

IN THE COUNTY LEGISLATURE OF JACKSON COUNTY, MISSOURI

A RESOLUTION authorizing the County Executive to execute a Cooperative Agreement with St. Patrick's Day Parade Committee, funded by the County's Park Fund, at a cost to the County not to exceed \$10,000.00, and partially rescinding Resolution 16504, dated January 14, 2008.

RESOLUTION #16839, March 9, 2009

INTRODUCED BY Dan Tarwater, County Legislator

WHEREAS, by Resolution 16504, dated January 14, 2008, the Legislature did authorize the County Executive to execute a Cooperative Agreement with the St. Patrick's Day Parade Committee, at a cost to the County not to exceed \$5,000.00; and,

WHEREAS, that Cooperative Agreement was never executed and the funds authorized by Resolution 16504 are available to be reallocated; and

WHEREAS, the reallocation of these funds is to cover partial costs for the 2009 St. Patrick's Day Parade funding is appropriate; and,

WHEREAS, the 2009 County budget contains an additional authorization for St. Patrick's Day Parade Committee to provide public services to the County and its citizens at a cost not to exceed \$5,000; and,

WHEREAS, the execution of a Cooperative Agreement with St. Patrick's Day Parade Committee is in the best interests of the health, welfare, and safety of the citizens of Jackson County; now therefore,

BE IT RESOLVED by the County Legislature of Jackson County, Missouri, that the County Executive be and hereby is authorized to execute a Cooperative Agreement with St. Patrick's Day Parade Committee, in an amount not to exceed \$10,000.00, in a form to be approved by the County Counselor; and,

BE IT FURTHER RESOLVED that the Director of Finance and Purchasing be and hereby is authorized to make all payments, including final payment on the agreement; and,

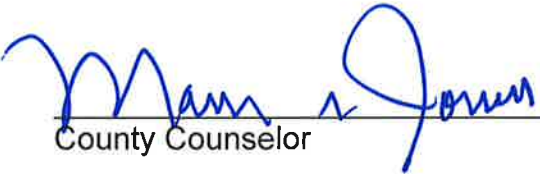
BE IT FURTHER RESOLVED that the portion of Resolution 16504, dated January 14, 2008, that authorized a cooperative agreement with the St. Patrick's Day Parade Committee be and hereby is rescinded.

Effective Date: This Resolution shall be effective immediately upon its passage by a majority of the Legislature.

APPROVED AS TO FORM:



Chief Deputy County Counselor



County Counselor

Certificate of Passage

I hereby certify that the attached resolution, Resolution #16839 of March 9, 2009, was duly passed on March 9, 2009 by the Jackson County Legislature. The votes thereon were as follows:

Yeas 7

Nays 0

Abstaining 0

Absent 2

3.10.09

Date



Mary Jo Spino, Clerk of Legislature

There is a balance otherwise unencumbered to the credit of the appropriation to which the expenditure is chargeable and there is a cash balance otherwise unencumbered in the treasury to the credit of the fund from which payment is to be made each sufficient to provide for the obligation herein authorized.

ACCOUNT NUMBER: 003 1220 56789
ACCOUNT TITLE: Park Fund
Economic Development
Outside Agency Funding
NOT TO EXCEED: \$10,000.00

3/9/09

Date



Director of Finance and Purchasing

COOPERATIVE AGREEMENT

Res. 16839

AN AGREEMENT by and between Jackson County, Missouri, a Constitutional Home Rule County, hereinafter called "the County" and the Kansas City St. Patrick's Day Parade Committee, 107 W. 104th Street, Kansas City, Missouri 64114, hereinafter called "St. Patrick's Committee."

WHEREAS, the County and St. Patrick's Committee desire to enter into a Cooperative Agreement whereby County will provide funds to help provide security, insurance, and clean up for the 2009 St. Patrick's Day Parade held on March 17, 2009; and,

WHEREAS, the County deems it to be in the best interest of the citizenry to support such efforts;

NOW THEREFORE, in consideration of the foregoing and the terms and provisions herein contained, the County and St. Patrick's Committee respectively promise, covenant and agree with each other as follows:

1. **Services To Be Provided.** St. Patrick's Committee shall use said \$10,000.00 as funding for security, insurance, and clean up for the 2009 St. Patrick's Day Parade.
2. **Terms of Payment.** The County agrees to pay the amount of \$10,000.00 to St. Patrick's Committee for the purpose of helping to fund the 2009 St. Patrick's Day Parades.
3. **Annual Report.** St. Patrick's Committee shall submit an annual report including invoices and cancelled checks and other documentation as requested by the Director of Finance and Purchasing to show that the funds paid by the County were used for the purpose set forth in this Agreement. Said report shall be submitted no later than

December 31, 2009, to the Director of Finance and Purchasing, 415 East 12th Street, Kansas City, Missouri 64106. Failure to file said annual report shall disqualify St. Patrick's Committee from future funding by the County.

4. **Audit.** The County further reserves the right to examine and audit, during reasonable office hours, the books and records of St. Patrick's Committee pertaining to its finances and operations.

5. **Conflict of Interest.** St. Patrick's Committee warrants that no officer or employee of the County, whether elected or appointed, shall in any manner whatsoever be interested in or receive any benefit from the profits or emoluments of this contract.

6. **Duration.** This Agreement shall be effective upon execution, and terminate on December 31, 2009, or upon the County's receipt of the final report and accounting.

7. **Submission of Documents.** No payment shall be made under this contract unless the contracting agency shall have submitted to the County's Budget Director (1) a written proposal setting out in detail the intended use of the County's funding, including the target population to be served; (2) the agency's IRS Form 990, from the previous fiscal or calendar year; (3) a statement of the agency's total budget for its most recent fiscal year; and, (4) a detailed explanation of actual expenditures of County funds (pertains to final payments and payments on contracts for future years.) If an agency has previously received County funding, to be eligible for future payments, an agency must submit either an audited financial statement for the agency's most recent fiscal or calendar year, by March 31 of the following year, or a certified public accountant's program audit of County funds, by January 31 of the following year. Any document described herein which was submitted to the Budget Director as a part of an application for funding need not be resubmitted to qualify for payment. No payment shall be made if the contract agency is

out of compliance on any other County contract.

8. **Severability.** If any covenant or other provision of this Agreement is invalid, or incapable of being enforced, by reasons of any rule of law or public policy, all other conditions and provisions of this Agreement shall nevertheless remain in full force and effect and no covenant or provision shall be deemed dependent upon any other covenant or provision unless so expressed herein.

9. **Incorporation.** This Agreement incorporates the entire understanding and agreement of the parties.

IN WITNESS WHEREOF, the parties have executed this Agreement this 3 day of April, 2009.

APPROVED AS TO FORM:

JACKSON COUNTY, MISSOURI

Mark S. Jones
Mark S. Jones, County Counselor

By Michael D. Sanders
Michael D. Sanders, County Executive

ATTEST:

ST. PATRICK'S DAY PARADE
COMMITTEE, INC.

Mary Jo Spino
Mary Jo Spino,
Clerk of the Legislature

By: Annie McKeown
Board Member

Tax I.D. No. 43-1773363

REVENUE CERTIFICATE

I hereby certify that there is a balance otherwise unencumbered to the credit of the appropriation to which this agreement is chargeable, and a cash balance otherwise unencumbered in the treasury from which payment is to be made, each sufficient to meet the obligation of \$10,000.00 which is hereby authorized.

3/31/09
Date

W. Thomas
Director of Finance and Purchasing
Account No. 003-1220-56789
12202009001



OUTSIDE AGENCY FUNDING REQUEST FORM 2009 BUDGET

415 E 12th Street, 2nd Floor
Kansas City, MO 64106

Email: auditor@jacksongov.org

OCT 01 2008

Section A: Organization or Agency Information	page 1
Section B: Agency's 2008 and 2009 Revenue Information	page 2
Section C: Individual Program Budget	page 3
Section D: Program Information	pages 4 - 7

Section A: Organization or Agency Information

Name:	Kansas City St. Patick's Day Parade Committee		
Address:	107 W. 104th Street, Kasnas City, MO 64114		
Phone No:	816.941.2556	Fax:	816.505.6720
Website Address:	www.kcIrishparade.com		
Federal Tax ID No:	43-1773363	Fiscal Year Cycle:	2990
Name and Title of Contact Person:	Anne McKeown, Treasurer		
Phone No:	816.941.2556	Email Address:	anne.mckeown@citi.com
Submittal of this request has been authorized by:	Erin Kiekbusch, President		

Summary of Jackson County Funding Request by Program		
Program Name <i>(please prioritize with number 1 being most important)</i>		Amount
1. Kansas City St. Patrick's Day Parade	\$	20,000
2.	\$	-
3.	\$	-
Total Jackson County Funding Request for All Programs	\$	20,000

Section B: Agency's 2008 and 2009 Revenue Information

Agency's 2009 Revenue Information			
Funding Entity	Agency's 2009 Total Projected Revenue Source You Will Request 2009 Funding From	Projected Amount	% of Total Revenue
Federal		\$ -	0
State		\$ -	0
Jackson County		\$ 20,000	0.32
Other Counties		\$ -	0
City	NTDF	\$ 7,500	0.12
Charity/Donations		\$ -	0
Fundraisers		\$ 10,000	0.16
Other	Corporate Sponsors	\$ 25,000	0.4
2009 Total Projected Revenue		\$ 62,500	

Agency's 2008 Revenue Information			
Funding Entity	Agency's 2008 Total Revenue Source You Received Funding From	Amount	% of Total Revenue
Federal		\$ -	0
State		\$ -	0
Jackson County		\$ -	0
Other Counties		\$ -	0
City	NTDF	\$ 20,000	0.414868901
Charity/Donations		\$ -	0
Fundraisers		\$ 11,433	0.237159808
Other	Corporate Sponsors	\$ 16,775	0.347971291
2008 Total Revenue		\$ 48,208	

If your agency received funding from Jackson County in 2008,
please identify the funding source, amount and program name below.

Jackson County Funding Source	Yes	No	Amount	Program Name
COMBAT	<input type="checkbox"/>	<input type="checkbox"/>	\$ -	
Mental Health Levy	<input type="checkbox"/>	<input type="checkbox"/>	\$ -	
Board of Services for Developmentally Disabled	<input type="checkbox"/>	<input type="checkbox"/>	\$ -	
Domestic Violence Board	<input type="checkbox"/>	<input type="checkbox"/>	\$ -	
Housing Resources Commission	<input type="checkbox"/>	<input type="checkbox"/>	\$ -	
Outside Agency Program	<input checked="" type="checkbox"/>	<input type="checkbox"/>	\$ -	
2008 Total Jackson County Funding			\$ -	

Section C: Individual Program Budget

Complete a separate program budget for each program your agency is applying for funding. Program Name, Priority, and Total Program Request Amount from this sheet must match information entered under Section A, page 1.

Agency Name: _____

Program Name: Kansas City St. Patrick's Day Parade

Priority: _____

Personal Services	
Name, Title, No. of Employees	
Salary	\$ -
Benefits	\$ -
Total Personal Services	\$ -

Contractual Services	
Kansas City, MO Police Department	\$ 10,000
National Event Services	\$ 10,000
	\$ -
	\$ -
	\$ -
	\$ -
Total Contractual Services	\$ 20,000

Supplies	
	\$ -
	\$ -
	\$ -
	\$ -
	\$ -
	\$ -
Total Supplies	\$ -

Total Program Request \$ 20,000

Section D: Program Information

Complete each section for each program your agency is applying for funding.
 All Program 1 information should be entered in the left column, all Program 2 information in the middle column, and all Program 3 information in the right column.

Program 1 Name	Program 2 Name	Program 3 Name
Proposed Program		
Detail functions to be performed by each program.		
<p>The St. Patrick's Day parade will be held on March 17, 2009. It will be staged on Pershing and Main and will progress on Pershing to Grand, then north on Grand to 15th Street/ Truman Road. There will be approximately 120 entries and 4,000 participants along with an estimated 200,000 spectators in attendance.</p>		
Target Population		
Describe target population and demographics to be served by each program.		
<p>Our target population is the greater Kansas City metro area as well as visitors from Springfield, MO, Columbia, MO, Lawrence, KS, Wichita, KS, St. Louis, MO as well as Nebraska and Iowa.</p>		

Service Delivery Area

Identify your specific geographic service delivery for each program.

The entire metropolitan Kansas City, Missouri area is serviced by the Parade. Most specifically, the downtown KCMO area benefits from additional increase in business from the population of participants and spectators who flock downtown for the parade.

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Participants

Identify the number of participants by County that each program serves.

Jackson

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Clay/Platte

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--

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Cass

--

--

--

Johnson/
Wyandotte

--

--

--

Other

No official records exist trackign the Counties of Origin for our parade participants and spectators.

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Fund Separation

Indicate what measures your agency will take to ensure that funds received from Jackson County will be utilized for the benefit of Jackson County residents.

The funds are intended to be utilized for providing security for the parade. The security will be provided for all participants, but the payment of services will go directly to the KCMO Police Department (a Jackson County entity) and/or National Event Services, the vendor who provides the street barricades.

Approach & Method

List the top three (3) objectives for each program.

1. Promote a safe, fun and sensible parade

2. Promote Irish heritage and encourage ethnic diversity

3. Promote unity and community spirit in the metropolitan area

Detail specific methods you will use to achieve these objectives.

1. We will hold a mandatory logistics meeting that will outline all the rules and regulations for participants and parade committee workers. Additionally, we allow no consumption of alcoholic beverages on our floats or in the staging areas by participants and committee workers. 2. We require use of the Irish theme by all participants. 2. & 3. We invite and encourage participation from diverse ethnic, political and religious backgrounds.

Evaluation

Describe how the success of each program will be evaluated. Indicate performance measures or statistics you will use to demonstrate the success of each program.

Our success is measured by: 1) The safety of the participants and spectators 2) The number of participants who choose to return each year to the parade 3) The number of spectators that attend 4) The quality of the entries, as determined by a panel of volunteer judges

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Notification

How will your organization make clients, the taxpayers, and the media aware of the generous funding received from Jackson County?

We promote our sponsors, including Jackson County, in the following ways: 1) A logo on our website at www.kcIrishparade.com 2) The logo on all printed material that includes the list of sponsors 3) Banner displayed at all events (Kick-off luncheon, spring concert, golf tournament, the parade, etc) 4) On-air mention during the telecast of the parade 5) Word of mouth 6) Priority Patronage

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ASSESSMENT DEPARTMENT
BUSINESS PERSONAL PROPERTY

web site: www.jacksongov.org

321 W. LEXINGTON
INDEPENDENCE, MO 64050

(816) 881-4672
FAX: (816) 881-4680

**Business Property Clearance Notice
(Waiver)**

Date: 10/10/2008

Tax Code: (TCA) NA

Account Number: 00080022B

SIC Code: 813

Name: KANSAS CITY ST PATRICK'S DAY
PARADE COMMITTEE

Situs Address:
(Physical Location of Property)
107 W 104TH ST
KANSAS CITY, MO 64114

Address:
107 W 104TH ST
KANSAS CITY, MO 64114

No personal tax due for year(s): **TAX EXEMPT ACCOUNT SETUP IN PROGRESS**
NO TAXES DUE FOR 2007 & 2008

FOR THE FOLLOWING VEHICLE(S):

Make: Model: Year: Serial No. /VIN: Purchase Date:

Appraiser Signature: _____

[Handwritten Signature] 10/10/08

Taxpayers Signature: _____

STATE OF MISSOURI



Robin Carnahan
Secretary of State

CORPORATION DIVISION CERTIFICATE OF GOOD STANDING

I, ROBIN CARNAHAN, Secretary of the State of Missouri, do hereby certify that the records in my office and in my care and custody reveal that

KANSAS CITY ST. PATRICK'S DAY PARADE COMMITTEE, INC.
N00056188

was created under the laws of this State on the 17th day of March, 1997, and is in good standing, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I have set my hand and imprinted the GREAT SEAL of the State of Missouri, on this, the 16th day of June, 2008.

Robin Carnahan

Secretary of State



Robin Carnahan Secretary of State
2008 ANNUAL REGISTRATION REPORT
 NONPROFIT

File Number: 200827590271
 N00056188
 Date Filed: 10/01/2008
 Robin Carnahan
 Secretary of State

REPORT DUE BY: 08/31/2008

ORGANIZED UNDER THE LAWS OF:
Missouri

N00056188
 KANSAS CITY ST. PATRICK'S DAY PARADE COMMITTEE, INC.
 KATHY MAGUIRE
 313 Avila Circle
 Kansas City, MO 64114

1 PRINCIPAL PLACE OF BUSINESS OR CORPORATE HEADQUARTERS:
107 W. 104th Street
 STREET
Kansas City, MO 64114
 CITY/STATE ZIP

2 If changing the registered agent and/or registered office address, please check the appropriate box(es) and fill in the necessary information.
 The new registered agent
IF CHANGING THE REGISTERED AGENT, AN ORIGINAL WRITTEN CONSENT FROM THE NEW REGISTERED AGENT MUST BE ATTACHED AND FILED WITH THIS REGISTRATION REPORT.
 The new registered office address 107 W. 104th Street Kansas City MO 64114
 Must be a Missouri address, PO Box alone is not acceptable. This section is not applicable for Banks, Trusts and Foreign Insurance.

OFFICERS		BOARD OF DIRECTORS	
NAME AND PHYSICAL ADDRESS (P.O. BOX ALONE NOT ACCEPTABLE). <u>MUST LIST AT LEAST ONE OFFICER BELOW.</u> A		NAME AND PHYSICAL ADDRESS (P.O. BOX ALONE NOT ACCEPTABLE). <u>MUST LIST AT LEAST THREE DIRECTORS BELOW.</u> B	
<u>PRES</u>	<u>NAME</u>	Gordon Grohmann
STREET/RT	STREET/RT	7221 W 79th Street
CITY/STATE/ZIP	CITY/STATE/ZIP	Overland Park, KS 66204
V-PRES	Erin Klebusch	NAME	Michael Mahoney
STREET/RT	7500 Baltimore	STREET/RT	4840 N Kansas
CITY/STATE/ZIP	Kansas City, MO 64114	CITY/STATE/ZIP	Kansas City North, MO 64119
<u>SEC'Y</u>	Patti Aylward Kalb	NAME	Dan O'Mara
STREET/RT	7187 Cherokee	STREET/RT	7728 Locust
CITY/STATE/ZIP	Prairie Village, KS 66208	CITY/STATE/ZIP	Kansas City, MO 64131
TREAS	Anne McKeown	NAME	Kerry Browne
STREET/RT	107 W. 104th Street	STREET/RT	3241 Karnes Blvd
CITY/STATE/ZIP	Kansas City, MO 64114	CITY/STATE/ZIP	Kansas City, MO 64111
NAMES AND ADDRESSES OF ALL OTHER OFFICERS AND DIRECTORS ARE ATTACHED			

4 The undersigned understands that false statements made in this report are punishable for the crime of making a false declaration under Section 575.060 RSMo. Photocopy or stamped signature not acceptable.

Authorized party or officer sign here Anne McKeown (Required)

Please print name and title of signer: Anne McKeown / Treasurer
 NAME TITLE

REGISTRATION REPORT FEE IS:
 _____ \$10.00 if filed on or before 8/31
 _____ \$15.00 if filed after 8/31
 Corporation will be administratively dissolved if report is not filed by November 30th.

WHEN THIS FORM IS ACCEPTED BY THE SECRETARY OF STATE, BY LAW IT WILL BECOME A PUBLIC DOCUMENT AND ALL INFORMATION PROVIDED IS SUBJECT TO PUBLIC DISCLOSURE

E-MAIL ADDRESS (OPTIONAL) _____

REQUIRED INFORMATION MUST BE COMPLETE OR THE REGISTRATION REPORT WILL BE REJECTED
 MAKE CHECK PAYABLE TO DIRECTOR OF REVENUE
 RETURN COMPLETED REGISTRATION REPORT AND PAYMENT TO THE SECRETARY OF STATE - P.O. BOX 1366, JEFFERSON CITY, MO 65102

INTERNAL REVENUE SERVICE
DISTRICT DIRECTOR
P. O. BOX 2508
CINCINNATI, OH 45201

DEPARTMENT OF THE TREASURY

Date: **SEP 15 1998**

KANSAS CITY ST PATRICKS DAY PARADE
COMMITTEE INC
C/O KATHY MAGUIRE
11111 BELLEVIEW
KANSAS CITY, MO 64114

Employer Identification Number:
43-1773363

DLN:
17053188065048

Contact Person:
D. A. DOWNING
Contact Telephone Number:
(513) 241-5199

Accounting Period Ending:
December 31

Form 990 Required:
Yes

Addendum Applies:
No

Dear Applicant:

Based on information supplied, and assuming your operations will be as stated in your application for recognition of exemption, we have determined you are exempt from federal income tax under section 501(a) of the Internal Revenue Code as an organization described in section 501(c)(3).

We have further determined that you are not a private foundation within the meaning of section 509(a) of the Code, because you are an organization described in section 509(a)(2).

If your sources of support, or your purposes, character, or method of operation change, please let us know so we can consider the effect of the change on your exempt status and foundation status. In the case of an amendment to your organizational document or bylaws, please send us a copy of the amended document or bylaws. Also, you should inform us of all changes in your name or address.

Since you are not a private foundation, you are not subject to the excise taxes under Chapter 42 of the Code. However, if you are involved in an excess benefit transaction, that transaction might be subject to the excise taxes of section 4958. Additionally, you are not automatically exempt from other federal excise taxes. If you have any questions about excise, employment, or other federal taxes, please contact your key district office.

Grantors and contributors may rely on this determination unless the Internal Revenue Service publishes notice to the contrary. However, if you lose your section 509(a)(2) status, a grantor or contributor may not rely on this determination if he or she was in part responsible for, or was aware of, the act or failure to act, or the substantial or material change on the part of the organization that resulted in your loss of such status, or if he or she acquired knowledge that the Internal Revenue Service had given notice that you would no longer be classified as a section 509(a)(2) organization.

Donors may deduct contributions to you as provided in section 170 of the Code. Bequests, legacies, devises, transfers, or gifts to you or for your use are deductible for federal estate and gift tax purposes if they meet the

Letter 947 (DO/CG)

KANSAS CITY ST PATRICKS DAY PARADE

applicable provisions of Code sections 2055, 2106, and 2522.

Contribution deductions are allowable to donors only to the extent that their contributions are gifts, with no consideration received. Ticket purchases and similar payments in conjunction with fundraising events may not necessarily qualify as deductible contributions, depending on the circumstances. See Revenue Ruling 67-246, published in Cumulative Bulletin 1967-2, on page 104, which sets forth guidelines regarding the deductibility, as charitable contributions, of payments made by taxpayers for admission to or other participation in fundraising activities for charity.

In the heading of this letter we have indicated whether you must file Form 990, Return of Organization Exempt From Income Tax. If Yes is indicated, you are required to file Form 990 only if your gross receipts each year are normally more than \$25,000. However, if you receive a Form 990 package in the mail, please file the return even if you do not exceed the gross receipts test. If you are not required to file, simply attach the label provided, check the box in the heading to indicate that your annual gross receipts are normally \$25,000 or less, and sign the return.

If a return is required, it must be filed by the 15th day of the fifth month after the end of your annual accounting period. A penalty of \$20 a day is charged when a return is filed late, unless there is reasonable cause for the delay. However, the maximum penalty charged cannot exceed \$10,000 or 5 percent of your gross receipts for the year, whichever is less. For organizations with gross receipts exceeding \$1,000,000 in any year, the penalty is \$100 per day per return, unless there is reasonable cause for the delay. The maximum penalty for an organization with gross receipts exceeding \$1,000,000 shall not exceed \$50,000. This penalty may also be charged if a return is not complete, so be sure your return is complete before you file it.

You are required to make your annual return available for public inspection for three years after the return is due. You are also required to make available a copy of your exemption application, any supporting documents, and this exemption letter. Failure to make these documents available for public inspection may subject you to a penalty of \$20 per day for each day there is a failure to comply (up to a maximum of \$10,000 in the case of an annual return).

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

You need an employer identification number even if you have no employees. If an employer identification number was not entered on your application, a number will be assigned to you and you will be advised of it. Please use that number on all returns you file and in all correspondence with the Internal

-3-

KANSAS CITY ST PATRICKS DAY PARADE

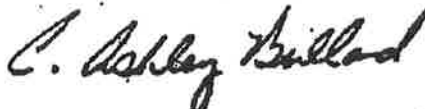
Revenue Service.

If we have indicated in the heading of this letter that an addendum applies, the enclosed addendum is an integral part of this letter.

Because this letter could help resolve any questions about your exempt status and foundation status, you should keep it in your permanent records.

If you have any questions, please contact the person whose name and telephone number are shown in the heading of this letter.

Sincerely yours,



~~Revenue~~ District Director

COMPLIANCE REVIEW FORM

Semi-Annual Report Due Date: 10-2009

DIRECTIONS FOR COMPLETION: Please fill out form completely. If a question refers to "past report" and this is the first one, place "1st Report" in the blank. If a question addresses an area which does not apply to your company, such as (subcontractors), place "N/A" in the blank. Please be sure this and subsequent reports are SINGLED AND DATED. If you have any questions, call our office at (816)-881-3302.

Mail reports to:

Tom Wyrsh
 Contract Compliance Review Director
 415 East 12th Street—2nd Floor
 Kansas City, Missouri 64106
 EMAIL: cro@jacksongov.org
 OFFICE: (816) 881 - 3302
 FAX: (816) 881 - 1223

1. COMPANY DESCRIPTION:

- A. Name of Company KANSAS CITY ST. PATRICK'S DAY PARADE COM.
- B. Street Address 107 W. 10TH ST
- C. City KC State MO Zip 64114
- D. Area Code 816 Telephone Number 944-2553

2. COMPANY STATISTICS:

- A. Total number of Employees 0
- B. Total Number of Employees who are:
 - 1. Women _____
 - 2. Hispanic _____
 - 3. Black _____
 - 4. Asian _____
 - 5. American Indian _____
 - 6. Other _____

YES NO N/A

- C. Has your company advertised for applicants since your report? ✓
If so, please attach a list of publications in which ads appeared, the dates of advertising, and copies of such advertisement.
- D. Has there been an effort since your last report to further orientate supervisors and key personnel to the spirit and intent of the program? ✓
If so, please attach a detailed report of such changes
- E. Have there been any adjustments in your job prerequisites of your recruiting and intake procedures? ✓
If so, please attach a narrative of such efforts.
- F. Has any effort been made since your last report in disseminating your policy to all employees or in encouraging them to refer to Minority or Female applicants? ✓
attach a narrative of such efforts.
- G. Are you attaching any other comments or concerns which you would like to have reviewed as part of determining your compliance with your programs? ✓

List all minority contractors/suppliers (Minority Owned Business Enterprises MBE/Women Owned Business Enterprises WBE) with which you have contracted during this reporting period.

NAME OF COMPANY _____
STREET ADDRESS _____
TELEPHONE NUMBER _____
PRODUCTS, SERVICE, AREA OF SCOPE OF WORK: _____

NA

DURATION OF CONTRACT _____
AMOUNT OF CONTRACT _____

NA

REPEAT THE ABOVE INFORMATION ON A SEPARATE SHEET FOR MBE/WBE FIRM WITH WHOM YOU HAVE CONTRACTED.

Figures of Employment Analysis section of this report was obtained from:

	YES	NO
1. Available employment	—	—
2. Visual check	—	—
3. Other (specify) _____	—	—

NA

This Compliance Review Report was prepared and submitted by:

Steve Pittman
Signature
ANNE M. KEVIN, Treasurer
Name and Title
10-1-08
Date

I certify that all answers and information herein contained are true to the best of my knowledge, and I understand that any mis-statement of fact may subject this company to non-compliance procedures.

MARSH

CERTIFICATE OF INSURANCE

CERTIFICATE NUMBER
ATL-001024791-08

PRODUCER

MARSH USA, INC.
3475 PIEDMONT ROAD, N.E.
SUITE 1200
ATLANTA, GA 30305
Attn: Atlanta.Certrequest@marsh.com Fax#212-948-0337

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER OTHER THAN THOSE PROVIDED IN THE POLICY. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES DESCRIBED HEREIN.

COMPANIES AFFORDING COVERAGE

- COMPANY
A Liberty Mutual Insurance Company
- COMPANY
B N/A
- COMPANY
C N/A
- COMPANY
D

664412-ALL-kl-08-09

INSURED

Union Security Insurance Company
d/b/a Assurant Employee Benefits
2323 Grand Blvd.
Kansas City, MO 64108

COVERAGES

This certificate supersedes and replaces any previously issued certificate for the policy period noted below. 2

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

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR OWNERS' & CONTRACTOR'S PROT	TB2-651-004240-038	01/09/08	01/09/09	GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 1,000,000 PERSONAL & ADV INJURY \$ 1,000,000 EACH OCCURRENCE \$ 1,000,000 FIRE DAMAGE (Any one fire) \$ 1,000,000 MED EXP (Any one person) \$ 10,000
A	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS	AS2-651-004240-048	01/09/08	01/09/09	COMBINED SINGLE LIMIT \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE \$
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY \$ EACH ACCIDENT \$ AGGREGATE \$
	EXCESS LIABILITY <input type="checkbox"/> UMBRELLA FORM OTHER THAN UMBRELLA FORM				EACH OCCURRENCE \$ AGGREGATE \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY THE PROPRIETOR/PARTNERS/EXECUTIVE OFFICERS ARE <input type="checkbox"/> INCL <input type="checkbox"/> EXCL OTHER				WC STATUTORY LIMITS OTH-ER EL EACH ACCIDENT \$ EL DISEASE-POLICY LIMIT \$ EL DISEASE-EACH EMPLOYEE \$

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS
Re: The 32nd Annual Kansas City St Patrick's Day Parade

CERTIFICATE HOLDER

The City of Kansas City
P.O. Box 413673
Kansas City, MO 64141

CANCELLATION

SHOULD ANY OF THE POLICIES DESCRIBED HEREIN BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF THE INSURER AFFORDING COVERAGE WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED HEREIN, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER AFFORDING COVERAGE, ITS AGENTS OR REPRESENTATIVES OR THE ISSUER OF THIS CERTIFICATE

MARSH USA INC.
BY: Ted L. Young *Ted L. Young*

MM1(3/02) VALID AS OF: 01/15/08

2008 County Funding Request:

Personal Services:	
Name/Title/Number of Employees	
NA	
Salary	\$
Benefits	\$
Total Personal Services	\$ 0.00

Contractual Services:	
Kansas City, MO Police Department	\$ 2,500.00
National Event Services	\$ 2500.00
	\$
	\$
Total Contractual Services =	\$ 5,000.00

Supplies:	
	\$
	\$
	\$
	\$
	\$
Total Supplies	\$ 0.00

Please provide your potential total agency revenue projections for 2008.

Funding Entity	Source You Will Request Funding From.	Amount	% Of Budget
Federal		\$	0.00%
State		\$	0.00%
Jackson County		\$ 5,000.00	10.00%
Other Counties		\$	0.00%
City		\$ 20,000.00	40.00%
Charity/Donations		\$	0.00%
User Fees		\$	0.00%
Other	Corporate Sponsors	\$ 25,000.00	50.00%
	Total Projected Revenue for 2008	\$50,000.00	100.00%

*K.C. ST. PATRICK'S DAY PARADE
AMENDED*



RECEIVED
OCT 05 2007
JACKSON COUNTY
AUDITOR'S OFFICE
KANSAS CITY, MISSOURI

**OUTSIDE AGENCY FUNDING REQUEST
2008 BUDGET
JACKSON COUNTY, MISSOURI**

Name of Organization: Kansas City St. Patrick's Day Parade Committee

Program Title: The Kansas City St. Patrick's Day Parade

Name and Title: Anne McKeown, Treasurer

Address: 107 W. 104th Street, KCMO 64114

Phone Number: 816.941.2556

Fax Number: 816.505.6720

Email Address of Organization: anne.mckeown@citi.com

Organization Administrator/Contract Administrator: Anne McKeown

Organization Director Name & Title: Jami Byer, President

Tax ID Number: 43-1773363

Prepared By: Anne McKeown **Phone Number:** 816.941.2556

Date Submitted: 10/4/07

Total Amount of Funding Requested fiscal year 2008: \$20,000.00

Describe the main objectives of this organization:

The objective of the KC St. Patrick's Day Parade Committee is to present the parade in a safe and sensible manner while celebrating the heritage and tradition of the Irish in America. The parade is intended as a cultural event for the benefit of the entire metropolitan area, especially Jackson County. As the parade is intended as a cultural event, we encourage participation from other ethnic and cultural organizations. It is the belief of the parade committee that multi-cultural events promote communities of tolerance and acceptance.

2008 County Funding Request:

Personal Services:	
Name/Title/Number of Employees	
NA	
Salary	\$
Benefits	\$
Total Personal Services	\$ 0.00

Contractual Services:	
Kansas City, MO Police Department	\$ 13,000.00
National Event Services	\$ 7000.00
	\$
	\$
Total Contractual Services =	\$ 20,000.00

Supplies:	
	\$
	\$
	\$
	\$
	\$
Total Supplies =	\$ 0.00

Please provide your potential total agency revenue projections for 2008.

Funding Entity	Source You Will Request Funding From.	Amount	% Of Budget	
Federal		\$	0.00%	
State		\$	0.00%	
Jackson County		\$ 7,000.00 20,000	13.46%	31%
Other Counties		\$	0.00%	
City		\$ 20,000.00	38.46%	31%
Charity/Donations		\$	0.00%	
User Fees		\$	0.00%	
Other	Corporate Sponsors	\$ 25,000.00	48.08%	38%
	Total Projected Revenue for 2008	\$52,000.00 65,000	100.00%	

Have you previously received program funding from Jackson County Missouri? yes no

- A. Have you previously received COMBAT funding?
 yes no \$
- B. Have you previously received Mental Health Levy funding?
 yes no \$
- C. Have you previously received Board of Services for the Developmentally Disabled funding?
 yes no \$
- D. Have you previously received Domestic Violence Board funding?
 yes no \$
- E. Have you previously received Housing Resources Commission funding?
 yes no \$
- F. Have you previously received outside agency program funding?
 yes no \$6,510.00

If your agency receives contracts from multiple programs at Jackson County, please separately identify all Jackson County funded programs and contract amounts.

2007:	Indicate Programs Below	
	Outside Agency Funding	\$ 6,510.00
		\$
		\$
		\$
		\$
		\$
		\$
		\$
	Total 2007	\$ 6,510.00

What total sources of funding did your agency receive for 2007? Please be specific.

Funding Entity	Source You Received Funding From.	Amount	% Of Budget
Federal		\$	0.00%
State		\$	0.00%
Jackson County	Outside Agency Funding	\$ 6,510.00	9.00%
Other Counties		\$	0.00%
City	NTDF	\$ 15,000.00	20.74%
Other	Irish Fest	\$ 25,000.00	34.57%
User Fees		\$	0.00%
Other	Corporate Sponsors	\$ 25,600.00	35.40%
	Total Revenue for 2007	\$ 72110.00	100.00%

PROPOSED PROGRAM:

The St. Patrick's Day Parade will be held on March 17, 2008. It will be staged on Pershing and Main and will progress on Pershing to Grand, then North on Grand to 15th Street/Truman Road.

There will be approximately 120 entries and 4,000 participants along with an estimated 200,000 spectators in attendance.

WHY DOES YOUR ORGANIZATION NEED FUNDING FROM JACKSON COUNTY?

The modern St. Patrick's Day Parade has been in the downtown area of Kansas City for over 30 years. The committee is an all-volunteer, non-profit organization and is requesting funding from the City of Kansas City, Jackson County and various corporate sponsors because the cost of producing the parade has substantially increased. In fact, it has become necessary to request funds of greater amounts than in previous years.

TARGET POPULATION:

Our target population is the greater Kansas City metro area as well as visitors from Nebraska, Iowa, Springfield, MO, Columbia, MO, Lawrence, KS, Wichita, KS and St. Louis, MO.

SERVICE DELIVERY AREA:

Please identify your specific geographical service delivery areas:

The entire metropolitan Kansas City, Missouri area is serviced by the Parade. Most specifically, the downtown KCMO area benefits from the additional increase in business from the population of participants and spectators who flock downtown for the Parade.

PARTICIPANTS:

Identify the number of participants by County that this program serves below:

Jackson:

Clay/Platte:

Cass:

Wyandotte/Johnson:

Other: No official records exist tracking the Counties of Origin for our Parade participants and spectators. An educated theory would be that 75% or more come from Jackson County, with the remainder coming from the surrounding Counties.

FUND SEPARATION:

Please indicate what measures your agency will take to ensure that funds received from Jackson County will be utilized for Jackson County residents.

The funds are intended to be utilized to provide security for the parade. The security will be provided for all participants, but the payment of services will go directly to the KCMO Police department, which is a Jackson County entity.

APPROACH & METHOD:

- 1). **List the three (3) main objectives of your program.**
 - (a) **Provide a safe, fun and sensible parade**
 - (b) **Promote Irish heritage and encourage ethnic diversity**
 - (c) **Promote unity and community spirit in the metro area**

- 2). **Detail methods you will use to achieve these objectives.**
 - (a) **We will hold a mandatory logistics meeting that will outline all rules and regulations for participants and parade committee workers.**
 - (a) **We allow no drinking on our floats or in the staging areas by participants and committee workers.**
 - (b) **We require use of the Irish theme by all participants.**
 - (b & c) **We invite and encourage participation from diverse ethnic, political and religious backgrounds.**

EVALUATION:

Brief description of how the success of the program will be evaluated. Please indicate any performance measures or statistics you will use to demonstrate the success of your program.

Our success is measured by:

- The safety of the participants and spectators
- The number of participants who choose to return each year
- The number of spectators that attend
- The quality of the entries*

*The quality of the entries is determined by the panel of volunteer judges.)

NOTIFICATION:

How does your organization make clients, the taxpayers and the media aware of the generous funding received from Jackson County?

We promote our sponsors in the following ways:

- *Logo on our website
- *Logo on all printed material that includes the list of sponsors
- *Banner displayed at all events (Kick-off luncheon, spring concert, golf tournament, The Parade, etc)
- *On-air mention during the telecast of the Parade
- *Word of mouth
- *Priority patronage

COMPLIANCE REPORT FORM

Semi-Annual Report Due Date: 10/04/07

DIRECTIONS FOR COMPLETION: Please fill out form completely. If a question refers to "past report" and this is the first one, place "1st report" in the blank. If a question addresses an area which does not apply to your company, such as (subcontractors), place "N/A" in the blank. Please be sure this and subsequent reports are signed and dated. If you have any questions call our office at 816-881-3302. Mail all reports to:

Mary Lou Smith - CRO
 Compliance Review Officer
 415 E 12th Street, 2nd Floor
 Kansas City, MO 64106
 (816) 881-3302 office (816) 881-3340 fax

I. COMPANY DESCRIPTION

- A. Name of Company Kansas City St. Patrick's Day Parade Committee
- B. Street Address 107 W. 104th Street
- C. City Kansas City State MO Zip 64114
- D. Area Code 816 Telephone Number 941.2556

II. COMPANY STATISTICS

- A. Total Number of Employees 0
- B. Total Number of Employees who are:

1.	Women	<u> </u>	Black	<u> </u>
2.	Hispanic	<u> </u>	American Indian	<u> </u>
3.	Asian	<u> </u>		
- C. Has your company advertised for applicants since your report? YES NO
 NA
If so, please attach a list of publications in which ads appeared the dates of advertising, and copies of such advertisement.
- D. Has there been an effort since your last report to further orientate supervisors and key personnel to the spirit and intent of your program? NA
 NA
If so, please attach a detailed report of such changes.
- E. Have there been any adjustments in your job prerequisites of your recruiting and intake procedures? NA
 NA
If so, please attach a narrative of such efforts.
- F. Has any effort been made since your last report in disseminating your policy to all employees or in encouraging them to refer minority or female applicants? NA
 NA
If so, please attach a narrative of such efforts.
- G. Are you attaching any other comments or concerns which you would like to have reviewed as part of determining your compliance with your programs? YES NO
 X

List all minority contractors/suppliers (Minority Owned Business Enterprises MBE or Women Owned Business Enterprises WBE) with whom you have contracted during this reporting period.

Name of Company None
 Street Address _____
 Telephone Number _____
 Product, Service, Area or Scope of Work _____

 Duration of Contract _____
 Amount of Contract _____

Repeat the above information on a separate sheet for each MBE/WBE firm with whom you have contracted.

Figures of Employment Analysis section of this report was obtained from:

	YES		NO
1. Available employment	_____	NA	_____
2. Visual check	_____	NA	_____
3. Other (specify) _____			

This Compliance Review Report was prepared and submitted by:

Signature

Anne McKeown, Treasurer
Name & Title (typed or printed)

10/04/07
Date

I certify that all answers and information herein contained are true to the best of my knowledge, and I understand that any mis-statement of fact may subject this company to noncompliance procedures.

Certificate of Compliance

Kansas City St. Patrick's Day Parade Committee



Whose Affirmative Action Program has been found to be in compliance with Chapter 6,
Jackson County Code which provides for equal employment practices and promotes equal
employment opportunity by companies doing business in Jackson County.

This certificate is effective for a two (2) month period following its date of execution.

Executed this 8th April 2007

Tom Wylsch

COMPLIANCE REVIEW OFFICER
JACKSON COUNTY, MISSOURI



P.O. Box 413673
Kansas City, Missouri 64141
phone: 816.931.7373

Info@kcirishparade.com
www.kcirishparade.com
A 501© (3) Organization

Kansas City St. Patrick's Day Parade Committee, Inc

Board of Directors 2007-2008

Jami Byer- President
3542 Pennsylvania
KCMO 64111

Gordie Grohmann
5639 Maple
Mission, KS 66202

Erin Kiekbusch-Vice President
7501 Main Street
KCMO 64114

Bob Kearney
7725 W. 97th Street
Overland Park, KS 66212

Anne McKeown-Treasurer
107 W. 104th Street
KC MO 64114

Micheal Mahoney
4840 N Kansas
KC MO 64119

Patti Aylward Kalb-Secretary
7187 Cherokee
Prairie Village, KS 66208

Dan O'Mara
7726 Locust
KC MO 64131

Kerry Browne
4019 Terrace
KC MO 64111

Tom Reagan
11610 McGee
KC MO 64114

PJ Cullinan
430 W 61st Terrace
KC MO 64113

Chuck Denton
25 S. Baltimore
KCKS 66102

Jay Burrus
6 E. 127th
KCMO 64145

Kevin Bundy
409 W. 46th
KCMO 64112

INTERNAL REVENUE SERVICE
DISTRICT DIRECTOR
P. O. BOX 2508
CINCINNATI, OH 45201

DEPARTMENT OF THE TREASURY

Date: **SEP 15 1998**

KANSAS CITY ST PATRICKS DAY PARADE
COMMITTEE INC
C/O KATHY MAGUIRE
11111 BELLEVIEW
KANSAS CITY, MO 64114

Employer Identification Number:
43-1773363

DLN:
17053188065048

Contact Person:
D. A. DOWNING
Contact Telephone Number:
(513) 241-5199

Accounting Period Ending:

December 31

Form 990 Required:

Yes

Addendum Applies:

No

Dear Applicant:

Based on information supplied, and assuming your operations will be as stated in your application for recognition of exemption, we have determined you are exempt from federal income tax under section 501(a) of the Internal Revenue Code as an organization described in section 501(c)(3).

We have further determined that you are not a private foundation within the meaning of section 509(a) of the Code, because you are an organization described in section 509(a)(2).

If your sources of support, or your purposes, character, or method of operation change, please let us know so we can consider the effect of the change on your exempt status and foundation status. In the case of an amendment to your organizational document or bylaws, please send us a copy of the amended document or bylaws. Also, you should inform us of all changes in your name or address.

Since you are not a private foundation, you are not subject to the excise taxes under Chapter 42 of the Code. However, if you are involved in an excess benefit transaction, that transaction might be subject to the excise taxes of section 4958. Additionally, you are not automatically exempt from other federal excise taxes. If you have any questions about excise, employment, or other federal taxes, please contact your key district office.

Grantors and contributors may rely on this determination unless the Internal Revenue Service publishes notice to the contrary. However, if you lose your section 509(a)(2) status, a grantor or contributor may not rely on this determination if he or she was in part responsible for, or was aware of, the act or failure to act, or the substantial or material change on the part of the organization that resulted in your loss of such status, or if he or she acquired knowledge that the Internal Revenue Service had given notice that you would no longer be classified as a section 509(a)(2) organization.

Donors may deduct contributions to you as provided in section 170 of the Code. Bequests, legacies, devises, transfers, or gifts to you or for your use are deductible for federal estate and gift tax purposes if they meet the

Letter 947 (DO/CG)

KANSAS CITY ST PATRICKS DAY PARADE

applicable provisions of Code sections 2055, 2106, and 2522.

Contribution deductions are allowable to donors only to the extent that their contributions are gifts, with no consideration received. Ticket purchases and similar payments in conjunction with fundraising events may not necessarily qualify as deductible contributions, depending on the circumstances. See Revenue Ruling 67-246, published in Cumulative Bulletin 1967-2, on page 104, which sets forth guidelines regarding the deductibility, as charitable contributions, of payments made by taxpayers for admission to or other participation in fundraising activities for charity.

In the heading of this letter we have indicated whether you must file Form 990, Return of Organization Exempt From Income Tax. If Yes is indicated, you are required to file Form 990 only if your gross receipts each year are normally more than \$25,000. However, if you receive a Form 990 package in the mail, please file the return even if you do not exceed the gross receipts test. If you are not required to file, simply attach the label provided, check the box in the heading to indicate that your annual gross receipts are normally \$25,000 or less, and sign the return.

If a return is required, it must be filed by the 15th day of the fifth month after the end of your annual accounting period. A penalty of \$20 a day is charged when a return is filed late, unless there is reasonable cause for the delay. However, the maximum penalty charged cannot exceed \$10,000 or 5 percent of your gross receipts for the year, whichever is less. For organizations with gross receipts exceeding \$1,000,000 in any year, the penalty is \$100 per day per return, unless there is reasonable cause for the delay. The maximum penalty for an organization with gross receipts exceeding \$1,000,000 shall not exceed \$50,000. This penalty may also be charged if a return is not complete, so be sure your return is complete before you file it.

You are required to make your annual return available for public inspection for three years after the return is due. You are also required to make available a copy of your exemption application, any supporting documents, and this exemption letter. Failure to make these documents available for public inspection may subject you to a penalty of \$20 per day for each day there is a failure to comply (up to a maximum of \$10,000 in the case of an annual return).

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

You need an employer identification number even if you have no employees. If an employer identification number was not entered on your application, a number will be assigned to you and you will be advised of it. Please use that number on all returns you file and in all correspondence with the Internal

KANSAS CITY ST PATRICKS DAY PARADE


Revenue Service.

If we have indicated in the heading of this letter that an addendum applies, the enclosed addendum is an integral part of this letter.

Because this letter could help resolve any questions about your exempt status and foundation status, you should keep it in your permanent records.

If you have any questions, please contact the person whose name and telephone number are shown in the heading of this letter.

Sincerely yours,



~~Assistant~~ District Director

State of Missouri

EXEMPTION FROM MISSOURI SALES AND USE TAX ON PURCHASES AND SALES

Issued to:

KANSAS CITY ST PATRICKS DAY PARADE COMMITTEE
11111 BELLEVIEW
KANSAS CITY MO 64114

Missouri Tax I.D.
Number: 16608569

Effective Date:
07/11/2002

Your application for sales/use tax exempt status has been approved pursuant to Section 144.030.2(20), RSMo. This letter is issued as documentation of your exempt status.

Purchases by your Organization are not subject to sales or use tax if within the conduct of your Organization's exempt civic or charitable functions and activities. When purchasing with this exemption, furnish all sellers or vendors a copy of this letter. This exemption may not be used by individuals making personal purchases.

Agents or contractors may not claim or benefit from your Organization's exempt status. Contractors paying for construction materials to fulfill a contract with your Organization must pay sales tax on all such materials. Only purchases of construction materials that are directly billed to your Organization may be purchased exempt from sales tax.

Sales by your Organization are not subject to sales or use tax if within your Organization's exempt civic or charitable functions and activities. If your Organization engages in a competitive commercial business that serves the general public, even if the profits are used for purposes of your exempt function, you must obtain a Missouri Retail Sales Tax License and collect and remit sales tax.

This is a continuing exemption subject to legislative changes and review by the Director of Revenue. If your Organization ceases to qualify as an exempt organization, this exemption will cease to be valid. This exemption is not assignable or transferable. It is an exemption from sales and use taxes only and is not an exemption from real or personal property tax.

Any alteration to this exemption letter renders it invalid.

If you have any questions regarding the use of this letter, please contact the Taxation Bureau, P.O. Box 3300, Jefferson City, MO 65105-3300, phone 573-751-2836.



Fax

To: Cindy Wallace **From:** Anne McKeown 816.420.1087
Fax: 816-881-3340 **Pages:** 3, including cover
Phone: **Date:** 10/08/2007
Re: Tax Exempt doc for St. Pat's Parade Com. CC:

Urgent For Review Please Comment Please Reply

Cindy,

Attached is the Statement of Property Assessment from the KC ST. Pat's Parade Committee as requested by the Business Assessment Department. Also attached is the Tax Clearance Form that should suffice for the Tax Exemption document required as part of the application for funding.

Please call or email that this was received and acceptable.

Thanks for all your help!

Anne

anne.mckeown@citi.com

10/08/2007 13:05 816-881-4680

PERSONAL PROPERTY TRANSACTION FORM

DELINQUENT AFTER DEC. 31

NUMBER	67296
--------	--------------



YEAR	06
TYPE ACCOUNT	<input type="checkbox"/> INDIVIDUAL <input checked="" type="checkbox"/> BUSINESS <input type="checkbox"/> MER-MFG

ACTION TAKEN (CHECK ONE ONLY)

<input checked="" type="checkbox"/> TAX CLEARANCE	<input type="checkbox"/> REPLACEMENT BILL	<input type="checkbox"/> DUP. RECEIPT	<input type="checkbox"/> DELETE
<input type="checkbox"/> NEW ACCOUNT	<input type="checkbox"/> ADJUSTMENT	<input type="checkbox"/> CORRECTION	<input type="checkbox"/>

ACCOUNT NUMBER	KEY/BILL NUMBER	LEVY CODE	SIC CODE 813	PCS	RSN	ITD	DATE 01/8/07	EMP. ID
----------------	-----------------	-----------	---------------------	-----	-----	-----	---------------------	---------

BUSINESS OWNERSHIP DATA

NAME	LAST	FIRST	MIDDLE	SUFFIX	HOME

BUSINESS SITUS ADDRESS

107 St. 104th St.

RESIDENTIAL ADDRESS

**Kansas City St. Patrick's Day Parade Committee
c/o Anne McKeown
107 St. 104th St.
Kansas City, MO 64114**

NOTES

**This all-volunteer organization has no personal or real property
NO TAXES DUE
see attached letter**

<input checked="" type="checkbox"/> TAX CLEARANCE	NO PERSONAL PROPERTY TAX DUE FOR YEAR 2006 + 2007
<input type="checkbox"/> NO VEHICLE OWNED JAN. 1	<input type="checkbox"/> OTHER-SEE NOTES ABOVE
<input type="checkbox"/> LIVED	JAN. 1

VEHICLE #		ACTN	KOV	MAKE	SERIES	CL	YEAR	ST	VALUE	ACTN	KOV	MAKE	SERIES	CL	YEAR	ST	VALUE

FARM ANIMALS-30	KIND	# CUR	# PRIOR	VAL CUR	VAL CERT	VAL PRIOR
tax clearance for 2006 + 2007						

SCHEDULE TOTALS	TYPE CODE	CURRENT VALUE
TOTAL		

SCHEDULE TOTALS	AGENCY	Fund #	AMOUNT
SCHOOL:			
FIRE:			
CITY:			
JR. COLLEGE:			
LIBRARY:			
WATER:			
MENTAL HEALTH:			
COUNTY:			
HANDICAP WKSH:			
STATE-BLIND:			
SPECIAL LEVY:			
BASE TAX			
INTEREST	%		
MM PENALTY	%		
SUB-TOTAL			
COLLECT. DOM.	2%		
MM LICENSE YR.			
TOTAL			
PREV. PAY. ON:			
<input type="checkbox"/> BAL. DUE	<input type="checkbox"/> REFUND		

FARM MACHINERY-40	TYPE	VAL CUR	VAL CERT	VAL PRIOR
AGGREGATE				

PRIOR ASSESSED VALUE:	NEW TAXABLE VALUE:
SIGNATURE (TAXPAYER)	ACTION CODE/CTL/CASE #
NAME	DATE

<input type="checkbox"/> DUPLICATE RECEIPT	YEAR	IN ACCORDANCE WITH MISSOURI STATUTE (20.010 (RVA), 1) (REVISED 1978) I.E. MR. JACKSON COUNTY IS REQUIRED TO COLLECT A FEE OF \$1.00 FOR EACH DUPLICATE RECEIPT ISSUED
<input type="checkbox"/> FEE \$1.00	<input type="checkbox"/> INDIVIDUAL <input type="checkbox"/> BUSINESS PERSONAL PROPERTY	

Originator's Signature: **[Signature]** ph 816/881.4672

Link Name: **[Signature]**

JACKSON COUNTY, MISSOURI TAXPAYER SERVICES 615 E. 12th ST. K.C., MO. 64108

VALIDATION

WHITE TAXPAYER SERVICES BLUE TAXPAYER CANARY: FILE COPY

JC 10/8/07



P.O. Box 413673
Kansas City, Missouri 64141
phone: 816.931.7373

info@kcirishparade.com
www.kcirishparade.com
A 501(c)(3) Organization

Kansas City St. Patrick's Day Parade Committee, Inc 2007 Statement of Property Assessment

Organization Name:

Kansas City St. Patrick's Day Parade Committee

Name & Title of Agent for the Organization:

Anne McKeown, Treasurer

Physical Address:

C/O Anne McKeown
107 W. 104th Street
KCMO 64114

Fax:

816.505.6720

The Kansas City St. Patrick's Day Parade Committee, Inc. is a 501(c)(3) organization. It is comprised of an all-volunteer staff that owns no property, vehicles or equipment. Sponsors and/or volunteers donate all meeting spaces and use of equipment. Therefore, we have no taxable property and are not subject to taxation.

It is our request to receive a waiver of the required tax document in order to apply for Outside Agency Funding from Jackson County for the 2008 Kansas City St. Patrick's Day Parade.

A handwritten signature in cursive script, appearing to read "Anne McKeown".

Anne McKeown
816.941.2556