

# TOURISM PROMOTION PROGRAM • APPLICATION FOR FUNDING

**APPLICANT INFORMATION**
**TYPE OF PROPOSAL**
**SUBMISSION REQUIREMENTS**

Project Title: PUGET SOUND NAVY MUSEUM FOUNDATION MARKETING  
 Project Dates: Beginning: 1 JAN 2021 Ending: 31 DEC 2021  
 Name of Organization: PUGET SOUND NAVY MUSEUM FOUNDATION Web Site: PUGET SOUND NAVY MUSEUM.ORG  
 Mailing Address: 251 FIRST ST, BREMER TON WA 98337  
 Contact Person: GERALD EGAN E-Mail: GERALD.EGAN@PUGET-SOUND-NAVY-MUSEUM.ORG Phone: 360.871.6040  
 Amount Requested: \$ 4950 Total Project Cost: \$ 11,929  
 Portion of Total Project Cost Requested: 41 (%)  
 Signature of Authorized Representative: Gerald Egan

 **Tourism Infrastructure:**

Support tourism-related facilities, which is defined as real or tangible personal property with a usable life of three or more years or constructed with volunteer labor and used to support tourism, performing arts, or to accommodate tourist activities.

 **Tourism Marketing Activities:**

Activities and expenditures designed to increase tourism, including but not limited to advertising, publicizing or otherwise distributing information for the purpose of attracting and welcoming tourists; developing strategies to expand tourism; operating tourism promotion agencies; and funding marketing of special events and festivals designed to attract tourists (*not a current funding priority*).

**APPLICANTS MUST SUBMIT THE FOLLOWING:**

1. A one-page budget including all income and expenses for the entire project (including matching funds and in-kind contributions) and clearly showing expenses for which County lodging tax dollars will be used.
2. Documentation of non-profit status.
3. Your organization's **most recent tax return** or most recent annual financial statement created by an independent source should a tax return not be available. Other documentation showing financial viability may be considered if agency is newly created and the documentation is prepared by an independent source.
4. A two-page document including a description of the proposed project with an explanation of how it will assist in building tourism and/or promoting events or activities that will bring tourists to Kitsap County. Include marketing plans and examples of performance indicators and well as plans for future sustainability. For more information see the included template.
5. No additional materials will be accepted.
6. If these basic criteria are not met, the application will not be reviewed
7. Certificate of Insurance evidencing that any required insurance coverages are, or will be, in effect through the 2021 calendar year.

Send Completed Application and Required Documentation to:

**Please submit by mail to:      OR**

**MAILING ADDRESS**

Vicki Martin, Buyer  
 Kitsap County Purchasing Office  
 614 Division Street, MS-7  
 Port Orchard, WA 98366

**Hand deliver to:**

**PHYSICAL ADDRESS**

Vicki Martin, Buyer  
 Kitsap County Administration Building  
 Purchasing Office – Fourth Floor  
 619 Division Street  
 Port Orchard, WA 98366

All documentation must be received by deadline and contain ALL submission requirements to be considered for funding. Please provide (7) copies of submission package without staples. Questions? Call Vicki Martin at 360.337.4788 or e-mail [vmartin@co.kitsap.wa.us](mailto:vmartin@co.kitsap.wa.us)

Puget Sound Navy Museum Foundation Budget				2020	12/11/2019
Categories					
Income				Budget	Actual
Donations Total				\$ 35,750.00	
Amazon Smile			\$ 100.00		
Donation Box			\$ 8,000.00		
Fred Meyer Comm Rewards			\$ 100.00		
Individual Contributions			\$ 25,000.00		
Kitsap Great Give			\$ 2,000.00		
PayPal Giving Fund			\$ 50.00		
Penny Jar			\$ 500.00		
Gift Shop Income Total				\$ 47,000.00	
Gift Shop Cash Sales			\$ 20,000.00		
Nontaxable sales					
Gift Shop Credit Card Sales			\$ 27,000.00		
Interest				\$ 3,500.00	
Friendship Dues				\$ 5,000.00	
Other income (unbudgeted)					
<b>TOTAL INCOME</b>				<b>\$ 91,250.00</b>	
Expenses					
Foundation Expense Total				\$ 47,980.00	
Fundraiser Costs				\$ 4,200.00	
Gift Shop Expense Total				\$ 30,350.00	
Cost of Goods			\$ 24,200.00		
Credit Card Proc Fees			\$ 1,000.00		
Sales Tax Paid			\$ 3,500.00		
Store Supplies			\$ 1,500.00		
Use Tax			\$ 150.00		
Insurance				\$ 550.00	
Licenses, Registrations, etc.				\$ 130.00	
Utilities				\$ 2,250.00	
Office Expense				\$ 10,500.00	
Other					
General Museum Expense Total				\$ 13,730.00	
Drinking Water			\$ 950.00		
Field Trip Bus Trans			\$ 3,000.00		
Membership Chamber of Commerce			\$ 250.00		
Membership Navy League			\$ 130.00		
STEM Bus Transportation			\$ 5,000.00		
Volunteer Recognition Events			\$ 4,400.00		
Museum Expense Total				\$ 50,208.00	
Administrative Total				\$ 16,348.00	
DRMO run			\$ 1,000.00		
Ferry Passage Reimbursement			\$ 200.00		
Marketing			\$ 11,158.00		
Membership & Magazine			\$ 485.00		
Misc. Support & Progr. Costs Total			\$ 2,000.00		
Safeway gift card			\$ 100.00		
Vol PSNM/Logo Shirts			\$ 850.00		
Volunteer Badges			\$ 200.00		
Vol of Qtr Plaques			\$ 105.00		
Vol Thank you Program			\$ 250.00		
Collections Management Total				\$ 1,200.00	
Misc. Supplies			\$ 200.00		
Disaster Cabinets			\$ 1,000.00		
Curatorial Support Total				\$ 200.00	
Reference Support			\$ 200.00		
Education & Public Prog Total				\$ 4,400.00	
History Day Awards			\$ 500.00		
Education/Public Prog			\$ 3,900.00		
Exhibits Support Total				\$ 28,060.00	
Exhibit Supplies/Materials			\$ 1,000.00		
Home Depot Gift Card			\$ 500.00		
Desktop comp graphics/fab design			\$ 2,800.00		
Adobe creative suite - business plan			\$ 960.00		
Sketchup			\$ 300.00		
CVN Exhibit			\$ 20,000.00		
Chemistry code exhibi			\$ 1,500.00		
3D Printer/Equipment			\$ 1,000.00		
<b>TOTAL EXPENSE</b>				<b>\$ 111,918.00</b>	
			NET	\$ (20,668.00)	

**Puget Sound Navy Museum Foundation Marketing**  
**Bold/Underlined items are requested for the Grant**  
Annual website hosting fee (\$250)  
Website Add-ons \$200  
 Annual WSDOT Highway Sign Fees (\$800)  
 Brochure Rack /Card Printing (\$1500)  
Brochure Distribution through "Certified Folder (\$4200)  
 Annual Highlights Postcard Printing (\$500)  
 Constant Contact Subscription (\$500)  
 Survey Monkey (\$408)  
Facebook Ads (\$300)  
 Macaroni Kids Ads (\$300)  
 Exterios Banners (\$2200)

OGDEN UT 84201-0046

In reply refer to: 0423371862  
Sep. 22, 2009 LTR 252C E0  
91-1445011 000000 00  
00004923  
BODC: TE

PUGET SOUND NAVY MUSEUM FOUNDATION  
251 1ST ST  
BREMERTON WA 98337-5612

Taxpayer Identification Number: 91-1445011

Dear Taxpayer:

Thank you for your Form 990-EZ.

We have changed the name on your account as requested. The number shown above is valid for use on all tax documents.

If you need forms, schedules, or publications, you may get them by visiting the IRS website at [www.irs.gov](http://www.irs.gov) or by calling toll-free at 1-800-TAX-FORM (1-800-829-3676).

If you have any questions, please call us toll free at 1-877-829-5500.

If you prefer, you may write to us at the address shown at the top of the first page of this letter.

Whenever you write, please include this letter and, in the spaces below, give us your telephone number with the hours we can reach you. Also, you may want to keep a copy of this letter for your records.

Telephone Number ( ) \_\_\_\_\_ Hours \_\_\_\_\_

Sincerely yours,



Kim L. Tolsma  
Dept. Manager, Code & Edit/Entity 3

Enclosure(s):  
Copy of this letter

**Internal Revenue Service**

**Department of the Treasury**

**P. O. Box 2508  
Cincinnati, OH 45201**

**Date:** April 17, 2002

Naval Memorial Museum of The Pacific  
130 Washington Avenue  
Bremerton, WA 98337

**Person to Contact:**

Kaye Keyes 31-07416  
Customer Service Specialist

**Toll Free Telephone Number:**

8:00 a.m. to 6:30 p.m. EST  
877-829-5500

**Fax Number:**

513-263-3756

**Federal Identification Number:**

911445011

Dear Sir or Madam:

This letter is in response to your request for a copy of your organization's determination letter. This letter will take the place of the copy you requested.

Our records indicate that a determination letter issued in March 1989, granted your organization exemption from federal income tax under section 501(c)(3) of the Internal Revenue Code. That letter is still in effect.

Based on information subsequently submitted, we classified your organization as one that is not a private foundation within the meaning of section 509(a) of the Code because it is an organization described in section 509(a)(2).

This classification was based on the assumption that your organization's operations would continue as stated in the application. If your organization's sources of support, or its character, method of operations, or purposes have changed, please let us know so we can consider the effect of the change on the exempt status and foundation status of your organization.

Your organization is required to file Form 990, Return of Organization Exempt from Income Tax, only if its gross receipts each year are normally more than \$25,000. If a return is required, it must be filed by the 15th day of the fifth month after the end of the organization's annual accounting period. The law imposes a penalty of \$20 a day, up to a maximum of \$10,000, when a return is filed late, unless there is reasonable cause for the delay.

All exempt organizations (unless specifically excluded) are liable for taxes under the Federal Insurance Contributions Act (social security taxes) on remuneration of \$100 or more paid to each employee during a calendar year. Your organization is not liable for the tax imposed under the Federal Unemployment Tax Act (FUTA).

Organizations that are not private foundations are not subject to the excise taxes under Chapter 42 of the Code. However, these organizations are not automatically exempt from other federal excise taxes.

Donors may deduct contributions to your organization as provided in section 170 of the Code. Bequests, legacies, devises, transfers, or gifts to your organization or for its use are deductible for federal estate and gift tax purposes if they meet the applicable provisions of sections 2055, 2106, and 2522 of the Code.

Naval Memorial Museum of The Pacific  
91-1445011

Your organization is not required to file federal income tax returns unless it is subject to the tax on unrelated business income under section 511 of the Code. If your organization is subject to this tax, it must file an income tax return on the Form 990-T, Exempt Organization Business Income Tax Return. In this letter, we are not determining whether any of your organization's present or proposed activities are unrelated trade or business as defined in section 513 of the Code.

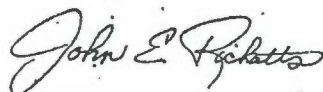
The law requires you to make your organization's annual return available for public inspection without charge for three years after the due date of the return. You are also required to make available for public inspection a copy of your organization's exemption application, any supporting documents and the exemption letter to any individual who requests such documents in person or in writing. You can charge only a reasonable fee for reproduction and actual postage costs for the copied materials. The law does not require you to provide copies of public inspection documents that are widely available, such as by posting them on the Internet (World Wide Web). You may be liable for a penalty of \$20 a day for each day you do not make these documents available for public inspection (up to a maximum of \$10,000 in the case of an annual return).

Because this letter could help resolve any questions about your organization's exempt status and foundation status, you should keep it with the organization's permanent records.

If you have any questions, please call us at the telephone number shown in the heading of this letter.

This letter affirms your organization's exempt status.

Sincerely,



John E. Ricketts, Director, TE/GE  
Customer Account Services

Click on the question-mark icons to display help windows.

The information provided will enable you to file a more complete return and reduce the chances the IRS will need to contact you.

Form **990-EZ**

**Short Form**

**Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

**2019**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

**Open to Public Inspection**

▶ Do not enter social security numbers on this form, as it may be made public.

▶ Go to [www.irs.gov/Form990EZ](http://www.irs.gov/Form990EZ) for instructions and the latest information.

Department of the Treasury  
Internal Revenue Service

**A For the 2019 calendar year, or tax year beginning** , 2019, and ending , 20

<input checked="" type="checkbox"/> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C Name of organization</b> <input type="checkbox"/> ? Puget Sound Navy Museum Foundation		<b>D Employer identification number</b> <input type="checkbox"/> ? 911445011
	Number and street (or P.O. box if mail is not delivered to street address) <input type="checkbox"/> ? 251 1st Street	Room/suite	<b>E Telephone number</b> 360-479-7447
	City or town, state or province, country, and ZIP or foreign postal code Bremerton, WA 98337		<b>F Group Exemption Number</b> ▶ <input type="checkbox"/> ?

**G Accounting Method:**  Cash  Accrual Other (specify) ▶ \_\_\_\_\_

**H Check**  if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).  ?

**I Website:** ▶ \_\_\_\_\_

**J Tax-exempt status** (check only one) –  501(c)(3)  501(c) ( ) ◀ (insert no.)  4947(a)(1) or  527

**K Form of organization:**  Corporation  Trust  Association  Other \_\_\_\_\_

**L Add lines 5b, 6c, and 7b to line 9 to determine gross receipts.** If gross receipts are \$200,000 or more, or if total assets (Part II, column (B)) are \$500,000 or more, file Form 990 instead of Form 990-EZ. ▶ \$ 75,735

**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (see the instructions for Part I)  ?  
Check if the organization used Schedule O to respond to any question in this Part I

Revenue	1	Contributions, gifts, grants, and similar amounts received		1		18450			
	2	Program service revenue including government fees and contracts		2		0			
	3	Membership dues and assessments		3		50			
	4	Investment income		4		3816			
	5a	Gross amount from sale of assets other than inventory	5a			0			
	b	Less: cost or other basis and sales expenses	5b			0			
	c	Gain or (loss) from sale of assets other than inventory (subtract line 5b from line 5a)	5c			0			
	6	Gaming and fundraising events:							
	a	Gross income from gaming (attach Schedule G if greater than \$15,000)	6a			0			
	b	Gross income from fundraising events (not including \$ _____ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	6b			0			
c	Less: direct expenses from gaming and fundraising events	6c			0				
d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d			0				
7a	Gross sales of inventory, less returns and allowances	7a			53410				
b	Less: cost of goods sold	7b			16171				
c	Gross profit or (loss) from sales of inventory (subtract line 7b from line 7a)	7c			37239				
8	Other revenue (describe in Schedule O)	8			0				
9	<b>Total revenue.</b> Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9			59564				
Expenses	10	Grants and similar amounts paid (list in Schedule O)		10		0			
	11	Benefits paid to or for members		11		0			
	12	Salaries, other compensation, and employee benefits <input type="checkbox"/> ?		12		0			
	13	Professional fees and other payments to independent contractors <input type="checkbox"/> ?		13		0			
	14	Occupancy, rent, utilities, and maintenance		14		0			
	15	Printing, publications, postage, and shipping		15		0			
	16	Other expenses (describe in Schedule O) <input type="checkbox"/> ?		16		42687			
17	<b>Total expenses.</b> Add lines 10 through 16	17			42687				
Net Assets	18	Excess or (deficit) for the year (subtract line 17 from line 9)		18		16877			
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)		19		186699			
	20	Other changes in net assets or fund balances (explain in Schedule O)		20		604			
	21	<b>Net assets or fund balances at end of year.</b> Combine lines 18 through 20	21			204180			

**Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, 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 <b>Total.</b> 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 <b>Public support.</b> Subtract line 5 from line 4						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7 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 <b>Total support.</b> Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions) . . . . .					12	
13 <b>First five years.</b> 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 <b>stop here</b> . . . . . <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

14 Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f)) . . . . .	14	%
15 Public support percentage from 2018 Schedule A, Part II, line 14 . . . . .	15	%
16a <b>33 1/3% support test—2019.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization . . . . . <input type="checkbox"/>		
<b>b 33 1/3% support test—2018.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization . . . . . <input type="checkbox"/>		
17a <b>10%-facts-and-circumstances test—2019.</b> 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 <b>stop here.</b> Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . . <input type="checkbox"/>		
<b>b 10%-facts-and-circumstances test—2018.</b> 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 <b>stop here.</b> Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . . <input type="checkbox"/>		
18 <b>Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions . . . . . <input type="checkbox"/>		