***2025 Celebrate Clay Application***

##### Honoring 2024 Community Service Leaders for Clay County

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| **Section I: Background Information** |
| Organization Name: |  |
| Mailing Address: |  |
| Physical Address: |  |
| Phone Number\*: |  |
| Website\*: |  |
| Contact’s Name and Position: |  |
| Contact’s Email: |  |
| Year Organization Established: |  |
| Number of Paid Staff: |  |
| Number of Volunteers/Members: |  |
| Project Category (select one below): |  |
| Arts & Culture; Civic Community Service; Community Programs; Education & Literacy; Environment & Animal Welfare; Health & Human Services; Accomplishments by or for Senior Citizens; Church Outreach Programs; Accomplishments by Youth; Services to Youth & Families. (Please Note: Project categories are subject to change at the discretion of the Foundation.) |

**Please state below the mission of your organization. (What does your organization do? Why do you exist? Who do you serve?) Please confine your answer to the space below**.

**Section II: Financial Information**

Statement of Income and Expenditures

Please use 2024 figures (fiscal or calendar year) and complete all blanks that apply to your entire organization.

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| --- | --- |
| Income |  |
|  Contributions, grants, umbrella organizations |  |
|  Noncash items received for distribution (food, etc. not for resale) |  |
|  Income from fundraising events/activities |  |
|  Investment income |  |
|  Client fees &/or membership dues |  |
|  Other (please explain) |  |
| **TOTAL INCOME**  |  |
| Expenditures |  |
|  Program service expenses  |  |
|  Noncash items distributed (food, etc. not for resale)  |  |
|  Management and general expenses |  |
|  Fundraising expenses |  |
|  Funds given to state or national affiliates |  |
|  Other (please explain) |  |
| **TOTAL EXPENDITURES\***  |  |

\*If your total expenditures exceed your total income, please briefly explain:

POPULATION SERVED

|  |  |
| --- | --- |
| What percentage of your overall budget went to support residents of Clay County?  | % |
| What percentage of your volunteers were residents of Clay County? | % |
| SIGNATURES |
| "We hereby certify that the information contained in this application is true to the best of our knowledge and belief."  |
| Signature of person preparing application:  | Date:  |
| Signature of CEO, President, or Chairman: | Date: |
| Application Endorsed by Board: \_\_\_\_\_  |

**Section III: 2024 Community Service Project Narrative**

What is the approximate # of Clay residents affected by your project(s) in 2024?

What is the approximate # of Clay volunteers involved in your project(s) in 2024?

Tell us your story below: Please provide an overview of your organization’s 2024 efforts and an in-depth description of the most significant 2024 project(s) – the intent, challenges met, impact to community, who was involved, significance to Clay citizens.Please confine the narrative to 1-2 pages.

 ***Optional: You may wish to submit Section IV and/or Section V or omit entirely.***

**Section IV: Volunteer of the Year Award** (only one volunteer can be submitted from your organization)

For extraordinary service far beyond the scope of anticipated volunteer service: Why should this volunteer be recognized? What value did he/she bring to your program? Please submit a summary with highlights of his/her extraordinary service in 2024. The summary should be 1 to 2 pages. (If possible, please also submit a photo of the volunteer in action.)

***AND/OR***

**Section V: Executive Director Award**

For extraordinary service, far beyond the Executive Director’s stated job description, that dramatically improved the health and progress of the sponsoring organization. Please help judges appreciate his/her efforts. Please submit a summary with highlights of his/her extraordinary service in 2024. The summary should be 1 to 2 pages. (If possible, please also submit a photo of the Executive Director in action).

 ***Applications must be received by Friday, January 31, 2025***

 **Please review all information below before submitting your application:**

* Celebrate Clay awards are project oriented, designed to recognize specific community service active in Clay County in 2024, as opposed to untried programs anticipated in the future.
* **Eligibility – You must be a 501(c) 3 organization** that provided services in Clay County in 2024.
* A panel of judges decides all awards. They are concerned with the effort and the effectiveness of the specific program(s) submitted for recognition, not the entire scope of the organization or its place of domicile.
* Judges will read and review only the material included in the application. No additional data will be considered.
* Please visit[**www.reinhold.net**](http://www.reinhold.net)and update your organization’s information in the Clay County Directory of Services.
* Awards will be announced at the Awards Breakfast, Tuesday, April 22, 2025. Regrettably, due to limited space, only two representatives per organization, plus outstanding volunteer nominees can be included at the breakfast.
* **Please include 2 to 3 photos with your application or via email (in jpg format) to** **aparker@reinhold.net****. Photos should highlight your organization and volunteers helping the community (event photos, group photos, or photos of staff and volunteers “in action”).**
* In the box below, please provide a brief summary description of your 2024 program(s) for the awards breakfast booklet. Please submit your description in the box below in 250 characters or less (not words but characters). This may be used in whole or part in the awards breakfast program booklet at the discretion of the Foundation.

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Please email\* or mail one unstapled copy of the application and photos to:

Amy Parker, Executive Director

The Paul E. & Klare N. Reinhold Foundation, Inc.

1845 Town Center Blvd, Suite 105,

 Fleming Island, FL 32003

 Phone: 904-269-5857 ext. 404

 aparker@reinhold.net

\*If you submit your application by email, please call Amy to confirm receipt.

All applications submitted become the property of The Paul E. & Klare N. Reinhold Foundation, Inc. Applications are reviewed by the Judges and Foundation Trustees whose decisions are final. All data is subject to verification.

**Application Checklist**

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|  | 1. Have you submitted 2 to 3 photos of your organization in action?
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|  | 1. Have you carefully completed Section II, the Financial Information?
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|  | 1. Have you described all aspects of the community service project for which this application is being submitted (Section III of the application)?
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|  | 1. Optional: Are you submitting Section IV, a nominee for a volunteer award?
 |
|  | 1. Optional: Are you submitting Section V, a nominee for the executive director award?
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|  | 1. Have all parties signed the application as requested?
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|  | 1. Have you submitted documented evidence of your 501 (c) 3 non-profit status?
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|  | For proof of your 501(c)(3) status:**If you are an operating charity:** Attach a copy of your letter from the Internal Revenue Service notifying you of your tax-exempt status as a public charity as defined in section 501(c)(3) of the Internal Revenue Code (IRC) and that your organization is not a private foundation” under Section 509(a)(1) or Section 509(a)(2) of the IRC. This is the letter you would have received when you first organized so it may be dated years ago. This letter is NOT from the State of Florida authorizing your sales tax exemption as a nonprofit organization.**If you are a church:** Churches that meet the requirements of IRC section 501(c)(3) are automatically considered tax exempt and are not required to apply for and obtain recognition of tax-exempt status from the IRS. Although there is no requirement to do so, many churches seek recognition of tax-exempt status from the IRS because such recognition assures church leaders, members, and contributors that the church is recognized as exempt and qualifies for related benefits. Most major denominations have group exemptions for their member churches. Therefore, if your church has a tax exempt letter, please provide us a copy as outlined above for operating charities. If your church has not filed for tax exempt status, please provide a letter from the Chairman of your Finance Committee (or other similar position) stating that your church is a public charity organized and operated exclusively for religious, charitable, or other exempt purposes as described in IRC Section 501(c)(3).**If you are a governmental agency:** Most government agencies (schools, fire departments, police departments, public libraries, etc.) do not have an IRS exemption letter. Please provide a letter from your highest official (principals for schools, Fire Chief for fire department, etc.) stating that your group is a recognized part of the governmental agency making the request and that any funds awarded will be specifically earmarked for charitable purposes (not all governmental purposes are charitable purposes). |