and in the event of

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the filing of any Claim of Lien, LESSEE shall promptly satisfy same or transfer it to a bond; and LESSEE shall in any event protect COUNTY'S interest in underlying real estate and shall hold COUNTY harmless against any such claims.

- 11. COVENANT AGAINST LIENS: LESSEE shall have no power or authority to create any lien or permit any lien to attach to the present estate, reversion or other estate of COUNTY in the Premises herein, on the building or other improvements thereon, and all materialmen, contractors, artisans, mechanics, and laborers and other persons contracting with LESSEE with respect to the Premises or any part thereof, are hereby charged with notice that they must look to LESSEE to secure payment of any bill for work done or material furnished or for any other purpose during the term of this Lease.
- 12. POSESSION: LESSEE shall be granted possession and full use of the Premises upon the commencement of this Lease and all terms and conditions set forth herein shall immediately commence upon the signing of this Lease by all Parties.
- 13. INDEMNIFICATION: LESSEE covenants and agrees that it will indemnify and hold harmless COUNTY and all of COUNTY'S officers, employees, contractors and subcontractors from any claim, loss, damage, cost, charge or expense arising out of any act, action, neglect or omission by LESSEE, its officers, employees, agents, contractors, or subcontractors during the performance of this Lease, and any extensions thereof, whether direct or indirect, and whether to any person or property to which COUNTY or said parties may be subject including COUNTY'S costs and attorneys fees incurred in defending such claims, except that neither LESSEE nor any of its officers, agents, employees, contractors or subcontractors will be liable under this section for damages arising out of injury or damage to persons or property directly caused by or resulting from the sole negligence of COUNTY or any of its officers or employees.

14. CONDEMNATION: If the whole or any part of the Premises hereby leased shall be taken by any public authority under the power of eminent domain, then the term of this Lease shall cease on the part so taken from the day the possession of that part shall be required for any public purpose, and the rent shall be paid up to that day, and if such portion of the Premises is so taken as to destroy the usefulness of the Premises for the purpose for which the Premises were leased, then from that day the LESSEE shall have the right to either terminate the Lease and declare the same null and void, or to continue in the possession of the remainder of the same under the terms provided herein, except that the base rent shall be reduced in proportion to the amount of the Premises taken. If the LESSEE shall fail to terminate this Lease as aforesaid within thirty (30) days after notice of said taking, said failure shall be regarded as a waiver of its right to cancel, whereupon this Lease shall continue for the then balance of the term. If LESSEE exercises its right to cancel, all advance rent paid by the LESSEE shall be adjusted to the date of said taking. If LESSEE fails to exercise its right to cancel, LESSEE shall, at its own cost and expense, make the repairs necessary to said partial taking.

The Parties agree that LESSEE shall receive notice of the commencement of condemnation proceedings within ten (10) days of COUNTY'S notice of their initiation if commenced by a third party, or within ten (10) days of their initiation if commenced by COUNTY.

- 15. DESTRUCTION OF PREMISES: If the Premises shall, without fault of LESSEE, be destroyed by fire, storm, or other casualty or be so damaged thereby as to become wholly or partially unusable, LESSEE may, by written notice delivered to COUNTY within thirty (30) days after such destruction or damage, elect to rebuild or repair. In such event, this Lease shall remain in force, and LESSEE shall rebuild or repair the Premises within a reasonable time after such election, putting the Premises in as good condition as they were at the time immediately prior to the destruction or damage. If LESSEE elects not to restore or rebuild, COUNTY may have the option to do so. If neither Party so elects, this Lease shall terminate effective the date of said destruction.
- 16. DEFAULT: If the LESSEE should fail to keep and/or perform any of the terms, covenants, conditions or provisions in this Lease the COUNTY upon becoming aware of the occurrence of a default, shall notify LESSEE of the default and its demand to cure the default. LESSEE shall have fifteen (15) days from the date of notice of default to cure said default, or to commence a cure of such default, which once commenced the LESSEE agrees and shall pursue continuously until the default is finally cured. Upon LESSEE'S failure to either cure said default or commence a cure of said default.

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In the event LESSEE defaults as set out above or elsewhere in this Lease, any monies due from LESSEE during the term of this Lease or any extension thereof, shall, at the option of the COUNTY, become immediately due and payable in full. COUNTY may re-enter the Premises using such force for that purpose as may be necessary without being liable to any prosecution therefore, and COUNTY may repair or alter the Premises in such manner as COUNTY may seem necessary or advisable to relet the Premises. Should COUNTY need to pursue any of its remedies, COUNTY shall be entitled to recover damages, including costs and attorney's fees. Failure to elect any of the available remedies upon the occurrence of any default shall not operate as a waiver of any future election of remedies.

It may be lawful for the COUNTY to declare said term ended and to re-enter upon the Premises and to retake possession of the said Premises by process of law, or the COUNTY may have such other remedy as the law and this instrument afford. The LESSEE covenants and agrees that upon termination of the said term, at such election of the COUNTY, or in any other way, LESSEE will surrender and deliver up said Premises and property peaceably to the COUNTY, their agents and attorneys, immediately upon the termination of the said term.

- 17. SIGNS: LESSEE agrees that any signs or advertising, including awnings, to be used in connection with the leased Premises must have COUNTY'S written approval before installation.
- 18. WAIVER: One or more waivers of any covenant or condition by the County shall not be construed as a waiver of a subsequent breach of the same covenant or conditions, and the consent or approval by COUNTY to, or of any act by the LESSEE requiring the COUNTY'S consent or approval, shall not be construed as a consent or approval to or of any subsequent similar act by LESSEE.
- 19. OBSERVANCE OF LAWS: LESSEE agrees to observe and comply with all local, State and Federal laws, rules, requirements, orders, directives, codes, ordinances, and regulations.
- 20. ACCESS TO PREMISES: The COUNTY shall have the right to enter upon the leased Premises at all reasonable hours for the purpose of inspecting or conducting tests upon the Premises. Such events shall not unduly interfere with LESSEE'S business, except as is naturally necessitated by the nature of the work.

21. RELATIONSHIP OF PARTIES; CONSTRUCTION OF LEASE Nothing contained herein shall be deemed or construed by the Parties hereto, nor by any third party, as creating the relationship of principal and agent or of partnership or of joint venture between the Parties hereto, it being understood and agreed that any other provision contained herein, nor any acts of the Parties herein, shall be deemed to create any relationship between the Parties hereto other than the relationship of COUNTY and LESSEE. Whenever herein the singular number is used, the same shall include the plural, and the masculine gender shall include the feminine and neuter genders, as appropriate.

This Lease shall be governed by the laws of the State of Florida. Any changes in applicable laws which govern this Lease will necessitate a change in Lease terms and conditions which may be affected thereby, at the time such changes may arise.

- 22. SURRENDER: Upon the expiration of the term hereof or sooner termination of this Lease, LESSEE agrees to surrender and yield possession of the Premises to the COUNTY, peacefully and without notice, and in good order and condition, broom clean condition, but subject to ordinary wear and reasonable use thereof, and subject to such damage or destruction or condition as LESSEE is not required to restore or remedy under other terms and conditions of this Lease.
- 23. NOTICES: All correspondence and insurance certificates shall be forwarded to the COUNTY at the following address:

Real Estate Management Department Real Property Division 509 East Avenue South Clearwater, FL 33756

until LESSEE is notified otherwise in writing; and all notices given to the COUNTY hereunder shall be forwarded to the COUNTY at the foregoing address, by registered or certified mail, return receipt requested, until LESSEE is notified otherwise in writing. All notices given to the LESSEE hereunder shall be forwarded to LESSEE at the following address:

Attn: President PALM HARBOR HISTORICAL SOCIETY 2043 Curlew Road Palm Harbor, FL 34683

by registered or certified mail, return receipt requested, until COUNTY is notified otherwise in writing.

- 24. AUDIT: LESSEE agrees to maintain complete and accurate records of all business related to this Agreement. All records shall be maintained in accordance with COUNTY policy, and inspection of records shall be pursuant to Chapter 119, F.S. In addition, COUNTY reserves the right to audit such records pursuant to Pinellas County Code, Chapter 2. LESSEE agrees to retain all business records required by this paragraph for at least three (3) years beyond the term of the Lease or any extensions thereof.
- 25. QUIET ENJOYMENT: The COUNTY covenants and agrees that upon LESSEE performing all of the covenants and conditions aforesaid on LESSEE'S part to be observed and performed, the LESSEE shall and may peaceably and quietly have, hold and enjoy the Premises hereby for the term aforesaid.
- 26. SUCCESSORS AND ASSIGNS: The covenants, provisions and agreements herein contained shall be binding upon and inure to the benefit of the Parties hereto respectively and their respective heirs, executors, administrators, successors and assigns, as applicable, except that the right of the LESSEE to assign or sublet LESSEE'S interest under this Lease is and shall be subject to the written consent of the COUNTY as hereinabove provided, which provision is not intended to waive, qualify or alter in any manner whatsoever by this clause or any other clause herein referring to assigns.
- 27. COUNTY RESERVATION FOR DISASTER RELIEF: Notwithstanding other provisions of this Lease, COUNTY expressly reserves the right to utilize the Premises for disaster preparedness and/or disaster relief activities. Determining the need to exercise this right will be in the sole discretion of COUNTY, but will not preclude LESSEE'S continued use of the Premises to the extent it does not interfere with COUNTY'S disaster-related activities or any other provisions of this Lease.
- 28. PUBLIC ENTITY CRIME ACT: LESSEE is directed to the Florida Public Entity Crime Act, section 287.133, Florida Statues, as amended from time to time, and the COUNTY'S requirement that the LESSEE comply with it in all respects prior to and during the term of this Lease.
- 29. RADON GAS: Radon is a naturally occurring radioactive gas that, when it has accumulated in a building in sufficient quantities, may present health risks to persons who are exposed to it over time. Levels of radon that exceed Federal and State guidelines have been found in buildings in Florida. Additional information regarding radon and radon testing may be obtained from your County public health unit.

30. HAZARDOUS SUBSTANCES: LESSEE shall not cause or permit the presence, use, disposal, storage, or release of any Hazardous Substances on or in the Premises. LESSEE shall not do, nor allow anyone else to do, anything affecting the Premises that is in violation of any Environmental Law. The preceding two sentences shall not apply to the presence, use, or storage on the Premises of small quantities of Hazardous Substances that are generally recognized to be appropriate to normal maintenance use.

LESSEE shall promptly give COUNTY written notice of any investigation, claim, demand, lawsuit or other action by any governmental or regulatory agency or private party involving the Premises and any Hazardous Substance or Environmental Law of which LESSEE has actual knowledge. If LESSEE learns or is notified by any governmental or regulatory authority, that any removal or other remediation of any Hazardous Substance affecting the Premises is necessary, LESSEE shall promptly take all necessary remedial actions in accordance with Environmental Law.

As used in this Paragraph, "Hazardous Substances" are those substances defined as toxic or hazardous substances by Environmental Law and the following substances: gasoline, kerosene, other flammable or toxic petroleum products, toxic pesticides and herbicides, volatile solvents, materials containing asbestos or formaldehyde, and radioactive materials. As used in this Paragraph, "Environmental Law" means Federal Laws and laws of the jurisdiction where the Premises is located that relate to health, safety or environmental protection.

#### 31. TERMINATION OF TEMPORARY ACCESS & USE LICENSE AGREEMENT:

The current Temporary Access and Use agreement for of the Premises shall terminate upon approval of this Lease Agreement.

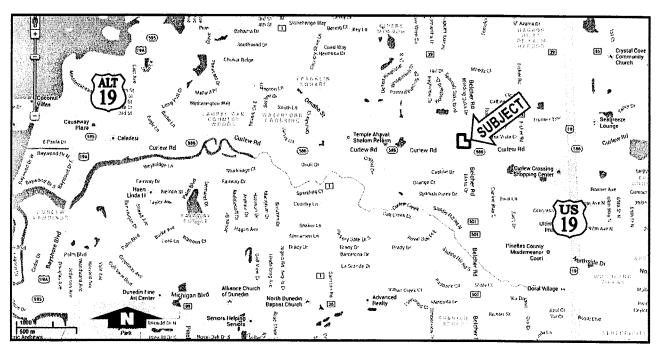
32. ENTIRE AGREEMENT: This Lease Agreement, as hereinabove set forth, including all exhibits and riders, if any, incorporates all covenants, promises, agreements, conditions and understandings between the Parties, and no covenant, promise, agreement, condition or understanding, either written or oral, not specifically set forth herein shall be effective to alter that performance or the rights of the Parties as hereinbefore stated.

IN WITNESS WHEREOF, the Parties hereto have executed this Lease Agreement the day and year first above written.

Print Name: Patricia Harrison  Title: USST. Director	LESSEE: PALM HARBOR HISTORICAL SOCIETY, INC.  By: Frint Name: Kim Pulli  Title: President PHHS
ATTEST: KEN BURKE, Clerk of the Court  By: Allie Amthe  Deputy Clerk  (SEAL)	PINELLAS COUNTY, FLORIDA By and through its Board of County Commissioners By: Karen Seel

# **EXHIBIT "A"**Aerial & Site Location Map 2043 Curlew Road, Palm Harbor





# Exhibit "B" Palm Harbor Historical Society – Museum Property Repair and Renovation List

## **County Responsibility**

- Carefully inspect each window in the structure and replace deteriorated sections (jambs, sills, sash components, etc.). When replacing components, they should be properly primed, painted, & installed (sills sloped down toward exterior, correct flashing, etc.).
- Carefully inspect the joints between stone and remove and tuck point joints that have separated.
- Remove the existing flat roof in its entirety. Provide sloped insulation and a new roof. Flash & counter flash the roof properly into the side of the structure (provide a reglet if/as necessary). Provide new edge drip fascia/flashing. Replace fascia boards as necessary. Repair the interior ceiling leak damage below the flat roof. Repair/replace the deteriorated soffit.
- Have an engineer look at the northeast corner of the building and the cracked lintel on the east face of the building.
- Carefully inspect and repair siding on both dormers.
- The potholes are in a private drive. County Public Works resources cannot be expended on private driveway repairs. Repairs would need to be made by outsider service provider

#### Museum Responsibility

- As new signage is an operational requirement and not an asset preservation requirement, this request would not be considered by the County.
- The existing County phone system is a voice of IP (VOIP) system that is integrated with desktop computer/server system. It is not permissible to provide this service to a non-County function.
- Indoor blinds are considered aesthetic and energy saving accessories, both of which benefit operations and not asset preservation. This request would not be considered by the County.
- The additional lighting on the second floor may not be physically possible due to available power and inaccessibility to run wires in the walls and attic spaces. Additionally, there are functional battery lights. New lighting may benefit operations, but is not beneficial to asset preservation. This request would not be considered by the County.
- Remove the existing old wood stair, decking, and ramp and replace with new (suggest composite material). Install lighting for safety.

### **Exhibit C - INSURANCE REQUIREMENTS**

Notice: The Leassee must provide a certificate of insurance and endorsement in accordance with the insurance requirements listed below (Section C) prior to recommendation for award. Failure to provide the required insurance within a ten (10) day period following the determination or recommendation of lowest responsive, responsible bidder may result in the County to vacate the original determination or recommendation and proceed with recommendation to the second lowest, responsive, responsible bidder.

The Leassee shall obtain and maintain, and require any sub-Lessee to obtain and maintain, at all times during its performance of the Agreement, insurance of the types and in the amounts set forth. For projects with a Completed Operations exposure, Lessee shall maintain coverage and provide evidence of insurance for two (2) years beyond final acceptance. All insurance policies shall be from responsible companies duly authorized to do business in the State of Florida and have an AM Best rating of A- VIII or better. Within ten (10) calendar days after Lessee's receipt of notice of award, the Lessee shall e-mail properly executed and approved Certificates of Insurance to evidence compliance with the insurance requirements of the agreement to CertsOnly-Portland@ebix.com; be sure to include the organization's unique identifier, which will be provided upon notice of award. The Certificate(s) of Insurance shall be signed by authorized representatives of the insurance companies shown on the Certificate(s). A copy of the endorsement(s) referenced in paragraph four (4) for Additional Insured shall be attached to the certificate(s).

No work shall commence at any project site unless and until the required Certificate(s) of Insurance are received and approved by the County. Approval by the County of any Certificate of Insurance does not constitute verification by the County that the insurance requirements have been satisfied or that the insurance policy shown on the Certificate of Insurance is in compliance with the requirements of the Agreement. County reserves the right to require a certified copy of the entire insurance policy, including endorsements, at any time during the RFP and/or contract period.

All policies providing liability coverage(s), other than professional liability and worker's compensation policies, obtained by the Lessee and any sub-Lessee to meet the requirements of the Agreement shall be endorsed to include Pinellas County Board of County Commissioners as an Additional Insured.

If any insurance provided pursuant to the Agreement expires prior to the completion of the Work, renewal Certificates of Insurance and endorsements shall be furnished by the Lessee to the County at least thirty (30) days prior to the expiration date.

Contracted vendor shall also notify County within twenty-four (24) hours after receipt, of any notices of expiration, cancellation, nonrenewal or adverse material change in coverage received by said Lessee from its insurer. Notice shall be given by certified mail to: Pinellas County, c/o Ebix BPO, PO Box 257, Portland, MI, 48875-0257; be sure to include your organization's unique identifier, which will be provided upon notice of award. Nothing contained herein shall absolve Lessee of this requirement to provide notice.

Should the Lessee, at any time, not maintain the insurance coverages required herein, the County may terminate the Agreement, or at its sole discretion may purchase such coverages necessary for the protection of the County and charge the Lessee for such purchase. The County shall be under no obligation to purchase such insurance, nor shall it be responsible for the coverages purchased or the insurance company or companies used. The decision of the County to purchase such insurance shall in no way be construed to be a waiver of any of its rights under the Agreement.

Each insurance policy shall include the following terms and/or conditions in the policy:

- (1) The Named Insured on the Certificate of Insurance must match the entity's name that responded to the solicitation and/or is signing the agreement with the County.
- (2) Companies issuing the insurance policy, or policies, shall have no recourse against County for payment of premiums or assessments for any deductibles which all are at the sole responsibility and risk of Lessee.
- (3) The term "County" or "Pinellas County" shall include all Authorities, Boards, Bureaus, Commissions, Divisions, Departments and Constitutional offices of County and individual members, employees thereof in their official capacities, and/or while acting on behalf of Pinellas County.
- (4) The policy clause "Other Insurance" shall not apply to any insurance coverage currently held by County or any such future coverage, or to County's Self-Insured Retentions of whatever nature.
- (5) All policies shall be written on a primary, non-contributory basis.
- (6) Any certificate of insurance evidencing coverage provided by a leasing company for either workers compensation or commercial general liability shall have a list of covered employees certified by the leasing company attached to the certificate of insurance. The County shall have the right, but not the obligation to determine that the Lessee is only using employees named on such list to perform work for the County. Should employees not named be utilized by Lessee, the County, at its option may stop work without penalty to the County until proof of coverage or removal of the employee by the Lessee occurs, or alternatively find the Lessee to be in default and take such other protective measures as necessary.

#### **Exhibit C - INSURANCE REQUIREMENTS**

(7) Insurance policies, other than Professional Liability, shall include waivers of subrogation in favor of Pinellas County from both the Lessee and sub-Lessee(s).

The insurance requirements for this Agreement, which shall remain in effect throughout its duration and for two (2) years beyond final acceptance for projects with a Completed Operations exposure, are as follows:

(A) Workers' Compensation Insurance

Limit

Florida Statutory

Employers' Liability Limits

 Per Employee
 \$ 500,000

 Per Employee Disease
 \$ 500,000

 Policy Limit Disease
 \$ 500,000

(B) <u>Commercial General Liability Insurance</u> including, but not limited to, Independent Lessee, Contractual Liability Premises/Operations, Products/Completed Operations and Personal Injury.

Limits

Combined Single Limit Per Occurrence	\$ 1,000,000
Products/Completed Operations Aggregate	\$ 1,000,000
Personal Injury and Advertising Injury	\$ 1,000,000
General Aggregate	\$ 2,000,000

(C) <u>Business Automobile or Trucker's/Garage Liability Insurance</u> covering owned, hired and non-owned vehicles. If the business does not own any vehicles, then evidence of Hired and Non-owned coverage is sufficient. Coverage shall be on an "occurrence" basis, such insurance to include coverage for loading and unloading hazards, unless Lessee can show that this coverage exists under the Commercial General Liability policy.

Limit

Combined Single Limit Per Accident

\$ 1,000,000

(D) <u>Liquor Liability Insurance – if coverage is excluded on the CGL then a separate policy is needed.</u>
Limits

Each Occurrence General Aggregate

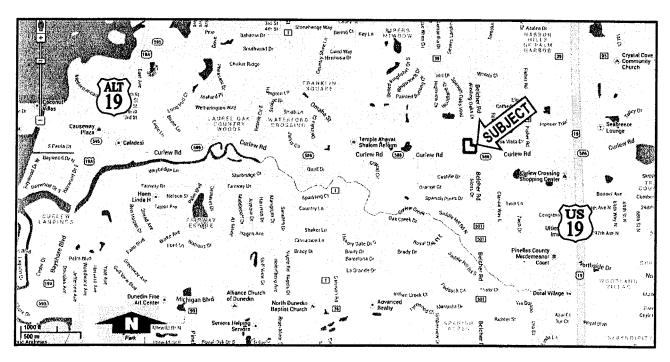
\$ 1,000,000

\$ 1,000,000

(E) Property Insurance Leassee will be responsible for all damage to its own property, equipment and/or materials.

### Aerial & Site Location Map 2043 Curlew Road, Palm Harbor







# PALM HARBOR MUSEUM 2043 CURLEW ROAD, PALM HARBOR, FL 34683

PHONE: (727) 724-3054

September 25, 2023

Palm Harbor Historical Society, Inc. - ARPA Large Projects Round 2 - Project Bids

### **REGARDING Ramp Replacement:**

To Whom It May Concern,

8/12/23 Volunteers for Palm Harbor Museum became aware of making application for ARPA Large Projects Round 2 - Project Bids.

8/16/23 Museum volunteers met to discuss which projects to pursue.

- 8/16/23 A request for repair or replacement to the Museum Entrance Ramp was made on YELP.COM.

  Only Two Companies were listed. Photos and a request were provided to these two companies located in the Palm Harbor area. One of these, Bay Area Decking, did not respond and a second outreach received no reply.
- 8/17/23 Received go ahead for Ramp project from our North Pinellas County Liaison, Nancy McKibben, and Pinellas County Principal Planner, Tom Scofield.
- 8/18/23 Big Fish Exteriors, made site visit to view the existing ramp and to make measurements. We learned that the "associate" making the site visit is the son of the family owned Big Fish Exteriors and that his mother, a business owner, had died the previous day. Yet he kept the appointment!

8/29/23 Bid/estimate for **Ramp Replacement** was received, as attached (Page 2-5)

Construction of Code Compliant Ramp with Composite Material \$62,499.86

Respectfully Submitted by

Lynn Geist and Terry Fortner, Volunteers for Palm Harbor Museum

IRS TAX CODE. COPY OF THE OFFICIAL REGISTRATION (#CH8070) AND FINANCIAL INFORMATION MAY BE OBTAINED FROM THE FLORIDA DIVISION OF CONSUMER AFFAIRS BY CALLING TOLL-FREE 1-800-345-7352 WITHIN THE STATE. REGISTRATION DOES NOT IMPLY ENDORSEMENT, APPROVAL, OR RECOMMENDATION BY THE STATE.

### **ESTIMATE**



### **Prepared For**

Quantity

Lynn Geist 2043 Curlew Rd Palm Harbor, FL 34683 (727) 743-0751

P.o. Box 2094 Largo, Fl 33779

**Description** 

Phone: (727) 459-3821

Email: bigfishexteriorsfl@gmail.com Web: www.bigfishexteriors.com

Big Fish Exteriors Inc	Estimate #	2023134	
Do. Doy 2004	Date	08/29/2023	

Composite Decking	100
Composite Handrails 2x8x20	20
6x6x10 Pressure Treated Lumber Posts	20
2x8x16 Pressure Treated Lumber Stringers	60
2x10x16 Pressure Treated Lumber Beams	20
4 in. x 4 in. x 8 ft. Pressure Treated Lumber 4 in. x 4 in. x 8 ft. 2 Ground Contact Pressure-Treated Southern Yellow Pine Lumber	40
6" Carriage Bolts Stainless Steel, 1/2", Threaded, 30 Pack	1

160
160
160
1
1
1
1
1
1
1
1
1
85
85
1
2
2
2
2

Total	\$62,499.86
Deposit Due	\$21,874.95

#### **Notes:**

As the ramps stand right now they will not pass inspection. The first estimate we sent was for the deck boards and a few rotted stringers so we would have to pull the permit as a repair. this would make the inspections different because we are using the same layout.

This estimate here is if you want a completely new ramp with code compliant framing. This estimate will have a new drawing that will be filed with the county depicting the layout and math used to determine the load requirements for the new ramp. With composite materials and new framing your museums new ramp will last the test of time.

Please give us a call at 727-459-3821 and we can walk though different composite materials.

By signing this document, the customer agrees to document.	the services and conditions outlined in this
Big Fish Exteriors Inc	Lynn Geist



# PALM HARBOR MUSEUM 2043 CURLEW ROAD, PALM HARBOR, FL 34683

PHONE: (727) 724-3054

September 26, 2023

Palm Harbor Historical Society, Inc. - ARPA Large Projects Round 2 - Project Bids REGARDING OUTDOOR LAVATORY

To Whom It May Concern,

8/12/23 Volunteers for Palm Harbor Museum became aware of making application for ARPA Large Projects Round 2 - Project Bids.

8/16/23 Museum volunteers met to discuss which projects to pursue.

8/16/23 Began outreach to contractors in regard to the feasibility of constructing an outdoor restroom facility. The cost for construction was estimated and a suggestion made that it would be cost effective to order a fully prefabricated plumbed outdoor restroom.

8/17/23 Consultation with our North Pinellas County Liaison, Nancy McKibben. Tom Scofield, Principal Planner, Historic Preservation Specialist, Housing & Community Development Department, Pinellas County Government, provided this statement in support: "From the historic preservation perspective, pursuing the grant for a new stand-alone accessible public restroom facility meeting ADA standards at Palm Harbor Museum will substantially improve the current situation for visitors and will mitigate the impact of providing such a facility within the designated historic building."

8/17/23 Researched and found two companies, Green Flush Restrooms and Easi-set. Both put us in touch with the single supplier in Florida: Leesburg Concrete Company, Inc. We called and wrote to request bid/estimate for a Logan model.

9/5/23 Met with Tampa Bay Septic associate, he visited and declined the plumbing work. In several cases we called companies who told us there would be an upfront charge to provide a bid.

9/13/23 Spoke with Mr. Tom Ely at Leesburg Concrete Company regarding the specs and scope of work for installation for outdoor restroom facility.

THE PALM HARBOR HISTORICAL SOCIETY, INC. IS A 501 (C)(3) NOT-FOR-PROFIT ORGANIZATION AND ALL DONATIONS ARE DEDUICTIBLE TO THE FULL EXTENT OF THE IRS TAX CODE. COPY OF THE OFFICIAL REGISTRATION (#CH8070) AND FINANCIAL INFORMATION MAY BE OBTAINED FROM THE FLORIDA DIVISION OF CONSUMER AFFAIRS BY CALLING TOLL-FREE 1-800-345-7352 WITHIN THE STATE. REGISTRATION DOES NOT IMPLY ENDORSEMENT, APPROVAL, OR RECOMMENDATION BY THE STATE.

#### Palm Harbor Historical Society, Inc. - ARPA Large Projects Round 2 - Project Bids REGARDING Lavatory:

9/19/23: Completed bid from Leesburg Concrete Company, Inc. \$86,740.00 (Page 3-8 with additional specs Page 9-10)

Requests made on Angi.com resulted in Plumbing bid/estimates:

9/20/23: Completed bid from Cass Plumbing \$7,500.00 (Page 11-12) 9/21/23: Completed bid from APEX Plumbing \$8,020.80 (Page 13-14)

9/22/23 Searched for companies to create the foundation (Page 15). Ours must be 3 feet high, rather than at ground level. Contractor in Odessa said, "Trying to find someone willing to do such a 'small job'." Next we sought a specialty contractor for Masonry work.

An associate from Angi.com called to tell us that companies for cinder block foundation work were "fully booked."

Low Cost Concrete offered to make a bid but their website advertises "new driveway or a concrete patio repair" and we advised them this is not what we require.

Another try on Angi.com resulted in offer 9/22/23 to create bid/estimate from Shelby Construction, Inc. Jennifer, Public Relations, told us Shaun was unable to provide an estimate as first promised as he had previously scheduled site walks and was unavailable. Getting bids for the foundation was far more difficult than expected.

9/26/23: Completed bid from Professional Exteriors \$8,500. (Page 16)

Respectfully Submitted by

Lynn Geist and Terry Fortner, Volunteers for Palm Harbor Museum

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1335 Thomas Ave Leesburg, FL 34748 Cell: (352) 408-4637 Proposal #KT-2023-095

### **SALES CONTRACT**

This Sales Contract is made on this 19<sup>th</sup> day of September 2023, by Leesburg Concrete Company Incorporated (hereinafter "Seller") and the Purchaser indicated herein. Both parties acknowledge and agree to the following terms and conditions of this Sales Contract as set forth below.

Project:

Palm Harbor Museum Logan Restroom Palm Harbor, FL

#### I. Product & Price

Specifications:

**Building** – Model 0711 with exterior dimensions of 7'-0" x 11'-11" x 8'-0" interior ceiling height. The building consists of 4" thick non-insulated exterior wall panels, 4" thick non-insulated interior wall panel, 6" thick floor panel and 5" thick non-insulated roof panel tapering to 10" thick at long side walls. The building is constructed from individually poured concrete panels that are welded with stainless steel brackets on a base floor slab and shipped as a single (1) modular unit.

Detailed engineering and drawings will be provided for all items in this Sales Contract. The structural drawings will be stamped by a Professional Engineer registered in the State of the building placement. Seller will receive State approval as required. As such, Seller reserves the right to amend the Sales Contract to comply with any code or regulation required to obtain State Approval. Local/municipal inspections and approvals, including site inspections, building permits and zoning approvals are not included. Seller is not responsible for determining such local requirements.

Foundation to be level within 1/4" +/- in both directions and capable of supporting loads imposed by structure. Substrate must have a vertical soil capacity of 1500 psf. Place stone or sand to 1" above highest point of area where building will be placed.

**Entry Systems** Standard cores are provided, if specific cores are required, cores to be switched out after building is set at owner's expense and installed by others.

2 – Single 3070 insulated hollow core 18-gauge galvanized steel reverse doors hung on 16-gauge galvanized steel frames cast into wall panels. Doors and frames shall be bonderized and painted one coat of rust inhibitive primer and one finish coat of enamel paint, Purchaser to select standard available color.

Door Hardware:

Handle: Rockwood 107x70C Stainless Steel Pull/Push Plate

Hinges: McKinney NRP (non-removable pin) TA2314, 3 per door

Lock Set: Schlage B660 Heavy Duty Commercial Grade Single Cylinder Deadbolt (Chase)

Lock Set: Schlage B663 Heavy Duty Commercial Grade Single Cylinder Deadbolt (Restrooms)

Threshold: Pemko 170A ADA

Door Holder: Rixson Firemark 9-326 Overhead (Chase)

Door Closer: Norton Series 8501 (Restrooms)

Drip Cap: National Guard 17A

Door Sweep: Pemko 315

Privacy locks, panic devices and weather stripping are considered optional equipment. Additional charges will be applied if these items are required.

**Plumbing System** –All of the following fixtures are connected with Schedule 40 PVC drain lines and Type L copper water supply lines. Final connection to site utilities is responsibility of Purchaser.

- 1 Kohler Kingston #K-4323 water closets, ADA approved, with Bemis #1955C elongated toilet seat with external hinge stops and Sloan Royal #152-1.6 manual flush valve, Wade Closet Carriers 410 Series.
- 1 Kohler #K-2032 wall hung lavatory sink mounted at ADA height and Symmons # S-60-H slow close manual lavatory faucet, Wade Lavatory Carriers Series 520 (one in each restroom).
- 1 Floor drain, 4" x 3" adjustable brass, Sioux Chief Model 832-35PNR

Any and all cleanouts and trap primers are EXCLUDED; openings will be cast in floor for Purchaser use during installation.

**Electrical System** – All equipment and conduit will be surfaced mounted. The load center will be located in the chase area. All branch conduit and wiring will be run to the load center. The connection of electrical utilities to the load center is by Purchaser. A penetration will be provided for entrance of electrical utilities into the chase area. The electrical components will be as follows:

- 1-100-amp, load center
- 1 Exterior wall mounted light fixtures with photocells
- 2 Interior ceiling mounted, LED light fixtures
- 1 Interior light switch
- 1 Ceiling mounted occupancy sensors
- 1 GFCI protected receptacle
- 2 Interior ceiling mounted exhaust fans (Restrooms)

#### **HVAC System** – None provided

Bathroom Accessories – All fixtures are surface mount, stainless steel and vandal resistant.

- 1 set Stainless Steel Grab Bars 1 ½" Dia. Satin Finish (1) 36" Long and (1) 48" Long, per each ADA Bathroom Stall. (Bobrick B-6806 Series)
- 1 Surface Mount Stainless Steel Toilet Tissue Dispenser- Satin Finish (Bobrick B-4288 Contura Series)
- 1 Surface Mounted Hand Sanitizer Dispenser

- 1 Frameless Stainless-Steel Mirror 18-8 Type 304 Stainless Steel Bright Polished Finish (Bobrick B-1556-1830)
- **Exterior Finish** Exterior walls shall receive a simulated split face block finish achieved by utilizing a form liner. Exterior walls shall be coated with H & C Concrete Stain by Sherwin & Williams. Stain shall be applied per manufacturer's recommendation.
- Interior Room Finish Smooth steel trowel finish on all interior surfaces. The interior surfaces will be coated with Sherwin Williams Tred-Plex, applied per the manufacturer's instructions, to match the Purchaser's standard color selection. The chase area wall will be natural color concrete.
- Installation Site preparation suitable to Leesburg Concrete Company Incorporated design requirements is responsibility of Purchaser. Delivery of precast components is included by Seller. Crane and operator for off-loading and setting precast components are included in this Sales Contract. Seller's labor site crew for off-loading building components from 65' tractor/trailer combination, rigging and setting is included in this Sales Contract. This proposal assumes delivery equipment can locate adjacent to final building destination under own power. Traffic control devices permits and/or flaggers are the responsibility of Purchaser.
- **Warranty** Seller guarantees that the complete building will have no defect in materials or workmanship for a period of one (1) year, except as limited or extended by the original equipment or component manufacturer.
- **Liquidated Damages/Retainage** Leesburg Concrete Company Incorporated is a manufacture of a product and will not be subject to liquidated damages or retainage as per any "Prime Contract" or "Subcontract" agreement.

NOTE: Any items not specifically called out above, shall be supplied and installed by Purchaser.

#### Price:

Sub-Total: \$83,240.00
Sales Tax: (not included)
Total: \$83,240.00
Freight to Palm Harbor - \$3,500.00

Total - \$86,740.00 per structure

Exclude Electric (deduct) - \$6,500.00

Weight of Heaviest Component: 55,000 lbs.

200 TON Crane upcharge, 50' reach, per installation - \$9,245.70 Crane Matts – Crane matts to minimize damage to fields, walkways etc. per installation - \$8,000.00

#### Contract Excludes but is not limited to:

Permitting

Bonds

Sales tax

Electric

Site preparation

Plumbing

**HVAC** 

Any additional insurances to be at owners' expense

#### OR ANY OTHER ITEM NOT LISTED IN ABOVE CONTRACT

This Sales Contract includes freight delivery and skilled nonunion installation labor by Leesburg Concrete Company Incorporated. Crane and operator for off-loading and setting precast components are included in the Sales Contract. Traffic control devices, permits and/or flaggers are the responsibility of Purchaser.

Delivery to occur on weekdays during normal daylight working hours. Proper site conditions, including clear access roads and a reasonably level surface, so that vehicles, trucks, and cranes can safely maneuver under their own power. All roads, crossings, and load bearing surfaces to be able to accommodate <u>55,000</u> pounds plus the tractor-trailer and 13'-6" height. No overhead power lines, obstructions or overhanging trees that could block the maneuverability of equipment.

The price assumes site accessibility for the crane and tractor-trailer with the ability for both to set next to the pad. Accessibility is defined as a level unobstructed area large enough for a crane and tractor-trailer to park adjacent to the pad. The crane must be able to place outriggers within 3'-0" of the edge of the pad and the truck and crane must be able to get side-by-side under their own power. If a larger crane for setting is needed, additional charges will be the responsibility of the owner. No overhead lines or other obstructions may be within a 75' radius of the center of the pad. A firm roadbed with turns that allows a 70'-0" low-bed tractor and trailer must be provided directly to the site. No building shall be placed closer than 2'-0" to an existing structure, without approval of Seller. Purchaser is responsible for obtaining all licenses, permits and payment of any fees or taxes relating to the site and installation.

Price is contingent on approval of products as submitted and manufactured by Leesburg Concrete Company Incorporated.

Taxes: Any applicable Federal, State or Local Taxes are NOT included.

**Bonds**: The quoted price **DOES NOT** include payment and performance bonds.

<u>Payment Terms</u>: 10% down payment required to commence engineering. Progress billing to be invoiced as produced. No retainage. <u>Credit</u> card payments may incur a three percent (3%) surcharge.

A tentative delivery date will be established after approval submittal has been returned. Production and placement of accessory orders will not begin until receipt of the signed approved submittal. At time of production completion, the delivery date will be scheduled as mutually agreed upon. Should building ordered remain in Seller's possession over 45 days after production, items will be billed and payment expected according to payment terms noted above. If building ordered remain in Seller's possession over 60 days after production, will be charged a \$1,000.00 per month storage fee. The storage fee will be billed monthly and payment expected according to payment terms noted above.

If manufacturing cannot commence, due to elements outside of Leesburg Concrete Company Incorporated's control, a 2% inflation rate shall be applied monthly to the total contract amount after 270 calendar days.

#### **ASSIGNMENT; ACQUISITION**

Except for the acquisition exception provided for and contained herein, neither this Agreement nor the rights and obligations hereunder may be assigned or transferred by either Party without the prior written consent of the other Party. In such case consent shall not be unreasonably denied or withheld. However, if Leesburg Concrete Co., Inc. decides to sell its business or substantially all of its business assets, then it is not required to obtain written consent from the other party to assign any contract or agreement, or the rights and obligations under any contract or agreement. Further, Leesburg Concrete Co., Inc. is hereby expressly allowed under this Agreement the right to sell and assign any and all active contracts or agreements as well as any backlog/inventory contracts or contracts or agreements that have not been started in conjunction with the sale of its business and its business assets to any third party. Both parties consent and agree to this acquisition exception.

#### Leesburg Concrete Company Incorporated STANDARD TERMS AND CONDITIONS:

- 1. <u>Applicability</u>. These terms and conditions are incorporated into Seller's Quotation & Contract (collectively, the "*Contract*"). The Contract comprises the entire agreement between the parties, and supersedes all prior or contemporaneous communications, understandings, agreements, negotiations, representations and warranties. The Contract prevails over any of Purchaser's general terms and conditions of purchase regardless whether or when Purchaser may have submitted a purchase order or contract.
- 2. Payment. Payment terms are net 30 days from date of Seller's invoice or sooner as may be required by applicable law. Late payments shall accrue a finance charge of one and one-half percent (1½%) per month or the highest rate allowable by law, whichever is less. Seller shall be entitled

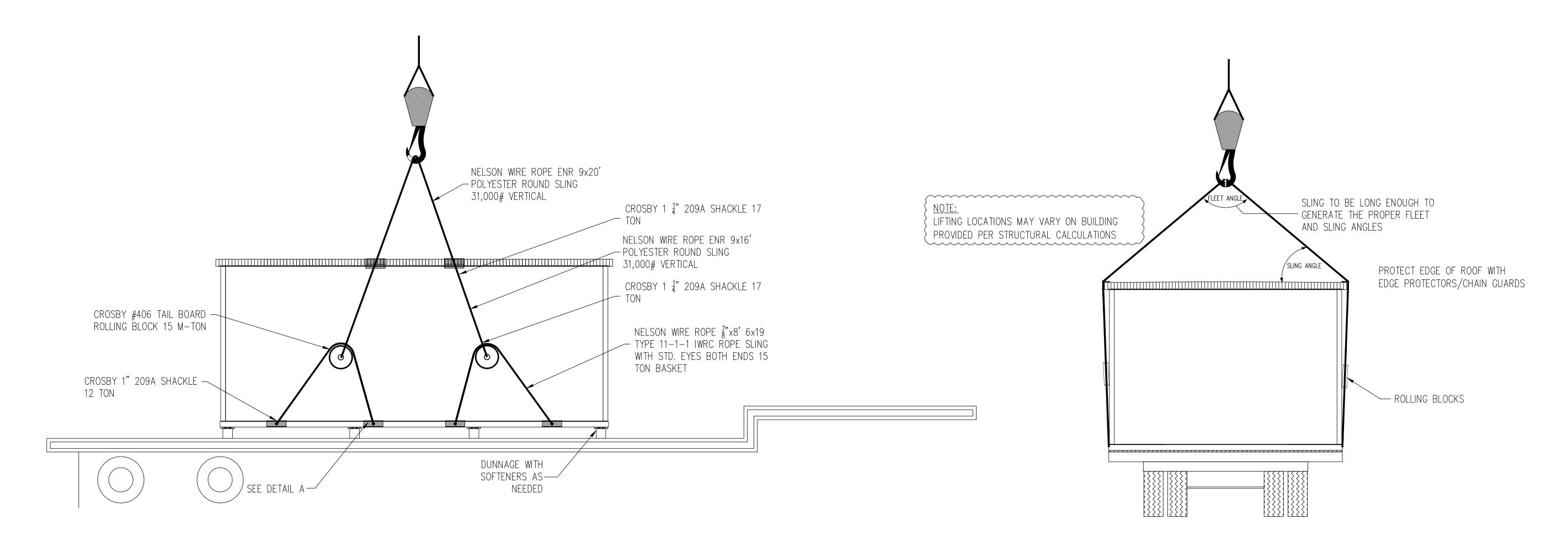
to recover all costs and expenses, including reasonable attorneys' fees, arising out of Purchaser's failure to make all payments due under this Contract in a timely manner.

- 3. <u>Taxes.</u> Purchaser is responsible for payment of all taxes and duties not specifically assumed in writing by Seller in the Contract. Purchaser agrees to defend, indemnify and hold Seller harmless from any damages and expenses related to any levy or attempted levy of any other taxes on Seller.
- 4. <u>Suspension; Termination</u>. In addition to any other remedies available to Seller, Seller may suspend or terminate this Contract with immediate effect upon written notice to Purchaser, if Purchaser: (i) fails to pay any amount when due under this Contract (or any other agreement Purchaser has with Seller); (ii) has not otherwise performed or complied with any of these terms (or complied with the terms of any other agreement Purchaser has with Seller); (iii) becomes insolvent, files a petition for bankruptcy or commences or has commenced against it proceedings relating to bankruptcy, receivership, reorganization or assignment for the benefit of creditors; or (iv) exhibits other adverse credit conditions that are unsatisfactory to Seller, as determined by Seller in its sole discretion.
- 5. Shipment; Delivery Conditions. Unless otherwise agreed in writing, all materials purchased by Purchaser shall be FOB Seller's plant sourcing the Contract. If FOB Destination, the Purchaser agrees to provide suitable roadways or approaches to points of delivery. Seller reserves the right to cease deliveries if Seller concludes, in its sole opinion, that the roadways or approaches are unsatisfactory. In the event Purchaser Contracts delivery beyond curb line, Purchaser assumes liability for damages to sidewalks, driveways or other property, loss and expense incurred as a result of such deliveries to the maximum extent allowed by law. Prices quoted herein are based on prompt unloading of trucks, and in case repeated delays in unloading, deliveries may be discontinued until conditions are corrected. Delays of more than 1 (one) hour are subject to an additional charge. Purchaser also agrees to provide a safe, suitable work area for Seller and its employees.
- **6.** <u>Title and Risk of Loss</u>. Title and risk of loss passes to Purchaser at the time any materials are loaded into Purchaser's, or Purchaser's agents', vehicles, barges or other modes of transport, in the case of FOB Plant sales, or in the case of Seller's delivery, upon delivery of the Materials.
- 7. Warranty. Seller warrants that the goods and services herein will conform to the specifications provided to Seller prior to manufacture of the goods and/or Seller's performance of the services. Seller's obligation to meet the applicable specifications supersedes any and all other warranties. SELLER DISCLAIMS ALL OTHER WARRANTIES, EXPRESS OR IMPLIED, INCLUDING THOSE OF MERCHANTABILITY AND FITNESS FOR PARTICULAR PURPOSES. Purchaser shall verify that Seller's materials comply with the plans and specifications prior to installation. Changes to the plans and specifications shall be made by written change order and Seller shall be entitled to an equitable price adjustment for such changes. The express limited warranty set forth herein shall be void if Purchaser fails to pay Seller in full for the materials provided by Seller pursuant to this Contract.
- 8. <u>Time.</u> Seller shall make reasonable efforts to provide the equipment, labor, materials and/or services by the specified delivery date and provide notice to Purchaser of any expected delays. Seller is not responsible for any delays due to labor disputes, repairs to machinery, fire, flood, adverse weather conditions, inability to obtain transportation, fuel, electric power, or operating materials or machinery at reasonable cost; or by reason of any other cause beyond its control, including the inability to produce materials meeting any applicable specification or requirement. In the event any such contingency should occur, Seller reserves the right to determine the order of priority of delivering to its purchasers.
- 9. <u>Modification.</u> No amendment or modification of this Contract shall be valid or enforceable unless in writing and signed by the party sought to be charged, and no prior or current course of dealing between the parties, or any usage of trade or custom of the industry shall modify or supplement the terms and conditions of this Contract.
- 10. <u>No Waiver</u>. The failure of Seller to exercise any right granted hereunder shall not impair or waive Seller's privilege of exercising such right to any subsequent time or times.
- 11. <u>Damages</u>. Seller's liability for any damages related to this Contract shall be limited to, at Seller's option, (a) replacement of defective materials and work or, at Seller's option, (b) a refund of any payments made by Purchaser. IN NO EVENT SHALL SELLER BE LIABLE FOR ANY CONSEQUENTIAL, INDIRECT, INCIDENTAL, SPECIAL, EXEMPLARY, OR PUNITIVE DAMAGES WITH REGARD TO ANY CLAIM ARISING OUT OF OR RELATING TO THIS CONTRACT. It is further understood that Seller shall not be responsible for any damage to or deterioration of any of its work, whether completed or in process, resulting from any cause or causes beyond its reasonable control, including but not limited to design, failure of subgrade or other subsurface conditions, or failure or inadequacy of any labor or materials not furnished and installed by Seller, whether or not such failure or inadequacy was or could have been known at the time its work was undertaken, or for any work performed under adverse weather conditions
- 12. <u>Indemnity</u>. To the maximum extent permitted by applicable law, Purchaser shall defend, indemnify and hold Seller, its officers, employees, agents, insurers, sureties, and affiliates, harmless from any and all losses, damages, expenses (including attorneys' fees), claims, suits, liabilities, fines and remedial or clean-up costs arising out of or in any way related to: (i) Purchaser's breach of this Agreement; or (ii) any act or omission by or on behalf of Purchaser, its employees, contractors and/or agents.
- 13. <u>Applicable Law</u>. This Contract, and the rights, duties, obligations and remedies of the parties shall be governed by or construed in accordance with the laws of the state where the Project is located.
- 14. Work Conditions: If Seller's work is dependent upon or must be undertaken in conjunction with the work of others, such work shall be so performed and completed as to permit Seller to perform its work in a normal uninterrupted single shift operation. Unless a time for the performance of Seller's work is specified, Seller shall undertake the work in the course of its normal operating schedule. Seller shall not be liable for any failure to undertake or complete the work for causes beyond its control, and Seller may suspend the work for causes beyond its control, including but not limited to fire, flood or other casualty; the presence on or beneath the work site of utilities, facilities, substances, or objects, including but not limited to any substance that in Seller's opinion is hazardous or toxic or the reporting, remediation, or clean-up of which is required by any law or regulation; labor disputes or other disagreements; and accidents or other mishaps, whether affecting this work or other operations in which Seller is involved, directly or indirectly. If for causes beyond Seller's control, Seller's work is not completed within twelve (12) months after the date of Purchaser's acceptance of the Contract, Seller may cancel this Contract. In such event: (i) Seller shall be relieved of any further obligation with respect to the balance of the work; and (ii) Seller shall be entitled to receive final and complete payment for all work performed by us to the date of cancellation within fifteen (15) days thereafter.
- 15. <u>Miscellaneous</u>. Unless otherwise specified in writing, Purchaser shall be responsible for testing the materials and confirming that the materials comply with Purchaser's specifications at Seller's facility prior to directing shipment. All funds paid to Purchaser from a third party for Seller's labor, services, materials, and equipment shall be deemed in trust for the payment of Seller. Safety Data Sheets and product label information are available at Seller's office or Seller's website. Purchaser agrees to draw to the attention of any persons handling or using the materials or having access to the materials while in Purchaser's possession or to whom Purchaser sells the materials or any part thereof any warning, information of suggestions which are contained or referred to in the Safety Data Sheets or label information, or any other literature or packaging relating to the materials.

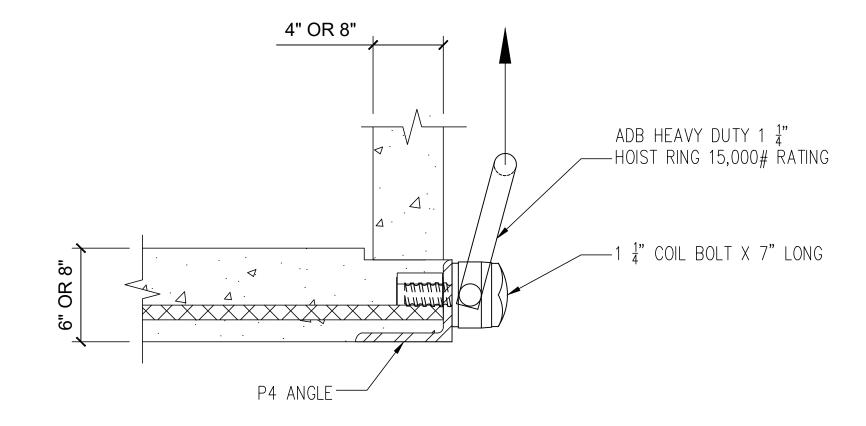
16. MANDATORY BINDING ARBITRATION: ALL CLAIMS OR CONTROVERSIES ARISING OUT OF OR RELATED TO THIS CONTRACT, SHALL BE SUBMITTED TO AND RESOLVED BY BINDING ARBITRATION BY A SINGLE ARBITRATOR IN THE LAKE COUNTY, FL. THE AMERICAN ARBITRATION ASSOCIATION ("AAA") SHALL CONDUCT THE ARBITRATION AND THE COSTS OF THE ARBITRATION SHALL BE BORNE EQUALLY BY THE PARTIES. NOTWITHSTANDING ANY LANGUAGE TO THE CONTRARY IN THIS CONTRACT, THE PARTIES AGREE: THAT THE UNDERLYING AWARD MAY BE APPEALED PURSUANT TO THE AAA'S OPTIONAL APPELLATE ARBITRATION RULES ("APPELLATE RULES"); THAT THE UNDERLYING AWARD RENDERED BY THE ARBITRATOR SHALL, AT A MINIMUM, BE A REASONED AWARD; AND THAT THE UNDERLYING AWARD SHALL NOT BE CONSIDERED FINAL UNTIL AFTER THE TIME FOR FILING THE NOTICE OF APPEAL PURSUANT TO THE APPELLATE RULES HAS EXPIRED.

The person signing below represents that he/she is authorized to enter into this Agreement on behalf of the Purchaser and has received the Seller's Standard Terms & Conditions, which are incorporated by reference herein. This Sales Contract and the Standard Terms & Conditions are accepted by the following:

FOR SELLER:
Thomas Ely Sales - Buildings Division Leesburg Concrete Company Incorporated
(This Sales Contract expires sixty (60) days after issuance)
FOR PURCHASER:
Company Name
Signature
Print Name
Date:



TYPICAL LIFTING DIAGRAM





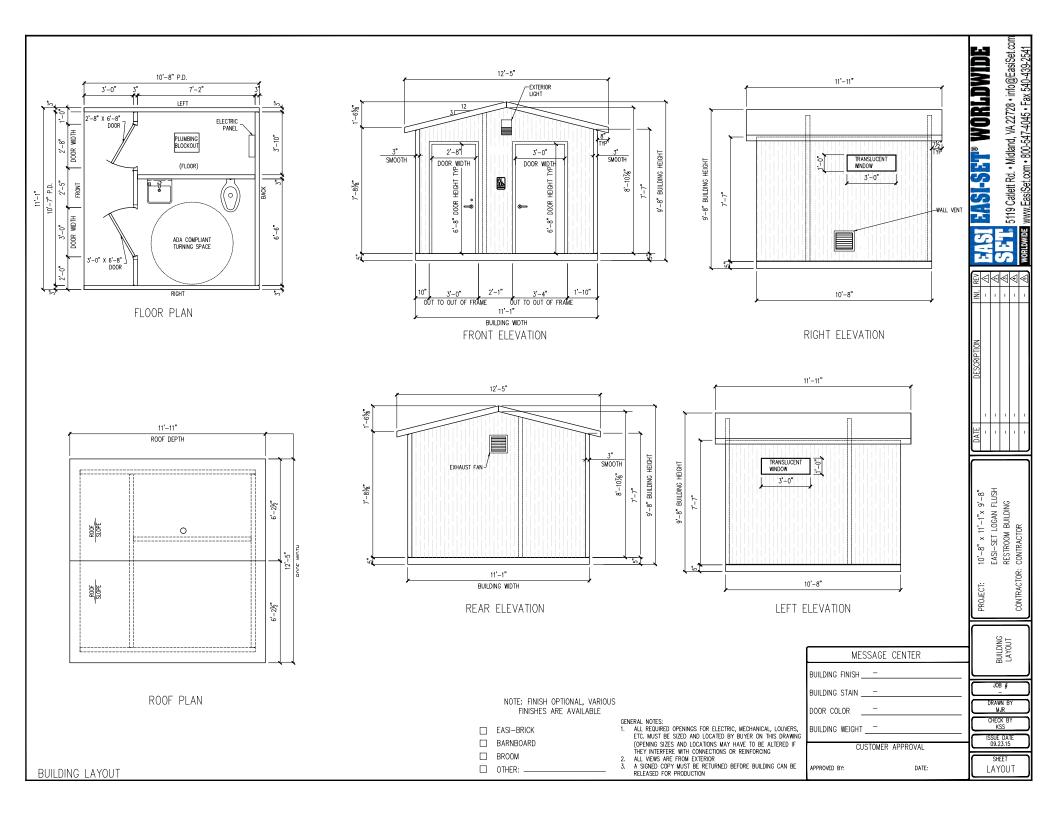


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EASI-SET BUILDINGS RIGGING DIAGRAM

CUSTOMER

DATE	SALES	DRAWN	ENGINEER	CHECKED	JOB NUMBER
				•	
	DRAWING N	UMBER		REVISION	SHEET
					1 OF 1
				REV DATE	1 01 1



## **Cass Plumbing**

4808 N Hubert Ave. Tampa, FL 33614 (813) 265-9200 support@cassplumbingtampabay.com

ESTIMATE#	1027687993
DATE	09/20/2023
PO#	

**Estimate** 

#### **CUSTOMER**

Palm Harbor Museum 2043 Curlew Road Palm Harbor FL 34683 (727) 267-9401

SERVICE LOCATION	
Palm Harbor Museum 2043 Curlew Road Palm Harbor FL 34683 (727) 267-9401	

**DESCRIPTION** 

12-4, estimate to install 45 foot pipe for running water line to existing lines to service an outdoor restroom.

Estimate					
Description	Qty	Rate	Total		
Drainage and water Run sewer line and water to preplumb shed unit customer is installing. We will run sewer line approx. 60ft to tank in yard. We will also run water under rampto preplumb bathroom unit. We will make all conections outside of unit. Cass Plumbing will backfill but customer is responsible for any landscaping.	1.00	7,500.00	7,500.00		

CUSTOMER MESSAGE	<b>Estimate Total:</b>	\$7,500.00

# ALL DISCOUNTS INCLUDED IN FINAL PRICE INCLUDING \$75 GIFT CARD OFFER.

All credit card payments will incur an additional 3.5% fee.

#### Stoppages:

Unless otherwise noted, there are no warranties on any stoppages after 24 hours of service.

Deposits: A 50% deposit fee will be needed at the time of scheduling any estimates. The remaining 50% will be collected once the job is completed.

Cancelations: A 10% cancelation/restocking fee will be assessed to any refund due for any job canceled prior to the commencement of work.

I hereby authorize the work described above and agree to the terms and conditions stated. I represent that I am either the owner or the owners agent and I recognize that aged and deteriorated plumbing fixtures, piping and appurtenances may no longer be serviceable and I agree to hold Cass Plumbing and its employees blameless and harmless for any services rendered. All Invoices unpaid after 30 days shall bear interest at 1.5% per month on unpaid balance. Should collection be necessary, customer agrees to pay all associated collection costs and reasonable attorney fees. Plumbing contractor is not responsible for patching floors, walls, ceilings, cabinets and/or landscaping



#### **BILL TO**

Palm Harbor Museum 2043 Curlew Road Palm Harbor, FL 34683 USA

**ESTIMATE** 27511977

Job: 27468742

ESTIMATE DATE Sep 21, 2023

**JOB ADDRESS** 

Palm Harbor Museum 2043 Curlew Road Palm Harbor, FL 34683 USA

#### **ESTIMATE DETAILS**

Run sewer and water to and from new restroom: Run sewer line approximately 45 feet and connect to existing sewer system to septic.

Tee into water on north side of building. Dig trench to restroom and stub up line for water.

Stub line up so foundation and restroom to be built. Once everything is built we will return and hook up water lines and sewer to sink and toilet.

All work will be inspected by city or county.

10 yr warranty

TASK	DESCRIPTION	QTY	PRICE	TOTAL
CUSTOM SERVICE	CUSTOM SERVICE: CUSTOM SERVICE	1.00	\$8,912.00	\$8,912.00
CUSTOM SERVICE	CUSTOM SERVICE: CUSTOM SERVICE 10 percent discount	1.00	\$-891.20	\$-891.20

 SUB-TOTAL
 \$8,020.80

 TAX
 \$0.00

 TOTAL
 \$8,020.80

 EST. FINANCING
 \$133.15

Thank you for choosing Apex Plumbing

Please note for your records, our license number: CFC1430406

**CUSTOMER AUTHORIZATION** 

Estimate #27511977 Page 1 of 2

\*\*Please note a 40% deposit is required for scheduling purposes. Please speak with the technician or contact the office if further explanation of the deposit is desired\*\*

APEX PLUMBING LLC. will not be liable for any unknown, unforeseen, or pre-existing problems with the existing plumbing systems. Any of these said issues that may arise or are discovered during the course of our work (that are not described as being part of or specifically mentioned in the job scope above) which need to be addressed in order to proceed, will be discussed and agreed upon before any repairs, replacement, or re-configurations of the plumbing system is completed. Damages and or issues may include, but are not limited to: unseen pipe leaks, damage within sewer pipes, weak or soft piping damaged by being disturbed during repairs, rusted or seized material.

Any issues that are found or arise in the course of repairs APEX PLUMBING LLC. will make the homeowner aware via verbal and or written notice. Any additions to the scope of work will be followed by a change order request. Due to the potential issues being unforeseen the homeowner will be responsible for any and all additional expenses once agreed upon. If the change order is required to successfully complete the original scope of work. The homeowner will have the right to stop the project and will be responsible to pay the original invoice amount minus the uncompleted scope of work. The homeowner will also be responsible for costs associated with the original repair including but not limited to: restocking fees, vendor fees, rented equipment, etc.

Any delays due to unforeseen circumstances will cause an extension of time to complete the work and will be discussed and approved by both parties.

Sign here Date

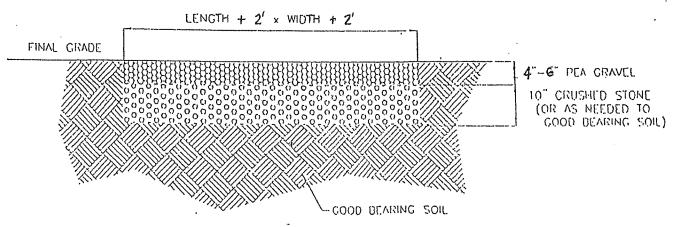
Estimate #27511977 Page 2 of 2

# RECOMMENDED EASI-SET FOUNDATION PREPARATION

1(A) Easi-Set building shall bear fully on firm undisturbed soils with an approved fill or pad. The turf shall be removed and a minimum 4" pad of approved fill material shall be placed. Where unacceptable material occurs, excavate and replace with an approved compacted fill material. The minimum, recommended, allowable bearing shall be 1500 pounds per square foot.

#### -OR-

- 1(B) Easi-Set building shall bear fully on an engineered concrete or asphalt slab. The slab shall be designed to support the anticipated load of the Easi-Set building and its contents. The building shall be leveled, shimmed as required, and set in either a grout bed or a sand bed sufficient to fill all cavities between the foundation slab and the building floor slab.
- No building shall bear directly on rock. Where rock is closer than 2 feet from the bottom of the building floor slab or foundation slab, it shall be undercut to a minimum of 2 feet below the building and replaced with an approved fill material.
- 3 Provide positive drainage for the fill, pad, slab as required.
- 4 A vapor barrier of 6 mil polyethylene shall be placed between the fill, pad, or foundation slab, and the floor slab where moist conditions exist.
- 5 Approved fill or pad material shall be stone which confirms to ASTM C33. Stone shall be 3/8", or smaller.
- 6 All fills, pads, or slabs shall be level to within 1/4" differential over the entire building area.
- 7. The entire granular fill or pad shall be kept within confines of the soil or other surrounding objects. Do not allow the fill or pad material to be unconfined of the soil so that it may wash, erode, or otherwise be undermined.
- 8. The finished floor slab elevation shall be above the exterior grade. And the grade shall have positive slope and drainage away from the building at all points.



Professional Exteriors
2309 Malcolm Dr.
Palm Harbor FL 34684
Class A General Contractor
I-CGC058276
727-434-1404
fishcatcher3@verizon.net

#### Foundation PROPOSAL

RE Customer: Palm Harbor Historical Society, Inc. Service Location:
Palm Harbor Museum
2043 Curlew Rd.
Palm Harbor , Florida

September 26, 2023

Proposal to provide all labor and materials necessary to build a 11 ft X 11 ft concrete foundation for a future prefab bath room.

To include the following:

- \* 12 ft wide by 12 ft deep continuous poured concrete footer 2500 psi with 2 half in rebar on chairs with vertical rebar on each corner and spaced every 4 ft
- \* 36 inch high continuous stem wall using 8x8x16 concrete masonry units to match height of ramp
- \* 4 inch thick concrete slab .....11 ft x 11 ft
- \* Cleanup and trash removal included

Total Labor and Materials: \$8500.00

Budget Summary - Palm Harbor Museum - ARPA Nonprofit Capital Project Fund - Large Projects (Round 2)								
			Match					
Category of Expense	Gra	nt Funds	Funds	Match %	Other Funds	Tota	al	
Scope and Pre-Development					In-kind	\$	-	
Design					in-kind	\$	-	
Acquisition	\$	149,239.86				\$	149,239.86	
Construction	\$	16,000.00				\$	16,000.00	
Administration	\$	250.00				\$	250.00	
Working Capital/Reserves					N/A	\$	-	
Other	\$	24,823.48				\$	24,823.48	
	7				<b>Grand Total</b>	\$	190,313.34	

**Budget Details** 

		Quantity	Unit Price	
Scope and Pre-Development	Item #	(If	(If	
Type/Description	(If Applicable)	Applicable)	Applicable)	Total
Ramp - Approval	In-kind			
Ramp - Contractor Meetings	No Charge			
Lavatory - Approval	In-kind			
Lavatory Plumbers - Contractor Mtgs	No Charge			
Total				\$ -

Design Type/Description	Item # (If Applicable)	Quantity (If Applicable)	Unit Price (If Applicable)	Total	
Ramp - Design, Drawings	Included		,,		
Lavatory - Design Review	In-kind				
Total				\$	-

Acquisition Type/Description	Item # (If Applicable)	Quantity (If Applicable)	Unit Price (If Applicable)	Total
Ramp- Materials & Hardware	(ii / ipplicable)	Applicable)	Applicable	\$ 62,499.86
Lavatory - Building				\$ 86,740.00
Total				\$ 149,239.86

	Itana #	Quantity	Unit Price	
	Item #	(If	(If	_
Construction Type/Description	(If Applicable)	Applicable)	Applicable)	Total
Ramp- Labor	Included			
Ramp - Dumpster	Included			
Lavatory - Placement	Included			
Lavatory - Plumbing	Contractor			\$ 7,500.00
Lavatory - Foundation	Contractor			\$ 8,500.00
Total				\$ 16,000.00

		Quantity	Unit Price	
	Item #	(If	(If	
Administration Type/Description	(If Applicable)	Applicable)	Applicable)	Total
Ramp - Permit	Included			
Ramp - Inspections (2)	Included			
Lavatory - permit (Certificate of	Pinellas County			
Appropriateness)	Plannning Dept.			\$ 250.00
Lavatory - Inspection	In-kind			
Total				\$ 250.00

			Quantity	Unit Price	
	Working Capital/Reserves	Item #	(If	(If	
	Type/Description	(If Applicable)	Applicable)	Applicable)	Total
N/A					
	Total				\$ -

### SubTotal \$ 165,489.86

	Item #	Quantity (If	Unit Price (If		
Other Type/Description	(If Applicable)	Applicable)	Applicable)		Total
15% Contingency				\$	24,823.48
Total				\$	24,823.48
			Grand Total	Ļ	100 212 24

Grand Total \$ 190,313.34

			2022 Actual	2022 Budget	2023 Budget
Ordinary Income/Expense					
Income					
	6100 · Membership Dues		\$6,260.95	\$ 5,500.00	\$7,000.00
	6200 · Donations		\$15,710.09	\$ 3,500.00	\$4,000.00
	6250 · Sales of Donated Items		\$1,140.60	\$ 750.00	\$800.00
	6300 · Grants				
		6300.10 - MSTU		\$ 20,000.00	
		6300.12 - ARP		\$ 5,000.00	
		6300.14 - 2022 Faith Mission		\$ 10,700.00	
		6300.15 - 2023 Faith Mission			\$10,000.00
	6400 · Sponsorship Income - Events		\$190.00	\$ 800.00	\$600.00
	6500 · Ticket Revenue		\$6,597.34	\$ 5,000.00	\$12,000.00
	6525 · Visitor Donation Revenue		\$277.00	\$ 1,000.00	\$400.00
	6650 · Facility Rental Income		\$650.00	\$ -	\$650.00
	6810 · Royalty Income		\$250.00	\$ -	\$250.00
	6920 - Miscellaneous Income			\$ -	\$0.00
	9050 · Interest Earned			\$ -	\$100.00
Total Income			\$31,075.98	\$ 52,250.00	\$ 35,800.00

Expe	ense				
•					
	7005 · Promotional-Book inventory		\$131.94	\$ 200.00	 \$150.00
	7010 · Bank Charges		\$114.46	\$ 200.00	\$150.00
	7020 · Contract Labor	7020.1 · Curator Services		\$ 24,000.00	\$12,000.00
		7020.2 · Exhibit Assistance		\$ 4,400.00	\$500.00
	7040 · Dues & Subscriptions		\$437.76	\$ 100.00	\$500.00
	7045 · Grant Expenses			\$ -	\$10,000.00
	7050 · Insurance				
	7050.2 · Insurance - Liability		\$1,460.04	\$ 1,500.00	\$1,500.00
	7050.3 · Fire Truck insurance		\$105.80	\$ 100.00	\$110.00
	7055 · Food & Beverage - Events		\$523.00	\$ 50.00	\$600.00
	7070 -Equipmrnt/Furniture Rental		\$0.00	\$ -	\$0.00
	7080 · Legal & Professional Fees				
	7100 - Museum Displays and Collections	3		\$ -	\$0.00
	7111 · Event Entertainers		\$0.00	\$ -	\$0.00
	7120 · Office-Operating Expense		\$243.44	\$ 750.00	\$500.00
	7130 · Office Expenses		\$187.92	\$ 250.00	\$250.00

	\$92.80	ć 1,800,00	¢200.00
7140 · Postage	\$92.80	\$ 1,800.00	\$200.00
7145 · Professional Fees	\$1,795.00	\$ 1,800.00	\$2,300.00
7160 · Repair & Maintenance			
7160.1 · Building Maintenance	\$399.89	\$ 50.00	\$400.00
7160.2 · Grounds Maintenance	\$5,984.89	\$ 3,300.00	\$4,500.00
7160.5 · Waste Services	\$537.50	\$ 450.00	\$600.00
7160 · Repair & Maintenance - Other	\$258.31	\$ 500.00	\$300.00
7170 · Security	\$720.00	\$ 1,100.00	\$720.00
7180- Shipping and delivery expenses	\$0.00	\$ 100.00	\$0.00
7190 - Stationary and Printing	\$0.00	\$ 500.00	\$100.00
7200 · Event Supplies	\$926.67	\$ 300.00	\$1,000.00
7210 - Taxes & Licenses		\$ 150.00	\$200.00
7220 · Telephone and Internet	\$3,031.76	\$ 1,100.00	\$3,100.00
7240 · Utilities			
7240.1 · Electricity	\$3,993.32	\$ 3,000.00	\$4,000.00
7240.2 · Water & Sewer	\$428.35	\$ 200.00	\$500.00
7260 - Decorations-Events	\$0.00	\$ 200.00	\$300.00
Total Expense	\$21,372.85	\$ 46,100.00	\$ 44,480.00
Net Income/Deficit	\$9,703.13	-\$6,150.00	-\$8,680.00

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<del>:</del>	:	:			-	 -	
Other income	/Expense						
Other income	,						
9000 · In-Kin	d Revenue (Non-GAAP)						
	9000.1 · In-Kind Revenue - Labor (NG)		\$25,882.18	\$	20,000.00		\$22,000.00
	9000.2 · In-Kind Revenue - Supplies (NG	)	\$9,278.84	Ş	2,000.00		\$8,000.00
Total 9000 · I	n-Kind Revenue (Non-GAAP)		\$35,161.02	ç	22,000.00		\$28,000.00
Other Expense							
9100 · In-Kin	d Expenses (Non-GAAP)						
	9100.1 · In-Kind Expense - Labor (NG)		\$25,882.00	\$	20,000.00		\$22,000.00
	9100.2 · In-Kind Expense - Supplies (NG		\$9,278.84	\$	2,000.00		\$8,000.00
Total 9100 · I	n-Kind Expenses (Non-GAAP)		\$35,161.02	Ş	22,000.00		\$28,000.00
	<u>i</u>						

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## PALM HARBOR MUSEUM

# 2043 Curlew Road, Palm Harbor, Florida 34683 Phone: (727) 724-3054 **PALM HARBOR HISTORICAL SOCIETY, INC. BOARD OF DIRECTORS**

ROSTER 2023						
Bob Fortner, President PO 653 Ozona, FL 34660 - mailing purposes (C) 727-254-2959 unityphrev@gmail.com  Terry Haas, Vice-President, Finance Committee Chair 362 Tall Oak Trail Tarpon Springs, FL 34688 (C) (610) 737-5624 (H) (727) 943-7264 Rhaas4@tampabay.rr.com	Jean Barnes, Past-President 1635 E Dorchester Ct Palm Harbor, FL 34684 (C)(845) 399-5412 jeanbarnes@aol.com Erhan Ozey, Treasurer 301 Old Mill Pond Road Palm Harbor, FL 34683 (C) (727) 641-8344 erhanozey@msn.com					
Barbara Battaglia, At-Large 3749 Orchard Highland Palm Harbor, FL 34684 (C)(727) 998-1996 barb.battaglia@cbrealty.com	Glenda Riviere Gunnells, At-Large 2083 TempleTerrace Clearwater, FL 33764 (C) (727) 531-1233 mggunnells57@gmail.com					
Stephanie Andrews, Secretary 2973 Westcott Dr. Palm Harbor, FL (C) (727) 281-1953 Stephanie.andrews@ymail.com palmharborhappenings@gmail.com	Museum Email: PalmHarborMuseum@outlook.com Museum Website: www.palmharbormuseum.com					
Jim Wiesner, Membership chair 1106 Illinois Ave Palm Harbor, FL 34683 (C)727-871-6901 james.wiesner@yahoo.com						

Updated April 22, 2023

### Lima & Associates, LLC 33920 US Highway 19 N Ste 250 Palm Harbor, FL 34684 727-223-5004

August 1, 2022

#### **CONFIDENTIAL**

PALM HARBOR HISTORICAL SOCIETY INC 2043 CURLEW ROAD PALM HARBOR, FL 34683

Dear MR OZEY:

Lima & Associates, LLC is pleased to provide you with the professional services described below. This letter, and the attached *Terms and Conditions Addendum* and any other attachments incorporated herein (collectively, "Agreement"), confirm our understanding of the terms and objectives of our engagement and the nature and limitations of the services we will provide. The engagement between you and our firm will be governed by the terms of this Agreement.

Engagement Objective and Scope

We will prepare the federal and applicable state tax returns for the year beginning in 2019.

We will not prepare any tax returns except those identified above, without your written request, and our written consent to do so. We will prepare your tax returns based upon information and representations that you provide to us. We have not been engaged to and will not prepare financial statements. We will not audit or otherwise verify the data you submit to us, although we may ask you to clarify certain information.

We will prepare the above-referenced tax returns solely for filing with the Internal Revenue Service ("IRS") and state and local tax authorities as identified above. Our work is not intended to benefit or influence any third party, either to obtain credit or for any other purpose.

You agree to indemnify and hold us harmless with respect to any and all claims arising from the use of the tax returns for any purpose other than filing with the IRS and state and local tax authorities regardless of the nature of the claim, including the negligence of any party.

Our engagement does not include any procedures designed to detect errors, fraud, or theft. Therefore, our engagement cannot be relied upon to disclose such matters.

This engagement is limited to the professional services outlined above.

#### CPA Firm Responsibilities

Unless otherwise noted, we will perform our services in accordance with the Statements on Standards for Tax Services ("SSTSs") issued by the American Institute of Certified Public Accountants ("AICPA") and U.S. Treasury Department Circular 230 ("Circular 230"). It is our duty to perform services with the same standard of care that a reasonable income tax preparer would exercise in this type of engagement. It is your responsibility to safeguard your assets and maintain accurate records pertaining to transactions. We will not hold your property in trust for you, or otherwise accept fiduciary duties in the performance of the engagement.

#### Arguable Positions

We will use our judgment to resolve questions in your favor where a tax law is unclear, provided there is sufficient support for doing so. If there are conflicting interpretations of the law, we will explain the possible positions that may be taken on your return. We will follow the position you request, provided it is consistent with our understanding of the Internal Revenue Code ("IRC"), tax regulations, Revenue Rulings, Revenue Procedures, private letter rulings and court decisions. If the IRS, state or local tax authorities later contest the position taken, additional tax, penalties, and interest may be assessed. We assume no liability, and you hereby release us from any liability including but not limited to, additional tax, penalties, interest, and related professional fees.

#### Bookkeeping assistance

We may deem it necessary to provide you with accounting and bookkeeping assistance solely for the purpose of preparing the tax returns. These services will be performed solely in accordance with the AICPA Code of Professional Conduct. We will request your approval in writing before rendering these services. Additional charges will apply for such services.

#### Government inquiries

This engagement does not include responding to inquiries by any governmental agency or tax authority. If your tax return is selected for examination or audit, you may request our assistance in responding to such an inquiry. If you ask us to represent you, and we agree to represent you, we will confirm this engagement in a separate Agreement.

#### Tax Advice

Any advice we may provide is based upon tax reference materials, facts, assumptions, and representations that are subject to change. Tax reference materials include, but are not limited to, the Internal Revenue Code ("IRC"), tax regulations, Revenue Rulings, Revenue Procedures, private letter rulings and court decisions. We will not update our advice after the conclusion of the engagement for subsequent legislative or administrative changes or future judicial interpretations. To the extent we provide written advice concerning federal tax matters, we will follow the guidance contained in Circular 230, §10.37, Requirements for Written Advice.

#### Reliance on Others

If you wish to take a tax position based upon the advice of another tax advisor, you agree to obtain a written statement from the advisor confirming that the position should meet the "realistic possibility," "substantial authority," or "more likely than not" standard, as applicable. In preparing your federal tax return, we are subject to a diligence as to accuracy regarding reliance on others standard, as defined in revisions to Circular 230, §10.22(b). To the extent a position is based upon the advice of another tax advisor, prior to preparing or signing the tax return, the AICPA SSTS No. 1 also requires our firm to have a good faith belief that the position has, at a minimum, a realistic possibility of being sustained administratively or judicially on its merits, if challenged. Additional charges will apply to such research.

#### Substantial Understatement Penalties

The IRS and many states impose penalties for substantial understatement of tax. To avoid the substantial understatement penalty, you must have substantial authority to support the tax treatment of the item challenged by the IRS or adequate disclosure of the item. To fulfill the adequate disclosure requirement, you may be required to attach to your tax return a completed IRS Form 8275, Disclosure Statement, or 8275-R, Regulation Disclosure Statement, which discloses all relevant facts. A disclosed tax position that meets the reasonable basis standard must have some authority supporting the position and be more than simply arguable.

You agree to advise us if you wish to disclose a tax treatment on your return. If you request our

assistance in identifying or performing further research to ascertain if there is "substantial authority" for the proposed position to be taken on the tax item(s) in your returns, we will confirm this representation in a separate engagement letter. It is your responsibility to contact us if additional assistance is required.

If we conclude as a result of our research that you are required to disclose a transaction on your tax return, you consent to attach a completed Form 8275 or 8275-R to your tax return for filing after we discuss the situation with you. You also agree to hold our firm harmless from any and all actual and consequential damages (including but not limited to tax, penalties, interest, and professional fees) you incur as a result of including such disclosures with your filed tax return regardless of the nature of the claim, including the negligence of any party.

Unless an undisclosed tax position meets the "realistic possibility" standard, as applicable, we will be unable to prepare the return and will withdraw from the engagement.

#### Client Responsibilities

You will provide us with a trial balance and other supporting data necessary to prepare your tax returns. You must provide us with accurate and complete information. Income from all sources, including those outside of the U.S., is required.

We rely upon the accuracy and completeness of both the information you provide in the trial balance and other supporting data you provide in rendering professional services to you.

#### On-line access to information

To the extent you provide our firm with access to electronic data via a local or online database from which we will download your trial balance or other information, you agree that the data is accurate as of the date and time you authorize it to be downloaded.

#### Transfer pricing

Your transactions with related parties are subject to the transfer pricing rules of IRC §482, Allocation of Income and Deductions Among Taxpayers, which require that such transactions are conducted in an arm's length manner. Taxpayers who do not have the required documentation can be subject to significant penalties if transfer pricing adjustments are sustained upon examination by the IRS. You acknowledge and confirm that you can document your transfer pricing policies in accordance with IRC §482 and §6662, Imposition of Accuracy-Related Penalty on Underpayments, and the regulations thereunder to reduce this risk. If you ask us to conduct a transfer pricing study, we will confirm this representation in a separate engagement letter.

#### Unrelated business taxable income

If your organization produces revenue from a trade or business activity not directly related to its tax-exempt purpose, it may have unrelated business taxable income that must be reported separately from other income. You are responsible for informing us of any potential unrelated business taxable income. At your written request, we are available to provide you with written answers to your questions on this matter.

#### <u>Documentation</u>

You are responsible for maintaining adequate documentation to substantiate the accuracy and completeness of your tax returns. You should retain all documents that provide evidence and support for reported income, credits, and deductions on your returns, as required under applicable tax laws and regulations. You are responsible for the adequacy of all information provided in such documents. You represent that you have such documentation and can produce it if necessary, to respond to any audit or inquiry by tax authorities. You agree to hold our firm harmless respect from any liability including but not limited to, additional tax, penalties, interest

and professional fees resulting from the disallowance of tax deductions due to inadequate documentation.

#### Personal expenses

You are responsible for ensuring that personal expenses, if any, are segregated from business expenses and that expenses such as meals, travel, vehicle use, gifts, and related expenses are supported by necessary records required by the IRS and other tax authorities. At your written request, we are available to provide you with written answers to your questions on the types of supporting records required.

#### State and local filing obligations

On June 21, 2018, the U.S. Supreme Court reversed the long-standing physical presence nexus standard in *South Dakota v. Wayfair, Inc. et. al.* This decision significantly changes the landscape of sales and use tax compliance, especially for online sellers. If you wish to understand the impact of the decision on your business, please so advise and we will confirm this in a separate Agreement.

You are responsible for determining your tax filing obligations with any state or local tax authorities, including, but not limited to, income, franchise, sales, use, property or unclaimed property taxes. If upon review of the information you have provided to us, including information that comes to our attention, we believe that you may have additional filing obligations, we will notify you. You acknowledge that the scope of our services under this Agreement does not include any services related to your compliance with tax obligations other than those identified in the *Engagement Objective and Scope* section of this Agreement. If you ask us to prepare any other returns, and we agree to do so, we will confirm this engagement in a separate Agreement.

#### U.S. filing obligations related to foreign investments

Based on the information you provide, you may have additional filing obligations including but not limited to:

- Ownership of or an officer relationship with respect to certain foreign corporations (Form 5471);
- · Foreign-owned U.S. corporation or domestic disregarded entity (Form 5472);
- · Foreign corporation engaged in a U.S. trade or business (Form 5472);
- · U.S. transferor of property to a foreign corporation (Form 926);
- · U.S. person with an interest in a foreign trust (Forms 3520 and 3520-A);
- · U.S. person with interests in a foreign partnership (Form 8865);
- · U.S. person with interests in a foreign disregarded entity (Form 8858); or
- · Statement of specified foreign assets (Form 8938).

You are responsible for informing us of all foreign assets owned directly or indirectly, including but not limited to financial accounts with foreign institutions, other foreign non-account investments, and ownership of any foreign entities, regardless of amount. If upon review of the information you have provided to us, including information that comes to our attention, we believe that you may have additional filing obligations, we will notify you.

Failure to timely file the required forms may result in substantial civil and/or criminal penalties. By your signature below, you agree to provide us with complete and accurate information

regarding any foreign investments in which you have a direct or indirect interest, or over which you have signature authority, during the above referenced tax year.

The foreign reporting requirements are very complex. If you have any questions regarding the application of the reporting requirements for your foreign interests or activities, please ask us and we will respond in writing. Only advice that is in writing may be relied upon. We assume no liability for penalties associated with the failure to file or untimely filing of any of these forms.

#### Foreign filing obligations

You are responsible for complying with the tax filing requirements of any other country. You acknowledge and agree that we have no responsibility to raise these issues with you and that foreign filing obligations are not within the scope of this engagement.

#### Other income, losses and expenses

If you realized income, loss or expense from a business or supplemental income or loss, the reporting requirements of federal and state income tax authorities apply to such income, loss or expense. You are responsible for complying with all applicable laws and regulations pertaining to such operations, including the classification of workers as employees or independent contractors and related payroll tax and withholding requirements.

#### Employment records

You are responsible for obtaining Form I-9, Employment Eligibility Verification, from each new employee at the time of employment. In addition, Federal Form W-4, Employee's Withholding Allowance Certificate, and the applicable state equivalent should be retained for all employees. Failure to obtain these forms may subject an employer to penalties. Additional state requirements related to employment records may exist. At your written request, we are available to provide written answers to your questions on required documentation.

#### Worker classification

You acknowledge and confirm that you, in consultation with other professional advisors, as needed, are responsible for determining the correctness of any worker classification. Payroll tax withholding and related employer payroll tax implications result from this determination. We recommend obtaining a signed contract and signed Form W-9, Request for Taxpayer Identification Number and Certification, from all independent contractors. You should also issue a Form 1099-MISC, Miscellaneous Income, to all unincorporated independent contractors to whom you pay \$600 or more for services. At your written request, we are available to provide written answers to your questions on required documentation.

#### Ultimate responsibility

You have final responsibility for your tax returns. We will provide you with a copy of your electronic tax returns and accompanying schedules and statements for review prior to filing with the IRS and state and local tax authorities, as applicable. You agree to review and examine them carefully for accuracy and completeness.

You will be required to verify and sign a completed Form 8879-EO, *IRS e-file Signature Authorization for an Exempt Organization*, and any similar state and local equivalent authorization form before your returns can be filed electronically.

In the event that you do not wish to have your tax returns filed electronically, please contact our firm. Additional procedures will apply. You will be responsible for reviewing the paper returns for accuracy, signing them, and filing them timely with the tax authorities.

#### Timing of the Engagement

We expect to begin our services upon receipt of this executed Agreement, your 2019 trial balance, and other supporting data agreed to above.

Our services will conclude upon the earlier of:

- $\lambda$  the filing and acceptance of your 2020 tax returns by the appropriate tax authorities and mailing or delivery of non-electronically filed tax returns (if any) for your review and filing with the appropriate tax authorities,
- λ written notification by either party that the engagement is terminated, or
- $\lambda$  one year from the execution date of this Agreement.

If you have the option to file a paper return and choose to do so, our services will conclude upon the earlier of:

- $\lambda$  mailing or delivery of your 2020 tax returns for your review and filing with the appropriate tax authorities,
- $\lambda$  written notification by either party that the engagement is terminated, or
- $\lambda$  one year from the execution date of this Agreement.

#### Extensions of Time to File Tax Returns

The original filing due dates for your calendar year tax returns are May 15, 2020 for federal and various dates depending on the state. Due to the high volume of tax returns prepared by our firm, the information needed to complete the tax returns must be received no later than March 31 so that the returns may be completed by the original filing due dates.

It may become necessary to apply for an extension of the filing deadline if there are unresolved issues or delays in processing, or if we do not receive all of the necessary information from you on a timely basis. Applying for an extension of time to file may extend the time available for a government agency to undertake an audit of your return or may extend the statute of limitations to file a legal action. All taxes owed are due by the original filing due date. Additionally, extensions may affect your liability for penalties and interest or compliance with governmental or other deadlines.

To the extent you wish to engage our firm to apply for extensions of time to file tax returns on your behalf, you must notify us of this request in writing. Our firm will not file these applications unless we receive correspondence from you. In some cases, your signature may be needed on such applications prior to filing. Failure to timely request an extension of time to file can result in penalties for failure to file tax returns, which accrue from the original due date of the returns, and can be substantial.

We are available to discuss this matter with you at your request. Additional charges will apply for such services.

#### Penalties and Interest Charges

Federal, state, and local tax authorities impose various penalties and interest charges for non-compliance with tax laws and regulations including failure to file or late filing of returns, and underpayment of taxes. You, as the taxpayer, remain responsible for the payment of all tax, penalties, and interest charges imposed by tax authorities.

We rely on the accuracy and completeness of the information you provide to us in connection

with the preparation of your tax returns. Failure to disclose or inadequate disclosure of income or tax positions may result in the imposition of penalties and interest charges.

#### Professional Fees

Our professional fee for the services outlined above is due prior to the return being filed. This fee is based upon the complexity of the work to be performed, and our professional time, as well as out-of-pocket expenses. In addition, this fee depends upon the timely delivery, availability, quality, and completeness of the information you provide to us. You agree that you will deliver all records requested and respond to all inquiries made by our staff to complete this engagement on a timely basis. You agree to pay all fees and expenses incurred whether or not we prepare the tax returns.

We require that all outstanding invoices be paid prior to releasing the completed tax returns. We do not release incomplete tax returns.

\* \* \* \* \* \*

We appreciate the opportunity to be of service to you. Please date and execute the enclosed copy of this Agreement and return it to us to acknowledge your acceptance.

Very truly yours,

#### Lima & Associates

Lima & Associates, LLC

Accepted By:		
Date:		

# 1099 Rules for Business Owners

Over the past few years there have been a number of changes and updates regarding the reporting rules for 1099-Misc and various other 1099 forms. Forms 1099 are generally due to the payee and the Internal Revenue Service by January 31, 2020.

Generally, business owners must issue a Form 1099-MISC to each person to whom you have paid at least \$600 in rents, services (including parts and materials), prizes and awards, or other income payments. You don't need to issue 1099s for payments made for personal purposes. You are required to issue 1099 MISC reports only for payments you made in the course of your trade or business.

Here are the basics you should know.

- Who are you required to send a Form 1099MISC? You are required to send Form 1099MISC to vendors or sub-contractors during the normal course of business you paid more than \$600, and that includes any individual, partnership, Limited Liability Company (LLC), Limited Partnership (LP), or Estate.
- **Who are considered Vendors or Sub-Contractors?** Essentially, this is a person or company you have paid for services that isn't your employee.
- λ **What are the exceptions?** The list is fairly lengthy, but the most common is that you don't need to send a 1099 to:
  - Vendors operating as S or C-Corporations (you'll find their status out when you get a W-9...see below)
  - o Sellers of merchandise, freight, storage or similar items.
  - Payments of rent to or through real estate agents (typically property managers).
     However, keep in mind you need to issue a 1099 to a landlord you are paying rent, unless they meet another exception.
- **Don't worry about credit card payments and Paypal.** The IRS allows taxpayers to exclude from Form 1099-MISC any payments you made by credit card, debit card, gift card, or third-party payment network such as PayPal. (These payments are being reported by the card issuers and third-party payment networks on Form 1099-K.)
- **Lawyer/Attorney.** Even if your lawyer is 'incorporated', you are still required to send them a Form 1099 if you paid them more than \$600.

You may also have a requirement for filing other 1099 forms such as 1099C (cancellation of debt), 1099INT (interest income), 1099DIV (dividend income) or some other less common 1099. The thresholds for the more common 1099 forms are as follows:

- λ **1099C** Cancellation of Debt \$600
- λ **1099INT** Interest Income \$10
- λ **1099DIV** Dividend Income \$10
- λ **1099MISC** Miscellaneous Income \$600 for most payments; \$10 for Royalties and various other payments

λ

**Form W-9.** Some of you may be frustrated that you don't have the information you NEED to issue the 1099. One of the smartest procedures a business owner can implement is to request a W-9 from any vendor you expect to pay more than \$600 *before* you pay them. Using this as a normal business practice will give you the vendor's mailing information, Tax ID number, and also require them to indicate if they are a corporation or not (saving you the headache of sending them a 1099 next year). You can download a <u>W-9 here <a href="http://www.irs.gov/pub/irs-pdf/fw9.pdf">http://www.irs.gov/pub/irs-pdf/fw9.pdf</a>.</u>

The penalties for not providing the required forms can vary from \$30 to \$100 per form,

depending on how long past the deadline the company issues the form. If a business intentionally disregards the requirement to provide a correct payee statement, it is subject to a minimum penalty of \$250 per statement, with no maximum. Bottom line, the penalties can add up!!

- The procedure. Regrettably, you CANNOT simply go to <a href="http://www.irs.gov/">www.irs.gov/</a> and download a bunch of 1099 Forms and send them out to your vendors before the deadline. The form is "pre-printed" in triplicate by the IRS. Thus, you have to order the Forms from the IRS, pick them up at an IRS service center, or hopefully grab them while supplies last from the post office or some other outlet.
- **Deadline to Payees**. Taxpayers are required to issue and mail out all Form 1099s to vendors by January 31st.
- Deadline to IRS. Next, don't forget you have to compile all of your 1099s and submit them to the IRS with a 1096 by January 31st as well (NOT the end of February- the old rule). Also, depending on state law, you may also have to file the 1099-MISC with the state. Sounds like fun...right? (This is where delegating the task to your accountant may come in helpful).
- What about foreign workers? Also, if you hire a non-U.S. citizen who performs any work inside the United States, you would need to file the 1099. It is your responsibility to verify that the worker (1) is indeed a non-U.S. citizen, and (2) performed all work inside or outside the United States. For that purpose, in the future you might want to have that foreign worker fill out, sign and return to you Form W-8BEN. <a href="http://www.irs.gov/pub/irs-pdf/fw8ben.pdf">http://www.irs.gov/pub/irs-pdf/fw8ben.pdf</a>>
- Procedures for 2019. Moving forward this year, make sure to get a Form W-9 from all your vendors before they can get paid. This will save you a lot of headaches *next* January so you don't have to track down their mailing addresses or EINs.

Don't ignore the 1099 or the process. Lima & Assiquestions and preparation of these time sensitive	
	(name of business)
was not required to prepare, file and dis	tribute Forms 1099 for calendar year 2019.
was required to prepare, file and distribute prepare, file and distribute such forms.	te Forms 1099 for calendar year 2019 and did
was required to prepare, file and distribute NOT prepare, file and distribute such forms.	te Forms 1099 for calendar year 2019 and <u>did</u>
Signature	Date

Title

### Forms 990 / 990-EZ Return Summary

For calendar year 2021, or tax year beginning

, and ending

59-3246072

#### PALM HARBOR HISTORICAL SOCIETY INC

Net Asset / Fund Balance at Beginning of Year		45,235
Revenue		
Contributions	63,347	
Program service revenue		
Investment income	8	
Capital gain / loss		
Fundraising / Gaming:		
Gross revenue	_	
Direct expenses	_	
Net income		
Other income	9,516	
Total revenue		72,871
Expenses		
Program services		
Management and general		
Fundraising		
Total expenses		94,547
Excess / (deficit)		
	0	0.040
Changes		9,942
	d of Year	
Reconciliation of Revenue		Reconciliation of Expenses
Total revenue per financial statements		r financial statements
Less:	Less:	
Unrealized gains	Donated service	
Donated services	Prior year adju	
Recoveries	Losses	
Other	Other	
Plus:	Plus:	
Investment expenses	Investment ex	penses
Other	Other	
Total revenue per return	lotal expe	enses per return
	Balance Sheet	
Beginn		Differences
Assets 27	77,887243,277	
	32,652 209,776	
Net assets	15,235 33,501	<u>-11,734</u>
,	Miscellaneous Information	
Amended ı		
	tended due date $11/15/2\overline{2}$	
Failure to f		

Form 8879-TE

#### IRS *e-file* Signature Authorization for a Tax Exempt Entity

OMB	No.	1545-0047

For calendar year 2021, or fiscal year beginning ...... ...., 2021, and ending ....., 20 .....

Department of the Treasury Internal Revenue Service

▶ Do not send to the IRS. Keep for your records. ▶ Go to www.irs.gov/Form8879TE for the latest information. 2021

EIN or SSN Name of filer PALM HARBOR HISTORICAL SOCIETY INC 59-3246072 Name and title of officer or person subject to tax JEAN BARNES PAST PRESIDENT Part I Type of Return and Return Information Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I. **b Total revenue,** if any (Form 990, Part VIII, column (A), line 12) 1a Form 990 check here 2a Form 990-EZ check here ..... b Total revenue, if any (Form 990-EZ, line 9) 2b 3a Form 1120-POL check here  $\blacktriangleright$ b Total tax (Form 1120-POL, line 22) \_\_\_\_\_\_\_ 3b 4a Form 990-PF check here b Tax based on investment income (Form 990-PF, Part VI, line 5) 5a Form 8868 check here ...... b Balance due (Form 8868, line 3c) 5b 6a Form 990-T check here ..... b Total tax (Form 990-T, Part III, line 4) 6b 7a Form 4720 check here ..... 8a Form 5227 check here 9a Form 5330 check here ...... 10a Form 8038-CP check here ... b Amount of credit payment requested (Form 8038-CP, Part III, line 22) ... 10b Declaration and Signature Authorization of Officer or Person Subject to Tax I am an officer of the above entity or I am a person subject to tax with respect to (name Under penalties of perjury, I declare that |X| of entity) , (EIN) and that I have examined a copy of the 2021 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal. PIN: check one box only LIMA & ASSOCIATES, I authorize \_ to enter my PIN as my signature Enter five numbers, but FRO firm name do not enter all zeros on the tax year 2021 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen. As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2021 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen. 08/01/22 Signature of officer or person subject to tax > **Certification and Authentication** ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN. \*\*\*\*\*\* Do not enter all zeros I certify that the above numeric entry is my PIN, which is my signature on the 2021 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns. BARBARA A. LIMA 08/01/22 ERO's signature ERO Must Retain This Form — See Instructions

Form **990-EZ** 

# 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)

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

<u>A</u>	For the	e 2021 calend	ar year, or tax year beginning , and ending				
В		applicable:	C Name of organization			D Employer	identification number
Н	Address	-					
Н	Name ch	•	PALM HARBOR HISTORICAL SOCIETY	INC	T =		246072
Н	Initial ret		Number and street (or P.O. box if mail is not delivered to street address)		Room/suite	E Telephone	
Н		turn/terminated	2043 CURLEW ROAD				724-3054
Ц	Amended		City or town, state or province, country, and ZIP or foreign postal code			<b>F</b> Group Ex	emption
Ш	Application	on pending	PALM HARBOR FL 34683			Number	<u>'</u>
G		nting Method:					e organization is <b>not</b>
I			. PALMHARBORMUSEUM . COM		requ	uired to attach S	Schedule B
J	Tax-exe	empt status (cl		7(a)(1) or	527 (For	m 990).	
K	Form o	of organization	: X Corporation Trust Association	Other			
			The following 9 to determine gross receipts. If gross receipts are \$20				
(Pa	rt II, col	lumn (B)) are	\$500,000 or more, file Form 990 instead of Form 990-EZ			▶ \$	72,871
F	Part I	Reven	ue, Expenses, and Changes in Net Assets or Fund	d Balances	(see the instru	ctions for Par	t I)
		Check	f the organization used Schedule O to respond to any que	stion in this I	Part I		
	1	Contributions,	gifts, grants, and similar amounts received	/:>		. 1	63,347
	2	Program ser	vice revenue including government fees and contracts			2	
	3	Membership	dues and assessments	O.		3	
	4		ncome			4	8
	5a	Gross amou	nt from sale of assets other than inventory	5a			
	b	Less: cost o	other basis and sales expenses	5b			
	C		from sale of assets other than inventory (subtract line 5b from line 5a)			5c	
	6		fundraising events:				
	a	•	e from gaming (attach Schedule G if greater than				
Ф	"	Ø4E 000)		6a			
Revenue	b		e from fundraising events (not including \$	of contrib	utions		
ě	~		sing events reported on line 1) (attach Schedule G if the		ationio		
œ			gross income and contributions exceeds \$15,000)	6b			
	C		expenses from gaming and fundraising events				
	d		or (loss) from gaming and fundraising events (add lines 6a and 6b				
	"		(1033) Horri garining and fundationing events (add lines of and ob			6d	
	7a					00	
	1 .		of inventory, less returns and allowances	1 1			
	b		goods sold			70	
	8 8		or (loss) from sales of inventory (subtract line 7b from line 7a)				9,516
	1	Total reven	te (describe in Schedule O)				72,871
	10		ue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8			9 10	12,011
	10		similar amounts paid (list in Schedule O)				
	11		to or for members			. 11	
es	12	Salaries, oth	er compensation, and employee benefits			12	15 020
ens	13	Professional	fees and other payments to independent contractors			13	15,820
Expenses	14					14	8,929
ш	15	Printing, pub	lications, postage, and shipping			140	60 700
	16	Other expenses (describe in Schedule O)					69,798
	17		ses. Add lines 10 through 16			<b>▶</b> 17	94,547
δ	18		eficit) for the year (subtract line 17 from line 9)			18	-21,676
Net Assets	19		r fund balances at beginning of year (from line 27, column (A)) (m	ust agree with	1		45 005
¥			igure reported on prior year's return)			19	45,235
Net	20		es in net assets or fund balances (explain in Schedule O)				9,942
_	21	Net assets of	r fund balances at end of year. Combine lines 18 through 20			<b>21</b>	33,501

For Paperwork Reduction Act Notice, see the separate instructions.

Form **990-EZ** (2021)

PALM HARBOR HISTORICAL SOCIETY INC 59-3246072

**Balance Sheets** (see the instructions for Part II) X Check if the organization used Schedule O to respond to any question in this Part II (A) Beginning of year (B) End of year 43,700 47,841 22 Cash, savings, and investments 0 23 Land and buildings 23 234,187 195,436 **24** Other assets (describe in Schedule O) 24 277,887 25 243,277 25 Total assets Total liabilities (describe in Schedule O) 232,652 209,776 45,235 33,501 27 Net assets or fund balances (line 27 of column (B) must agree with line 21) 27 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** What is the organization's primary exempt purpose? (Required for section TO COLLECT, PRESERVE AND SHARE THE HERITAGE OF PALM HARBOR, FLORIDA 501(c)(3) and 501(c)(4) Describe the organization's program service accomplishments for each of its three largest program services, organizations; optional for as measured by expenses. In a clear and concise manner, describe the services provided, the number of others.) persons benefited, and other relevant information for each program title. HISTORICAL PRESERVATON AND EDUCATION ABOUT THE PALM HARBOR AREA FOR ITS 60,000+ RESIDENTS (Grants \$ If this amount includes foreign grants, check here 28a 29 (Grants \$ ) If this amount includes foreign grants, check here 29a 30 ) If this amount includes foreign grants, check here 30a (Grants \$ 31 Other program services (describe in Schedule O) 94.547 ) If this amount includes foreign grants, check here 31a Total program service expenses (add lines 28a through 31a) 32 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 (c) Reportable (d) Health benefits, contributions to employee (b) Average hours per week devoted to position (e) Estimated amount of compensation (Forms W-2/1099-MISC/ 1099-NEC) (a) Name and title other compensation benefit plans, and deferred compensation (if not paid, enter -0-) BOB FORTNER PRESIDENT 4.00 0 0 0 TERRY HAAS 4.00 VICE-PRESIDENT 0 0 0 ERHAN OZEY TREASURER 4.00 0 0 0 GLENDA RIVIERE GUNNELLS DIRECTOR 4.00 n n 0 BARBARA BATTAGLIA 0 0 DIRECTOR 4.00 0 STEPHANIE ANDREWS 0 0 0 DIRECTOR 4.00 JAMES WIESNER 0 0 DIRECTOR 4.00 JEAN BARNES PAST PRESIDENT 4.00 0 0

Page 3

Form 990-EZ (2021) PALM HARBOR HISTORICAL SOCIETY INC 59-3246072

P	instructions for Part V.) Check if the organization used Schedule O to respond to			t V		
	<u> </u>				Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," pro	vide	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 con-	nform	ed			
	copy of the amended documents if they reflect a change to the organization's name. Otherwise, expla-	ain th	е			
	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 b	usine	SS			
	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			35b		-
С	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033	s(e) n	otice,			
	reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III			35c		X
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net as	sets				v
<b>~</b> -	during the year? If "Yes," complete applicable parts of Schedule N			36		X
37a	territoria de la companya de la comp	37a		071		v
b	Did the organization file Form 1120-POL for this year?			37b		X
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee			00-		v
<b>L</b>	any such loans made in a prior year and still outstanding at the end of the tax year covered by this re-			38a		X
b	If "Yes," complete Schedule L, Part II, and enter the total amount involved	38b				
39	Section 501(c)(7) organizations. Enter:	20-				
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 unc					
<b>h</b>	section 4911 ► ; section 4912 ► ; section 4912 ► ; section 4915	_	0	—		
b	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section		0			
	excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, P	-		40b		х
_	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed	ait i				72
С	on organization managers or disqualified persons during the year under sections 4912,					
	4955, and 4958					
٨	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line	_		_		
d	40c reimbursed by the organization					
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax she	ltor		_		
٠	transaction? If "Yes," complete Form 8886-T	ittei		40e		X
41	List the states with which a copy of this return is filed ▶ NONE			[400		
42a	The organization's books are in care of ▶ LIMA & ASSOCIATES, LLC		Telephone no. ▶	727-22	3-5	004
	33920 US HIGHWAY 19 N STE 250					7. 7
		L	ZIP + 4 ▶	34684		
b	At any time during the calendar year, did the organization have an interest in or a signature or other a	autho			Yes	No
	a financial account in a foreign country (such as a bank account, securities account, or other financia		-	42b		X
	If "Yes," enter the name of the foreign country ▶		,			
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign B	Bank	and			
	Financial Accounts (FBAR).					
С	At any time during the calendar year, did the organization maintain an office outside the United States	s?		42c		X
	If "Yes," enter the name of the foreign country ▶					_
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check her					
	and enter the amount of tax-exempt interest received or accrued during the tax year		▶ 43			
					Yes	No
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 l					
	completed instead of Form 990-EZ			44b		X
С				44c		X
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide a					
	explanation in Schedule O			l l	<u> </u>	<del></del>
45a				45a		X
b	Did the organization receive any payment from or engage in any transaction with a controlled entity w		the			
	meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead					
	Form 990-EZ. See instructions			45b	l	X

Form 990-EZ (2021)

Page 4

M.TAC	HARROR	HISTORICAL	SOCTETY	TNC	59-3246072

							_	<u>Y</u>	es	NO
	the organization engage, directly or indirectly, in political							46		v
Part VI	section 501(c)(3) Organizations Only	C, Ραπ Ι						46		X
i ait Vi	All section 501(c)(3) organizations must answ	wer questions 47	-49b and	52, and con	nplete the	tables for li	nes			
	50 and 51.									
	Check if the organization used Schedule O t	o respond to any	question	in this Part v	VI				- 1	<u> </u>
7 Did t	the organization engage in lobbying activities or have a	section 501(h) elec	tion in effec	t during the ta	ax		Г	<del> </del>	es	No
	? If "Yes," complete Schedule C, Part II							47		X
l <b>8</b> Is the	e organization a school as described in section 170(b)(	1)(A)(ii)? If "Yes," co	omplete Scl	hedule E			·····  -	48 49a		X
<b>l9a</b> Didit <b>b</b> If"Y∈	the organization make any transfers to an exempt non-ces," was the related organization a section 527 organization	criantable related of	rganization					49a 49b		
	plete this table for the organization's five highest compe		(other than	officers, dire			∟			
empl	loyees) who each received more than \$100,000 of com	pensation from the	organizatio	n. If there is r	one, enter '	'None."				
		(b) Average hours per week		eportable ensation		benefits, to employee	(e) Esti	mated a	amou	nt of
	(a) Name and title of each employee	devoted to position	(Forms W-	2/1099-MISC) 9-NEC)	benefit p	lans, and ompensation	other	compe	nsati	on
			(if not pa	id, enter -0-)	40.004	oporioduori				
NONE										
			A**	NO.						
			4							
			10							
			4							
			0							
<b>f</b> Total	I number of other employees paid over \$100,000		,	•						
51 Com	plete this table for the organization's five highest compe			rs who each	received mo	re than				
\$100	0,000 of compensation from the organization. If there is	none, enter "None.	"							
	(a) Name and business address of each independent cor	ntractor		<b>(b)</b> Type	e of service		(c) Co	ompensa	ation	
NONE		0								
		· )								
		****								
	I number of other independent contractors each receivir the organization complete Schedule A? <b>Note:</b> All sectio	•	ations must	attach a						
	pleted Schedule A	11 50 1(c)(3) Olyaniz	auons musi	allaura		•	X	Yes	¬ ,	No
Jnder penal	Ities of perjury, I declare that I have examined this return, inclu								t is	
rue, correct	, and complete. Declaration of preparer (other than officer) is b	pased on all information	on of which p	oreparer has an	y knowledge.					
Sign	Signature of officer			Da	te					
Here	JEAN BARNES		P		ESIDEN'	r				
	Type or print name and title									
	Print/Type preparer's name	eparer's signature			Date	Check	if	PTIN		
Paid		RBARA A. LIMA			08/0	1/22 self-em		P01520		
Preparer	Firm's name LIMA & ASSOCIATES		250			Firm's EIN	26-	174	588	30
Jse Only	7 Firm's address > 33920 US HIGHWAY PALM HARBOR, FL	19 N STE 34684	250			Dhone no 7	27-2	23-1	500	)⊿
May the IF	RS discuss this return with the preparer shown above?					Phone no. /		Yes		No
								990-	EZ (	(2021)

#### SCHEDULE A (Form 990)

Department of the Treasury Internal Revenue Service

#### **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Reason for Public Charity Status. (All organizations must complete this part.) See instructions.

2021

Open to Public Inspection

Name of the organization PALM HARBOR HISTORICAL SOCIETY INC

Employer identification number 59-3246072

The	orga	nization is not	a private foundation because	e it is: (For lines 1 through 12, o	check only	one box	<b>()</b>	
1		A church, con	nvention of churches, or ass	ociation of churches described i	in <b>sectio</b> i	170(b)(	1)(A)(i).	
2		A school des	cribed in section 170(b)(1)(	A)(ii). (Attach Schedule E (Form	n 990).)			
3		A hospital or	a cooperative hospital servi-	ce organization described in se	ction 170	(b)(1)(A)	(iii).	
4	П	A medical res	search organization operated	d in conjunction with a hospital of	described	in <b>sectio</b>	on 170(b)(1)(A)(iii). Enter the h	nospital's name,
	_	city, and state	e:					
5	$\Box$	An organizati	on operated for the benefit of	of a college or university owned	or operate	ed by a c	overnmental unit described in	
	_	section 170	(b)(1)(A)(iv). (Complete Part	II.)		, ,		
6				overnmental unit described in s	ection 1	70(b)(1)(A	۸)(v).	
7	П	An organizati	on that normally receives a	substantial part of its support fro	om a gove	ernmental	unit or from the general public	
		described in	section 170(b)(1)(A)(vi). (C	omplete Part II.)			Ţ,	
8	Н			170(b)(1)(A)(vi). (Complete Part	,			
9	Ш	_	_	cribed in section 170(b)(1)(A)(i			_	ge
			or a non-land-grant college of	of agriculture (see instructions).	Enter the	name, cr	ty, and state of the college or	
40	₩	university:	4b-4 (b /4'	) the 00 4/00/ it-				
10	X	-	• •	) more than 33 1/3% of its support functions, subject to certain $\epsilon$				SS
		•		nd unrelated business taxable in	•			
			•	0, 1975. See <b>section 509(a)(2).</b>	•	_	,	
11			•	exclusively to test for public safe		_	•	
12	П	•	•	exclusively for the benefit of, to p			,	ses of
	ш	•		ions described in section 509(a				
		the box on lin	nes 12a through 12d that des	scribes the type of supporting or	rganizatio	n and cor	nplete lines 12e, 12f, and 12g.	
	а	Type I. A	supporting organization ope	erated, supervised, or controlled	by its su	pported of	organization(s), typically by givi	ng
		the suppo	orted organization(s) the pow	er to regularly appoint or elect	a majority	of the di	rectors or trustees of the	
		supporting	g organization. You must c	omplete Part IV, Sections A a	nd B.			
	b			pervised or controlled in connec				
				ting organization vested in the s	same pers	ons that	control or manage the support	ed
			•	Part IV, Sections A and C.				***
	С			supporting organization operated structions). <b>You must complete</b>				rith,
	d	Type III	non-functionally integrated	I. A supporting organization ope	erated in o	connection	n with its supported organization	on(s)
				e organization generally must sa	-			ess
				nust complete Part IV, Section				
	е			eived a written determination fro n-functionally integrated support			s a Type I, Type II, Type III	
	f		mber of supported organizati		ung organ	iizatiori.		
	g			ne supported organization(s).				
/:		e of supported	(ii) EIN	(iii) Type of organization	(iv) le the	organization	(v) Amount of monetary	(vi) Amount of
(1		ganization	(11) EIN	(described on lines 1–10	1 ' '	ur governing	support (see	other support (see
				above (see instructions))	docur	ment?	instructions)	instructions)
					Yes	No		
(A)								
(B)								
(C)								
(D)								
(E)								
Tota	I							

Schedule A (Form 990) 2021

2 Page **2** 

1 Giffs, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 4 Total. Add lines 1 through 3 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 6 Public support. Subtract line 5 from line 4  Section B. Total Support Calendar year (or fiscal year beginning in) 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalies, and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 12 13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage	
Calendar year (or fiscal year beginning in)  I Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")  Tax revenues levied for the organization's benefit and either paid to or expended on its behalf  The value of services or facilities furnished by a governmental unit to the organization without charge  Total. Add lines 1 through 3  The value of services or facilities furnished by a governmental unit to the organization without charge  Total. Add lines 1 through 3  The public support. Subtract line 5 from line 4  Section B. Total Support  Calendar year (or fiscal year beginning in)  Amounts from line 4  Gross income from interest, dividends, payments received on securities loans, rents, royalies, and income from similar sources  Net income from unrelated business activities, whether or not the business is regularly carried on  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)  Total support. Add lines 7 through 10  2 Gross receipts from related activities, etc. (see instructions)	
membership fees received. (Do not include any "unusual grants.")  2     Tax revenues levied for the organization's benefit and either paid to or expended on its behalf  3     The value of services or facilities furnished by a governmental unit to the organization without charge  4     Total. Add lines 1 through 3  5     The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)  6     Public support. Subtract line 5 from line 4  Section B. Total Support  Calendar year (or fiscal year beginning in)  Amounts from line 4  8     Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources  9     Net income from unrelated business activities, whether or not the business is regularly carried on  10     Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)  11     Total support. Add lines 7 through 10  12     Gross receipts from related activities, etc. (see instructions)  13     First 5 years, If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here  Section C. Computation of Public Support Percentage	) Total
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The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)  6 Public support. Subtract line 5 from line 4  Section B. Total Support  Calendar year (or fiscal year beginning in)	
each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)  Public support. Subtract line 5 from line 4  Section B. Total Support  Calendar year (or fiscal year beginning in)  (a) 2017  (b) 2018  (c) 2019  (d) 2020  (e) 2021  (f)  Amounts from line 4  Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources  Net income from unrelated business activities, whether or not the business is regularly carried on  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)  Total support. Add lines 7 through 10  Gross receipts from related activities, etc. (see instructions)  12 Gross receipts from related activities, etc. (see instructions)  Section C. Computation of Public Support Percentage	
6 Public support. Subtract line 5 from line 4  Section B. Total Support  Calendar year (or fiscal year beginning in)  Amounts from line 4  8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources  9 Net income from unrelated business activities, whether or not the business is regularly carried on  10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)  11 Total support. Add lines 7 through 10  12 Gross receipts from related activities, etc. (see instructions)  13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here	
Section B. Total Support  Calendar year (or fiscal year beginning in)  Amounts from line 4  Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources  Net income from unrelated business activities, whether or not the business is regularly carried on  Cher income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)  Total support. Add lines 7 through 10  Gross receipts from related activities, etc. (see instructions)  12  Tirst 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here	
Calendar year (or fiscal year beginning in)  (a) 2017  (b) 2018  (c) 2019  (d) 2020  (e) 2021  (f) Amounts from line 4  8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources  9 Net income from unrelated business activities, whether or not the business is regularly carried on  10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)  11 Total support. Add lines 7 through 10  12 Gross receipts from related activities, etc. (see instructions)  13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here  Section C. Computation of Public Support Percentage	
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payments received on securities loans, rents, royalties, and income from similar sources  9 Net income from unrelated business activities, whether or not the business is regularly carried on  10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)  11 Total support. Add lines 7 through 10  12 Gross receipts from related activities, etc. (see instructions)  13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here  Section C. Computation of Public Support Percentage	
activities, whether or not the business is regularly carried on  10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)  11 Total support. Add lines 7 through 10  12 Gross receipts from related activities, etc. (see instructions)  13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here  Section C. Computation of Public Support Percentage	
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12 Gross receipts from related activities, etc. (see instructions)  13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here  Section C. Computation of Public Support Percentage	
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here  Section C. Computation of Public Support Percentage	
organization, check this box and stop here Section C. Computation of Public Support Percentage	
Section C. Computation of Public Support Percentage	,
	<b>&gt;</b>
Public support percentage for 2021 (line 6, column (f) divided by line 11, column (f))	9
Public support percentage from 2020 Schedule A, Part II, line 14	9
16a 33 1/3% support test—2021. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this	. 1
box and <b>stop here.</b> The organization qualifies as a publicly supported organization	▶ [
b 33 1/3% support test—2020. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check	<u>.</u> ſ
this box and <b>stop here.</b> The organization qualifies as a publicly supported organization	🕨 [
17a 10%-facts-and-circumstances test—2021. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization	<b>▶</b> [
b 10%-facts-and-circumstances test—2020. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported	ا
organization  18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see	• [

#### Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support	, ,		, , , , , , , , , , , , , , , , , , ,	•	,	
Caler	ndar year (or fiscal year beginning in)	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	87,837	67,814	94,036	77,078	63,347	390,112
2	Gross receipts from admissions, merchandise	07,037	07,014	34,030	77,070	03,347	330,112
2	sold or services performed, or facilities						
	furnished in any activity that is related to the organization's tax-exempt purpose	6,250	8	8	13,141	9,524	28,931
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	94,087	67,822	94,044	90,219	72,871	419,043
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b			. ~			
8	Public support. (Subtract line 7c from			4			
_	line 6.)						419,043
	tion B. Total Support	T		)			
	ndar year (or fiscal year beginning in)	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9	Amounts from line 6	94,087	67,822	94,044	90,219	72,871	419,043
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources		Č.				
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	Č					
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	<b>Total support.</b> (Add lines 9, 10c, 11, and 12.)	94,087	67,822	94,044	90,219	72,871	419,043
14	First 5 years. If the Form 990 is for the o				•		1137013
	organization, check this box and <b>stop her</b>				• •	• •	▶
Sec	tion C. Computation of Public S						
15	Public support percentage for 2021 (line 8	B, column (f), divide	d by line 13, colun	nn (f))		15	100.00 %
16	Public support percentage from 2020 Sch						100.00 %
Sec	tion D. Computation of Investme						
17	Investment income percentage for 2021 (	line 10c, column (f)	, divided by line 13	3, column (f))		17	%
18	Investment income percentage from 2020		Llino 17			10	%
19a	33 1/3% support tests—2021. If the orga	anization did not che					
	17 is not more than 33 1/3%, check this b		=				<u>X</u>
b	33 1/3% support tests—2020. If the orga						. —
	line 18 is not more than 33 1/3%, check the						
20	Private foundation. If the organization di	d not check a box of	on line 14, 19a, or	19b, check this bo	x and see instructi	ons	

#### Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

#### Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- Build the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in Part VI.*
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

			1
		Yes	No
	1		
	•		
	2		
	3a		
	3b		
	3c		
	4a		
	4b		
	4c		
	40		
	5a		
	5b		
	5c		
	6		
	7		
	8		
	9a		
	9b		
	9с		
	10a		
	10b		
Sche	dule A	(Form 9	990) 2021

Par	t IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c,			
	provide detail in Part VI.	11c		
Secti	on B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Secti	on C. Type II Supporting Organizations			
	. 7		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Secti	on D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have			
	a significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Secti	on E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)			
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instru	(ctions)		
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's			
	involvement, one or more of the organization's supported organization(s) would have been engaged in? If			
	"Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would			
	have engaged in these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
_	trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org		tions	Tage C
1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on No	v. 20, 1	970 (explain in Part VI).	See
instructions. All other Type III non-functionally integrated supporting organizations must	st comp	lete Sections A through E	•
Section A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection			
of gross income or for management, conservation, or maintenance of			
property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B – Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
<b>b</b> Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors			
(explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by 0.035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C – Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, column A)	1		
2 Enter 0.85 of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions).	6		
7 Check here if the current year is the organization's first as a non-functionally integrated	Type III	I supporting organization	-
(see instructions).			

Schedule A (Form 990) 2021

Page 7

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)										
Sect	Section D – Distributions									
1	1 Amounts paid to supported organizations to accomplish exempt purposes									
2	Amounts paid to perform activity that directly furthers exempt purposes	of supported								
	organizations, in excess of income from activity									
3	Administrative expenses paid to accomplish exempt purposes of support	orted organizations								
	Amounts paid to acquire exempt-use assets	alle in Dont I/A								
	Qualified set-aside amounts (prior IRS approval required—provide deta	alis in Pari VI)								
6	Other distributions (describe in Part VI). See instructions.									
7	Total annual distributions. Add lines 1 through 6.	tion is recognition								
8	Distributions to attentive supported organizations to which the organizations (provide details in Part VI). See instructions.	mon is responsive								
9	Distributable amount for 2021 from Section C, line 6									
10	Line 8 amount divided by line 9 amount									
		(i)	(ii)	(iii)						
Sect	ion E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions	Distributable						
			Pre-2021	Amount for 2021						
1	Distributable amount for 2021 from Section C, line 6									
2	Underdistributions, if any, for years prior to 2021									
	(reasonable cause required–explain in Part VI). See instructions.									
3	Excess distributions carryover, if any, to 2021	0								
а	From 2016									
	From 2017	~								
	From 2018	70								
d	From 2019									
	From 2020	0								
f	Total of lines 3a through 3e									
g	Applied to underdistributions of prior years	3								
h	Applied to 2021 distributable amount									
i	Carryover from 2016 not applied (see instructions)									
i	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.									
4	Distributions for 2021 from									
	Section D, line 7:									
	Applied to underdistributions of prior years									
	Applied to 2021 distributable amount									
	Remainder. Subtract lines 4a and 4b from line 4.									
5	Remaining underdistributions for years prior to 2021, if									
	any. Subtract lines 3g and 4a from line 2. For result									
	greater than zero, explain in Part VI. See instructions.									
6	Remaining underdistributions for 2021 Subtract lines 3h									
	and 4b from line 1. For result greater than zero, explain in									
	Part VI. See instructions.									
7	Excess distributions carryover to 2022. Add lines 3j and 4c.									
8	Breakdown of line 7:									
	Excess from 2017									
	Excess from 2018									
	Excess from 2019									
	Excess from 2020									
	Excess from 2021									

Schedule A (Form 990) 2021

Schedule A (Form	n 990) 2021	PALM	HARBOR	HISTORICAL	SOCIETY	INC	59-3246072	Page 8
Part VI	Supplemental III, line 12; Par B, lines 1 and 3a, and 3b; Pa	rt IV, Section A 2; Part IV, Sec art V, line 1; Pa	, lines 1, 2, tion C, line rt V, Sectior	3b, 3c, 4b, 4c, 5a, 1; Part IV, Section	6, 9a, 9b, 9c, D, lines 2 and /, Section D, li	11a, 11b d 3; Part I nes 5, 6,	Part II, line 17a or o, and 11c; Part IV, V, Section E, lines and 8; and Part V, uctions.)	17b; Part Section 1c, 2a, 2b,
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#### **SCHEDULE O** (Form 990)

#### Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

OMB No. 1545-0047 2021

Open to Public

Inspection

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for the latest information.

Name of the organization

Employer identification number

PALM HARBOR HISTOR	ICAL SOCIET	Y INC	59-3246072
FORM 990-EZ, PART I, LINE 8 -	OTHER REVE	NUE	
DESCRIPTION		AMOUNT	
SPONSORSHIP INCOME - EVENTS	\$	7,488	
TICKET REVENUE	\$	940	
FACILITY RENTAL INCOME	\$	500	
VISITOR DONATION REVENUE	\$	277	
ROYALTY INCOME	\$	215	
MISCELLANEOUS INCOME	\$	<b>9</b> 6	
	TOTAL \$	9,516	
		0	
FORM 990-EZ, PART I, LINE 16	- OTHER EXP	PENSES	
DESCRIPTION	68,	AMOUNT	
EXPENSES	Č		
GRANT EXPENSE	\$	11,331	
OFFICE EXPENSES	\$	1,023	
INSURANCE	\$	1,536	
PROMOTIONAL-BOOK INVENTOR	\$	60	
BANK CHARGES	\$	133	
CONTRACT LABOR	\$	3,793	
FOOD & BEVERAGE	\$	178	
MUSEUM DISPLAYS AND COLLE	\$	328	
POSTAGE	\$	148	
EVENT SUPPLIES	\$	1,870	
TAXES & LICENSES	\$	120	
DUES & SUBSCRIPTIONS	\$	160	

Schedule O (Form 990) 2021 Page **2** 

Name of the organization PALM HARBOR HISTORICAL SOCIETY INC			Employer i		
EVENT ENTERTAINERS	\$ 40	00			
NON-INVESTMENT DEPRECIATION	\$ 9,94	13			
INVESTMENT DEPRECIATION	\$ 38,77	75			
TOTAL	\$ 69,79	8			
FORM 990-EZ, PART I, LINE 20 - OTHER	CHANGES IN	NET A	SSETS OR	FUND	BALANCES
DESCRIPTION			AMOUNT		
BOOK / TAX DEPRECIATION DIFFERENCE		\$	9,9	942	
FORM 990-EZ, PART II, LINE 24 - OTHE	R ASSETS	,			
DESCRIPTION		BEG.	OF YEAR	END	OF YEAR
INVENTORIES FOR SALE OR USE	40,	\$	1,042	\$	1,042
PREPAID EXPENSES AND DEFERRED CHARGE	s o	\$	493	\$	518
	27	\$	387,753	\$	387,753
LESS ACCUMULATED DEPRECIATION	)	\$	155,101	\$	193,877
Cilett	TOTAL	\$	234,187	\$	195,436
FORM 990-EZ, PART II, LINE 26 - OTHE	R LIABILITI	ES			
DESCRIPTION		BEG.	OF YEAR	END	OF YEAR
ACCOUNTS PAYABLE AND ACCRUED EXPENSE	S	\$	0	\$	200
DEFERRED REVENUE		\$	232,652	\$	209,576
FORM 990-EZ, PART III, LINE 31 - ALL	OTHER ACCO	MPLISH	MENT		
HISTORICAL PRESERVATON AND EDUCATION	ABOUT THE E	PALM H	ARBOR ARE	EA FO	R ITS
60,000+ RESIDENTS.					
			PAGE	1 OF	1

Form **4562** 

Department of the Treasury Internal Revenue Service (99)

Name(s) shown on return

#### **Depreciation and Amortization**

(Including Information on Listed Property)

► Attach to your tax return.

▶ Go to www.irs.gov/Form4562 for instructions and the latest information.

OMB No. 1545-0172

Attachment Seguence No. 17

Identifying number

PALM HARBOR HISTORICAL SOCIETY INC 59-3246072 Business or activity to which this form relates INDIRECT DEPRECIATION Part I Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I. Maximum amount (see instructions) 1,050,000 Total cost of section 179 property placed in service (see instructions) 2 2 Threshold cost of section 179 property before reduction in limitation (see instructions) 2,620,000 3 3 4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-4 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions 5 (a) Description of property (b) Cost (business use only) Listed property. Enter the amount from line 29 7 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 9 Tentative deduction. Enter the **smaller** of line 5 or line 8 9 Carryover of disallowed deduction from line 13 of your 2020 Form 4562 10 Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions 11 11 12 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11. Carryover of disallowed deduction to 2022. Add lines 9 and 10, less line 12 Note: Don't use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.) 14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions Property subject to section 168(f)(1) election 15 15 Other depreciation (including ACRS) 16 MACRS Depreciation (Don't include listed property. See instructions.) Section A MACRS deductions for assets placed in service in tax years beginning before 2021 9,943 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B-Assets Placed in Service During 2021 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery (a) Classification of property (business/investment use (e) Convention (a) Depreciation deduction only-see instructions) service 19a 3-year property b 5-year property C 7-year property 10-year property 15-year property е 20-year property 25-year property 25 vrs. Residential rental 27.5 yrs. MM S/L property 27.5 yrs. MM S/L MM S/L 39 yrs. Nonresidential real property MM S/L Section C-Assets Placed in Service During 2021 Tax Year Using the Alternative Depreciation System 20a Class life S/L 12-year S/L 12 yrs. 30-year 30 yrs. MM S/L 40-year MM S/L 40 yrs. Part IV Summary (See instructions.) Listed property. Enter amount from line 28 21 21 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter 9,943 here and on the appropriate lines of your return. Partnerships and S corporations—see instructions .... For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs 23

59-3246072

Federal Asset Report

08/01/2022 3:47 PM

FYE: 12/31/2021 Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv Meth	Prior	Current
<u>Prior N</u>	AACRS: LEASEHOLD IMPROVEMENTS	1/01/17 _	387,753 387,753		- -	387,753 387,753	39 MM S/L	39,355 39,355	9,943 9,943
Grand Totals Less: Dispositions and Transfers Less: Start-up/Org Expense Net Grand Totals		387,753 0 0 387,753		-	387,753 0 0 387,753		39,355 0 0 39,355	9,943 0 0 9,943	

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59-3246072 FYE: 12/31/2021 **AMT Asset Report** Form 990, Page 1

08/01/2	2022	3:47	PN

<u>Asset</u>	Description	Date In Service	Cost	Bus Sec % 179Bonus	Basis for Depr	Per Conv Meth	Prior	Current
Prior N	MACRS: LEASEHOLD IMPROVEMENTS	1/01/17 _ =	387,753 387,753		387,753 387,753	39 MM S/L	39,355 39,355	9,943 9,943
	Grand Totals Less: Dispositions and Transfe Net Grand Totals	ers	387,753 0 387,753		387,753 0 387,753		39,355 0 39,355	9,943 0 9,943

Cileria Contraction of the Contr

59-3246072

Depreciation Adjustment Report

08/01/2022 3:47 PM

FYE: 12/31/2021 All Business Activities

<u>Form</u>	<u>Unit</u>	<u>Asset</u>	Description	Tax	AMT	AMT Adjustments/ Preferences
MACRS	S Adju	stments:				
Page 1	1	1	LEASEHOLD IMPROVEMENTS	9,943	9,943	0
				9,943	9,943	0

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59-3246072

FYE: 12/31/22 **Future Depreciation Report** 

Form 990, Page 1 FYE: 12/31/2021

<u>Asset</u>	Description	Date In Service	Cost	Tax	AMT
Prior M	MACRS:				
1	LEASEHOLD IMPROVEMENTS	1/01/17	387,753	9,942	9,942
			387,753	9,942	9,942
	Grand Totals		387,753	9,942	9,942

08/01/2022 3:47 PM

8/1/2022 3:47 PM

59-3246072 Federal Statements

FYE: 12/31/2021

#### Schedule A, Part III, Line 1(e)

Description	_	Amount
MEMBERSHIP DUES	 \$	5,065
PINELLAS COMMUNITY FOUNDATION		10,000
RESTRICTED GRANT		38 <b>,</b> 775
DOS GRANT		2,364
DONATIONS		7,143
IN-KIND REVENUE (NON-GAAP) - LABOR		21 <b>,</b> 485
IN-KIND REVENUE (NON-GAAP) -SUPPLIES		6 <b>,</b> 388
IN-KIND EXPENSES (NON-GAAP) - LABOR		-21 <b>,</b> 485
IN-KIND EXPENSES (NON-GAAP) - SUPPLI		-6 <b>,</b> 388
TOTAL	\$	63,347

#### Schedule A, Part III, Line 2(e)

	Description	Amount
INTEREST EARNED	color	\$ 8
ROYALTY INCOME	, 0	215
SPONSORSHIP INCOME - EVENTS		7,488
TICKET REVENUE	clie,	940
VISITOR DONATION REVENUE	Ov.	277
FACILITY RENTAL INCOME		500
MISCELLANEOUS INCOME		96
FROM CSA IMPORT		
TOTAL		\$ 9,524



# Profit and Loss YTD Comparison December 2022

	To	OTAL
	DEC 2022	JAN - DEC 2022 (YTD)
Income		
6100 Membership Dues	538.10	6,260.95
6200 Donations	2,901.00	15,710.09
6250 Sales of Donated Items		1,140.60
6300 Grants		
6300.10 MSTU Grant 2022		20,000.00
6300.12 ARP Grant		5,000.00
6300.2 Pinellas Community Foundation		10,700.00
6300.4 Restricted Grant 15-9910 FL	3,231.28	38,775.36
Total 6300 Grants	3,231.28	74,475.36
6400 Sponsorship Income - Events		190.00
6500 Ticket Revenue		6,597.34
6650 Facility Rental Income	250.00	650.00
6810 Royalty Income		92.67
Total Income	\$6,920.38	\$105,117.01
GROSS PROFIT	\$6,920.38	\$105,117.01
Expenses		
7005 Promotional-Book inventory		131.94
7010 Bank Charges	8.54	114.46
7020 Contract Labor		
7020.3 MM@TM		500.00
7020.4 Administrative Assistant	2,000.00	8,000.00
Total 7020 Contract Labor	2,000.00	8,500.00
7040 Dues & Subscriptions	80.99	437.76
7045 Grant Expenses	1,000.00	6,140.00
7045.01 Grant Expenses - MSTU 2022		17,954.34
Total 7045 Grant Expenses	1,000.00	24,094.34
7050 Insurance		
7050.2 Insurance - Liability	121.67	1,460.04
7050.3 Fire Truck insurance	9.06	105.80
Total 7050 Insurance	130.73	1,565.84
		523.00



# Profit and Loss YTD Comparison December 2022

	Т	OTAL
	DEC 2022	JAN - DEC 2022 (YTD)
7080 Legal & Professional Fees		350.00
7092 Membership Expenses		325.00
7100 Museum Displays and Collections		(618.84)
7110 Museum improvement		1,585.00
7111 Event Entertainers		200.00
7120 Office-Operating Expense	165.96	243.44
7130 Office Expenses		187.92
7140 Postage		92.80
7145 Professional Fees		1,470.00
7160 Repair & Maintenance		258.31
7160.1 Building Maintenance		399.89
7160.2 Grounds Maintenance	250.00	5,984.89
7160.5 Waste Services	47.00	537.50
Total 7160 Repair & Maintenance	297.00	7,180.59
7170 Security		720.00
7200 Event Supplies	55.58	926.67
7220 Telephone and Internet	85.98	3,031.76
7240 Utilities		
7240.1 Electricity	269.08	3,993.32
7240.2 Water & Sewer	62.14	428.35
Total 7240 Utilities	331.22	4,421.67
Total Expenses	\$4,536.61	\$55,483.35
NET OPERATING INCOME	\$2,383.77	\$49,633.66
Other Income		
9000 In-Kind Revenue (Non-GAAP)		
9000.1 In-Kind Revenue - Labor (NG)	2,026.38	25,882.18
9000.2 In-Kind Revenue - Supplies (NG)	2,044.10	9,278.84
Total 9000 In-Kind Revenue (Non-GAAP)	4,070.48	35,161.02
9050 Interest Earned	3.33	15.41
Total Other Income	\$4,073.81	\$35,176.43
Other Expenses		
9100 In-Kind Expenses (Non-GAAP)		
9100.1 In-Kind Expense - Labor (NG)	2,026.38	25,882.18
9100.2 In-Kind Expense - Supplies (NG)	2,044.10	9,278.84
Total 9100 In-Kind Expenses (Non-GAAP)	4,070.48	35,161.02



# Profit and Loss YTD Comparison December 2022

	TC	DTAL
	DEC 2022	JAN - DEC 2022 (YTD)
9200 Depreciation Expense		
9200.1 Depreciation - Leasehold Improv		
9200.1a Depreciation FL Const Grant	3,231.28	38,775.36
Total 9200.1 Depreciation - Leasehold Improv	3,231.28	38,775.36
Total 9200 Depreciation Expense	3,231.28	38,775.36
Total Other Expenses	\$7,301.76	\$73,936.38
NET OTHER INCOME	\$ (3,227.95)	\$ (38,759.95)
NET INCOME	\$ (844.18)	\$10,873.71

#### Note

These financial statements have not been subjected to an audit or review or compilation engagement, and no assurance is provided on them. Substantially all disclosures ordinarily included with financial statements prepared in accordance with the tax basis of accounting are not included.



# Balance Sheet As of December 31, 2022

	TOTAL
ASSETS	
Current Assets	
Bank Accounts	
1015 SouthState Checking x3838	18,742.75
1025 PayPal PHHS	48.51
1035 SouthState - Savings x8955	34,049.39
Total Bank Accounts	\$52,840.65
Other Current Assets	
1305 Inventory Asset	1,042.22
1310 Prepaid Expenses	564.61
1310.1 Prepaid - Gift Cards	127.52
Total 1310 Prepaid Expenses	692.13
Total Other Current Assets	\$1,734.35
Total Current Assets	\$54,575.00
Fixed Assets	
1590 Leasehold Improvements	387,753.00
1630 A/D - Leasehold Improvements	(232,652.16)
Total Fixed Assets	\$155,100.84
TOTAL ASSETS	\$209,675.84
LIABILITIES AND EQUITY	
Liabilities	
Current Liabilities	
Accounts Payable	
3000 Accounts Payable (A/P)	200.00
Total Accounts Payable	\$200.00
Other Current Liabilities	
3201 Deferred Revenue	10,000.00
Total Other Current Liabilities	\$10,000.00
Total Current Liabilities	\$10,200.00
Long-Term Liabilities	
3201.1 Deferred Rev - Restricted Grant	155,100.84
Total Long-Term Liabilities	\$155,100.84
Total Liabilities	\$165,300.84



Balance Sheet
As of December 31, 2022

	TOTAL
Equity	
3150 Temp Restricted Net Assets	2,445.43
32000 Retained Earnings	31,055.86
Net Income	10,873.71
Total Equity	\$44,375.00
TOTAL LIABILITIES AND EQUITY	\$209,675.84

#### Note

These financial statements have not been subjected to an audit or review or compilation engagement, and no assurance is provided on them. Substantially all disclosures ordinarily included with financials statements prepared in accordance with the tax basis of accounting are not included.



Budget vs. Actuals: FY\_2022 - FY22 P&L
January - December 2022

		TOTAL		
	ACTUAL	BUDGET	OVER BUDGET	% OF BUDGET
Income				
6100 Membership Dues	6,260.95	7,000.00	(739.05)	89.44 %
6200 Donations	15,710.09	4,000.00	11,710.09	392.75 %
6250 Sales of Donated Items	1,140.60	800.00	340.60	142.58 %
6300 Grants				
6300.10 MSTU Grant 2022	20,000.00	20,000.00	0.00	100.00 %
6300.12 ARP Grant	5,000.00	5,000.00	0.00	100.00 %
6300.14 2022 Faith Mission		10,700.00	(10,700.00)	
6300.2 Pinellas Community Foundation	10,700.00		10,700.00	
6300.4 Restricted Grant 15-9910 FL	38,775.36		38,775.36	
Total 6300 Grants	74,475.36	35,700.00	38,775.36	208.61 %
6400 Sponsorship Income - Events	190.00	7,000.00	(6,810.00)	2.71 %
6500 Ticket Revenue	6,597.34	1,000.00	5,597.34	659.73 %
6525 Visitor Donation Revenue		500.00	(500.00)	
6650 Facility Rental Income	650.00	1,000.00	(350.00)	65.00 %
6810 Royalty Income	92.67	100.00	(7.33)	92.67 %
Total Income	\$105,117.01	\$57,100.00	\$48,017.01	184.09 %
GROSS PROFIT	\$105,117.01	\$57,100.00	\$48,017.01	184.09 %
Expenses				
7005 Promotional-Book inventory	131.94	100.00	31.94	131.94 %
7010 Bank Charges	114.46	150.00	(35.54)	76.31 %
7020 Contract Labor				
7020.1 Curator Services		10,000.00	(10,000.00)	
7020.2 Exhibit Assistance	0.00	6,000.00	(6,000.00)	0.00 %
7020.3 MM@TM	500.00		500.00	
7020.4 Administrative Assistant	8,000.00		8,000.00	
Total 7020 Contract Labor	8,500.00	16,000.00	(7,500.00)	53.13 %
7040 Dues & Subscriptions	437.76	200.00	237.76	218.88 %
7045 Grant Expenses	6,140.00	1,000.00	5,140.00	614.00 %
7045.01 Grant Expenses - MSTU 2022	17,954.34	20,000.00	(2,045.66)	89.77 %
Total 7045 Grant Expenses	24,094.34	21,000.00	3,094.34	114.73 %
7050 Insurance				
7050.2 Insurance - Liability	1,460.04	1,620.00	(159.96)	90.13 %
7050.3 Fire Truck insurance	105.80	500.00	(394.20)	21.16 %
Total 7050 Insurance	1,565.84	2,120.00	(554.16)	73.86 %
7055 Food & Beverage - Events	523.00	100.00	423.00	523.00 %
7080 Legal & Professional Fees	350.00		350.00	
7092 Membership Expenses	325.00		325.00	
7100 Museum Displays and Collections	(618.84)		(618.84)	



Budget vs. Actuals: FY\_2022 - FY22 P&L
January - December 2022

		TO	TAL	
	ACTUAL	BUDGET	OVER BUDGET	% OF BUDGET
7110 Museum improvement	1,585.00		1,585.00	
7111 Event Entertainers	200.00		200.00	
7120 Office-Operating Expense	243.44	1,500.00	(1,256.56)	16.23 %
7130 Office Expenses	187.92	750.00	(562.08)	25.06 %
7140 Postage	92.80	250.00	(157.20)	37.12 %
7145 Professional Fees	1,470.00	2,300.00	(830.00)	63.91 %
7160 Repair & Maintenance	258.31	500.00	(241.69)	51.66 %
7160.1 Building Maintenance	399.89	500.00	(100.11)	79.98 %
7160.2 Grounds Maintenance	5,984.89	2,000.00	3,984.89	299.24 %
7160.5 Waste Services	537.50	100.00	437.50	537.50 %
Total 7160 Repair & Maintenance	7,180.59	3,100.00	4,080.59	231.63 %
7170 Security	720.00	1,100.00	(380.00)	65.45 %
7180 Shipping and delivery expense		100.00	(100.00)	
7190 Stationery & Printing		800.00	(800.00)	
7200 Event Supplies	926.67	1,500.00	(573.33)	61.78 %
7210 Taxes & Licenses		150.00	(150.00)	
7220 Telephone and Internet	3,031.76	1,100.00	1,931.76	275.61 %
7240 Utilities				
7240.1 Electricity	3,993.32	3,500.00	493.32	114.09 %
7240.2 Water & Sewer	428.35	250.00	178.35	171.34 %
Total 7240 Utilities	4,421.67	3,750.00	671.67	117.91 %
7260 Decorations - Events		200.00	(200.00)	
Total Expenses	\$55,483.35	\$56,270.00	\$ (786.65)	98.60 %
NET OPERATING INCOME	\$49,633.66	\$830.00	\$48,803.66	5,979.96 %
Other Income				
9000 In-Kind Revenue (Non-GAAP)				
9000.1 In-Kind Revenue - Labor (NG)	25,882.18	20,000.00	5,882.18	129.41 %
9000.2 In-Kind Revenue - Supplies (NG)	9,278.84	4,000.00	5,278.84	231.97 %
Total 9000 In-Kind Revenue (Non-GAAP)	35,161.02	24,000.00	11,161.02	146.50 %
9050 Interest Earned	15.41		15.41	
Total Other Income	\$35,176.43	\$24,000.00	\$11,176.43	146.57 %
Other Expenses				
9100 In-Kind Expenses (Non-GAAP)				
9100.1 In-Kind Expense - Labor (NG)	25,882.18	20,000.00	5,882.18	129.41 %
9100.2 In-Kind Expense - Supplies (NG)	9,278.84	4,000.00	5,278.84	231.97 %
Total 9100 In-Kind Expenses (Non-GAAP)	35,161.02	24,000.00	11,161.02	146.50 %
9200 Depreciation Expense				
9200.1 Depreciation - Leasehold Improv				
9200.1a Depreciation FL Const Grant	38,775.36	38,775.36	0.00	100.00 %
	55,775.00		0.00	. 30103 /



Budget vs. Actuals: FY\_2022 - FY22 P&L January - December 2022

		ТО	TAL	
	ACTUAL	BUDGET	OVER BUDGET	% OF BUDGET
Total 9200.1 Depreciation - Leasehold Improv	38,775.36	38,775.36	0.00	100.00 %
Total 9200 Depreciation Expense	38,775.36	38,775.36	0.00	100.00 %
Total Other Expenses	\$73,936.38	\$62,775.36	\$11,161.02	117.78 %
NET OTHER INCOME	\$ (38,759.95)	\$ (38,775.36)	\$15.41	99.96 %
NET INCOME	\$10,873.71	\$ (37,945.36)	\$48,819.07	(28.66 %)

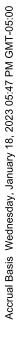
#### Note

These financial statements have not been subjected to an audit or review or compilation engagement, and no assurance is provided on them. Substantially all disclosures ordinarily included with financial statements prepared in accordance with the tax basis of accounting are not included.

Profit and Loss

January - December 2022

	EVENTS	BLUEGRASS FESTIVAL	ENGLISH TEA	MEET ME AT THE MUSEUM	WINE AROUND	TOTAL EVENTS	TOTAL
Income							
6200 Donations			3,295.04	387.90	3,665.00	7,347.94	\$7,347.94
6400 Sponsorship Income - Events		190.00				190.00	\$190.00
6500 Ticket Revenue			2,488.04			2,488.04	\$2,488.04
Total Income	\$0.00	\$190.00	\$5,783.08	\$387.90	\$3,665.00	\$10,025.98	\$10,025.98
GROSS PROFIT	\$0.00	\$190.00	\$5,783.08	\$387.90	\$3,665.00	\$10,025.98	\$10,025.98
Expenses							
7010 Bank Charges			11.39			11.39	\$11.39
7020 Contract Labor							\$0.00
7020.2 Exhibit Assistance				0.00		00.00	\$0.00
7020.3 MM@TM				500.00		200.00	\$500.00
Total 7020 Contract Labor				200.00		200.00	\$500.00
7111 Event Entertainers				200.00		200.00	\$200.00
7200 Event Supplies			409.85	59.40		469.25	\$469.25
Total Expenses	\$0.00	\$0.00	\$421.24	\$759.40	\$0.00	\$1,180.64	\$1,180.64
NET OPERATING INCOME	\$0.00	\$190.00	\$5,361.84	\$ (371.50)	\$3,665.00	\$8,845.34	\$8,845.34
NET INCOME	\$0.00	\$190.00	\$5,361.84	\$ (371.50)	\$3,665.00	\$8,845.34	\$8,845.34





# Profit and Loss January - December 2022

	FL HUM ARP	GRANT - FAITH MISSION 2022	MSTU 2022 GRANT	TOTAL
Income				
6300 Grants				\$0.00
6300.10 MSTU Grant 2022			20,000.00	\$20,000.00
6300.12 ARP Grant	5,000.00			\$5,000.00
6300.2 Pinellas Community Foundation		10,700.00		\$10,700.00
Total 6300 Grants	5,000.00	10,700.00	20,000.00	\$35,700.00
Total Income	\$5,000.00	\$10,700.00	\$20,000.00	\$35,700.00
GROSS PROFIT	\$5,000.00	\$10,700.00	\$20,000.00	\$35,700.00
Expenses				
7020 Contract Labor				\$0.00
7020.2 Exhibit Assistance	1,200.00			\$1,200.00
7020.4 Administrative Assistant	2,000.00			\$2,000.00
Total 7020 Contract Labor	3,200.00			\$3,200.00
7040 Dues & Subscriptions	224.81			\$224.81
7045 Grant Expenses		6,140.00		\$6,140.00
7045.01 Grant Expenses - MSTU 2022		802.55	17,145.37	\$17,947.92
Total 7045 Grant Expenses		6,942.55	17,145.37	\$24,087.92
7100 Museum Displays and Collections		(618.84)		\$ (618.84)
7160 Repair & Maintenance				\$0.00
7160.2 Grounds Maintenance			2,546.79	\$2,546.79
7160.5 Waste Services	305.50			\$305.50
Total 7160 Repair & Maintenance	305.50		2,546.79	\$2,852.29
7240 Utilities				\$0.00
7240.1 Electricity	402.78			\$402.78
Total 7240 Utilities	402.78			\$402.78
Total Expenses	\$4,133.09	\$6,323.71	\$19,692.16	\$30,148.96
NET OPERATING INCOME	\$866.91	\$4,376.29	\$307.84	\$5,551.04
NET INCOME	\$866.91	\$4,376.29	\$307.84	\$5,551.04

Client#: 717598 PALMHARBO4

#### $oldsymbol{ACORD}_{\!\scriptscriptstyle{ iny M}}$

#### CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 7/27/2023

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer any rights to the certificate holder in lieu of such endorsement(s).

, ,		
PRODUCER	CONTACT NAME:	
Marsh & McLennan Agency	PHONE (A/C, No, Ext): 727 447-6481 FAX (A/C, No):	
Bouchard Region	E-MAIL ADDRESS: clcerts@marshmma.com	
101 N. Starcrest Drive Clearwater, FL 33765	INSURER(S) AFFORDING COVERAGE	NAIC #
	INSURER A: Alliance of Nonprofits for Ins	10023
Palm Harbor Historical Society	INSURER B:	
	INSURER C:	
2043 Curlew Road	INSURER D:	
Palm Harbor, FL 34683	INSURER E:	
	INSURER F:	

COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE		ADDL INSR	SUBR WVD	POLICY NUMBER POLICY EFF POLICY EXP (MM/DD/YYYY) (MM/DD/YYYY) LIMITS		s			
Α	X	COMMERCIAL GENERAL LIABILITY	Υ	Υ	202347133	03/28/2023	03/28/2024	EACH OCCURRENCE	\$1,000,000	
		CLAIMS-MADE OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$500,000	
								MED EXP (Any one person)	\$20,000	
								PERSONAL & ADV INJURY	\$1,000,000	
	GEI	N'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	\$2,000,000	
		POLICY PRO- LOC						PRODUCTS - COMP/OP AGG	\$2,000,000	
		OTHER:							\$	
	ΑU	TOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	\$	
		ANY AUTO						BODILY INJURY (Per person)	\$	
		OWNED SCHEDULED AUTOS						BODILY INJURY (Per accident)	\$	
		HIRED NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	\$	
									\$	
		UMBRELLA LIAB OCCUR						EACH OCCURRENCE	\$	
		EXCESS LIAB CLAIMS-MADE						AGGREGATE	\$	
		DED RETENTION \$							\$	
		RKERS COMPENSATION DEMPLOYERS' LIABILITY						PER OTH- STATUTE ER		
	ANY	PROPRIETOR/PARTNER/EXECUTIVE ICER/MEMBER EXCLUDED?	N/A					E.L. EACH ACCIDENT	\$	
	(Ma	ndatory in NH)	117.4					E.L. DISEASE - EA EMPLOYEE	\$	
	If ye	s, describe under CRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	\$	
Α	A Liquor Liab				202347133	03/28/2023	03/28/2024	1,000,000/\$1,000,000	0	
Α	D8	O Liability			2023147133DO	03/28/2023	03/28/2024	1,000,000/\$1,000,000		

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Certificate holder is included as Additional Insured when required by written contract, agreement or permit, but only with respect to the General Liability insurance and subject to the provisions and limitations of the policy.

Waiver of subrogation applies to General Liability when required by written contract, agreement or permit (See Attached Descriptions)

IFICATE	HOLDER	
	IFICATE	IFICATE HOLDER

Pinellas County, a political subdivision of State of Florida 400 South Fort Harrison Avenue Clearwater, FL 33756

#### CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

**AUTHORIZED REPRESENTATIVE** 

Late Layer

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DESCRIPTIONS (Continued from Page 1)
and subject to the provisions and limitations of the policy.
All of the above are subject to the terms, conditions and exclusions of the policy/policies.