



## City of Fort Pierce

100 North US Hwy 1  
Fort Pierce FL 34950

Phone ■ 772.465.4170

Email ■ [citymanager\\_dl@cityoffortpierce.com](mailto:citymanager_dl@cityoffortpierce.com)

# Sponsorship/Donation Request Application

The City of Fort Pierce proudly supports our community and the organizations that improve it. Filling out this form will help us better understand your request, how well you meet the criteria and determine how best we can assist your organization.

Date:

### ORGANIZATION INFORMATION

**Organization Name**

The Zora Neale Hurston Florida Education Foundation (ZNHFEF)

**Street Address**

809 N 9th Street

**City**

Fort Pierce

**State**

FL

**Zip**

34950

**Website Address**

[www.zorafoundationmuseum.com](http://www.zorafoundationmuseum.com)

**Phone Number**

**Tax ID #**

27-3394116

**Year Organization was Founded**

2009

**Organization Description**

The ZNHFEF is a 501(3)(c) non-profit organization that serves as a community center and museum.

**Organization's Mission Statement (Please provide your organization's mission statement in 100 words or less)**

The ZNHFEF's mission is to promote and preserve the (LOCAL) legacy of the world renowned author and anthropologist Zora Neale Hurston. In addition, the museum will host annual programming that will cater to multiple cultures through our festivals, community literacy projects, youth summer programs and other events.

### AUTHORIZED REPRESENTATIVE INFORMATION

**Authorized Representative's Name**

Marina Santos

**Representative's Email Address**

[contactus@zorafoundationmuseum.com](mailto:contactus@zorafoundationmuseum.com)

**Representative's Phone Number**

(772) 332-7793

### ABOUT YOUR EVENT

**Official name of the event**

The Zora Experience Festival 2025

**Date(s) of event**

April 5th, 2025

**Time(s) and duration of event**

9am - 4pm

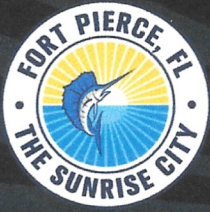
**Physical location of the event**

809 N 9th Street

Is this a request for an event in the city limits of Fort Pierce or on city-owned property?

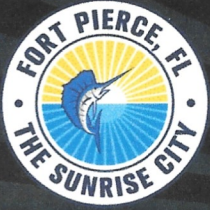
Yes

No



# Sponsorship/Donation Request Application

Total expected attendance 1000 - 3000	Total event budget (Proposed budget must be submitted with this form) \$38,000
Event Summary: (Briefly describe the event for which you are seeking funds) The Zora Experience Festival 2025 is a cultural outdoor social event that brings people together to celebrate the life and work of the world renowned anthropologist and folklorist Zora Neale Hurston. We will celebrate and display different forms of artistic expressions through music food and other performances.	
How long has this event been in existence? (Please enter either NEW OR the number of years running if established) 20 years over all	
<b>ABOUT YOUR SPONSORSHIP REQUEST</b>	
What are you requesting? Check all that apply. <input checked="" type="checkbox"/> Money <input type="checkbox"/> In-kind services <input type="checkbox"/> Other	
Monetary amount requested \$ 15,000	
In-kind services requested Any assistance with the following services would be greatly appreciated:  Stage Portable toilets Trolley Permit Security	
Has any department of the City of Fort Pierce provided assistance for this event? If yes, please list department and description of assistance. No, we have not received any assistance yet; however we have received monetary funds and commissioner support from the City of Fort Pierce for last years festival.	
Are other organizations involved in this event? If yes, please list: Not at this time but we are seeking support from other organizations such as:  The Zetas of Fort Pierce and Vero Beach Jalil Court Natalie's Juice Company McDonalds Children's Service Council of St. Lucie County	



# Sponsorship/Donation Request Application

## SUPPORTING DOCUMENTATION

Please provide the following supporting documentation:

- 1) Detailed description or flyer
- 2) Form W-9 Request for Taxpayer Identification Number or Certification
- 3) Proposed budget

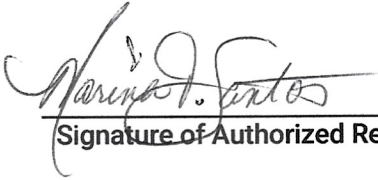
A sponsorship application is not complete unless it includes all of the documents listed above. Incomplete applications will be not considered.

## SUBMIT APPLICATION TO

Mail completed application to: City Manager's Office, 100 North US Hwy 1, Fort Pierce, FL 34950.

You can also send the completed application by email to: [citymanager\\_dl@cityoffortpiece.com](mailto:citymanager_dl@cityoffortpiece.com).

Please call 772-465-4170 if you have any questions.



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Signature of Authorized Representative

12/2/2024  
Date

# SAVE THE DATE



**“THE ZORA EXPERIENCE FESTIVAL 2025”**

**SATURDAY APRIL 5, 2025**

***809 N. 9th Street in Fort Pierce***

***9 am – 3 pm***

**FOOD TRUCKS - VENDORS - KIDS ZONE  
MUSIC - HURSTON HISTORY - & MORE.....**

**Secure your Vendor & Sponsor partnerships  
[contactus@zorafoundationmuseum.com](mailto:contactus@zorafoundationmuseum.com)**



Form **W-9**  
 (Rev. October 2018)  
 Department of the Treasury  
 Internal Revenue Service

# Request for Taxpayer Identification Number and Certification

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

▶ Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

<b>Print or type.</b> See Specific Instructions on page 3.	<b>1</b> Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. <p style="text-align: center;">Zora Neale Hurston Florida Education Foundation</p>	
	<b>2</b> Business name/disregarded entity name, if different from above <p style="text-align: center;">Zora Neale Hurston Florida Education Foundation</p>	
	<b>3</b> Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only <b>one</b> of the following seven boxes.  <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate  <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____ <b>Note:</b> Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is <b>not</b> disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.  <input checked="" type="checkbox"/> Other (see instructions) ▶ _____	
	<b>4</b> Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):  Exempt payee code (if any) _____  Exemption from FATCA reporting code (if any) _____  <i>(Applies to accounts maintained outside the U.S.)</i>	
	<b>5</b> Address (number, street, and apt. or suite no.) See instructions. <p style="text-align: center;">809 N 9th Street</p>	
	<b>6</b> City, state, and ZIP code <p style="text-align: center;">Fort Pierce, FL 34950</p>	
	<b>7</b> List account number(s) here (optional)	

<b>Requester's name and address (optional)</b> <p style="text-align: center;">City of Fort Pierce 100 N. US HWY 1 Fort Pierce, FL 34950</p>
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## Part I Taxpayer Identification Number (TIN)

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

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

<b>Social security number</b>									
<b>or</b>									
<b>Employer identification number</b>									

## Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

<b>Sign Here</b>	<b>Signature of U.S. person ▶</b>	<i>DocuSigned by:</i> <i>Marina Santos</i>	<b>Date ▶</b>	2/8/2024
	AD70CF46C6C04CB...			

## General Instructions

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

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

## Purpose of Form

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

- Form 1099-INT (interest earned or paid)

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

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

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