TOURISM PROMOTION PROGRAM • APPLICATION FOR FUNDING

| · · · |
|---|
| Project Title: POINT NO POINT LIGHT STATION - MAGGS HOUSE |
| Project Dates: Beginning: 1-/-21 Ending: 12-31-21 |
| Name of Organization us LIGHTHOUSE SociET Web Site USLHS. ORG |
| Mailing Address: 9005 POINT NO POINT RD., NE, HANSVILLE, WA 98340 |
| Contact Person: Jeff GALES E-Mail: jeffe USLHS. 026 Phone: 415-362-7255 |
| Amount Requested: \$ 20,500. Total Project Cost: \$ 21,000. |
| Portion of Total Project Cost Requested: |
| Signature of Authorized Representative |
| 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

TO THE OWNER SECTION

UNITED STATES LIGHTHOUSE SOCIETY

9005 Point No Point Rd. NE Hansville, WA 98340 Phone: 415-362-7255 www.uslhs.org

\$4,000.00

Lodging Tax Request: Organization / Point No Point Light Station

Budget

| Item Maggs House | County Lodging Tax |
|---|---|
| Relocate Livingroom Picture Window to Bedroom - 6x9 Feet Install Sliding Glass Door in Living Room - 72"x 80" Install Exterior Deck at Rear of Cottage - 10'x14' Remodel Kitchen Cabinets Remodel Kitchen Countertops | \$5,500 \$3,000 \$5,000 \$3,500 \$4,000 |
| Subtotal | : \$21,000 |
| TOTAL Requested | : \$21,000.00 |
| Grantee Match U.S. Lighthouse Society Project Management U.S. Lighthouse Society Administrative | \$2,500.00 \$1,500.00 |

TOTAL Match:

EIN: 94-2919484

ate: FED 27 1986

Our Letter Dated: March 1984

Unted States Lighthouse Society
13: Street Elmo Way
Sa: Francisco, Ca 94127

Person to Contact: Taxpayer Service Representative

Contact Telephone Number: (800) 424-1040

Der Applicant:

This modifies our letter of the above date in which we stated that you would be treated as an organization which is not a private foundatio until the expiration of your advance ruling period.

Based on the information you submitted, we have determined that you are not a private foundation within the meaning of section 509(a) of the Intrnal Revenue Code, because you are an organization of the type described in section 509(a)(1) and 170(b)(1)(A)(vi). Your exempt status under section 501(c)(3) of the code is still in effect.

Grantors and contributors may rely on this determination until the Internal Revenue Service publishes notice to the contrary. However, a grantor or a contributor may not rely on this determination if he or she was n part responsible for, or was aware of, the act or failure to act that resulted in your loss of section 509(a)(l) and 170(b)(l)(A)(vi) status, or acquired knowledge that the Internal Revenue Service had giver notice that you would be removed from classification as a section 509(a)(l) and 170(b)(l)(A)(vi) organization.

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

If you have any questions, please contact the person whose name and telepione number are shown above.

Sincerely yours,

District Director

January 2020)

Return of Organization Exempt From Income Tax

OMB No. 1545-0047 2019

tment of the Treasury al Revenue Service

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

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

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

Open to Public Inspection

| For the | e 2019 cale | ndar year, or tax year beg | inning | , 2019, a | and ending | | , 20 | | |
|---|---------------------------------------|---------------------------------------|--|----------------------------------|------------------|------------------------|--|--|--|
| theck if | applicable: | C Name of organization | Inited States Lighth | ouse Society Inc | | D Empl | oyer identification number | | |
| ddress | change | Doing business as | | | | | 94-2919484 | | |
| lame ch | nange | Number and street (or | P.O. box if mail is not delivered to stree | t address) | Room/suite | E Telep | hone number | | |
| nitial return 9005 Point No Point Road NE | | | | | | | (415) 362-7255 | | |
| inal reti | urn/terminated | G Gross | G Gross receipts | | | | | | |
| mende | d return | Hansville, WA | 98340 | | | \$. | 2,073,571 | | |
| | ion pending | | principal officer: Wayne Wheel | er | H(a | Is this a group return | for subordinates? X Yes No | | |
| .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | , , , , , , | Same as C abo | • | | 1 | Are all subordinate | | | |
| ax-exe | mpt status: | X 501(c)(3) 501(c)(|) ◀ (insert no.) | (1) or 527 STM1 | 31 | if "No," attach a lis | st. (see instructions) | | |
| Vebsite | · · · · · · · · · · · · · · · · · · · | ww.uslhs.org | <u> </u> | | - | Group exemption | | | |
| | | | ssociation Other | L Year of forma | | M State of leg | The second secon | | |
| rtl | Summ | | | | | | | | |
| 1 | | | ssion or most significant activit | es: Preservation | n of Ligh | t station | S | | |
| | | outlier and organization of the | | | | | | | |
| | | | | | - | | | | |
| 1 | | | | | | | | | |
| 1 2 | Chook this | hay b D if the ergenizet | on discontinued its operations | or disposed of more than | 25% of its n | at assets | | | |
| 2 | | | verning body (Part VI, line 1a) | · | | 1 | 9 | | |
| 3 | | | ers of the governing body (Pa | | | | 8 | | |
| 4 | | | | | | 5 | 3 | | |
| 5 | | | in calendar year 2019 (Part V | | | 6 | 10 | | |
| 6 | | ber of volunteers (estimate | | | | | | | |
| 7a | | | m Part VIII, column (C), line 12 | | | 7a | 0 | | |
| ļ b | Net unrel | ated business taxable inco | ne from Form 990-T, line 39 | | | | 0 | | |
| | | | | | - | ior Year | Current Year | | |
| 8 | Contributi | ions and grants (Part VIII, li | ne 1h) | | | 202,411 | 208,543 | | |
| 9 | Program | service revenue (Part VIII, | ine 2g) | | | 852,834 | 1,282,417 | | |
| 10 | Investmen | nt income (Part VIII, column | (A), lines 3, 4, and 7d) | | | (18,515) | | | |
| 11 | Other rev | enue (Part VIII, column (A) | lines 5, 6d, 8c, 9c, 10c, and 11 | le) | | 45,458 | 74,256 | | |
| 12 | Total reve | enue - add lines 8 through 1 | 1 (must equal Part VIII, column | (A), line 12) | | 1,082,188 | 1,658,794 | | |
| 13 | Grants ar | nd similar amounts paid (Pa | rt IX, column (A), lines 1-3) | | | | 0 | | |
| 14 | Benefits p | paid to or for members (Par | t IX, column (A), line 4) | | | | 0 | | |
| 15 | Salaries, | other compensation, employ | ee benefits (Part IX, column (| A), lines 5-10) | | 201,200 | 219,987 | | |
| 16a | a Professio | onal fundraising fees (Part I | K, column (A), line 11e) | | 0.040 | | 0 | | |
| 1 | | draising expenses (Part IX, | | 0 | EVALS! | | | | |
| 17 | | | , lines 11a-11d, 11f-24e) | | row. | 964,167 | 1,356,099 | | |
| 18 | | | ust equal Part IX, column (A), li | | | 1,165,367 | 1,576,086 | | |
| 19 | | | ne 18 from line 12 | | | (83,179) | 82,708 | | |
| | TOTOTIGO | тово одражава с саришести | | | | g of Current Year | End of Year | | |
| 20 | Total ass | ets (Part X line 16) | | | - | 1,225,164 | 1,243,792 | | |
| 21 | | ' | | | | 503,541 | 439,355 | | |
| | | | act line 21 from line 20 | | | 721,623 | 804,437 | | |
| rt II | | | act line 21 horn line 20 | | | 721,023 | 001,137 | | |
| | | ture Block | return, including accompanying schedul | es and statements, and to the be | st of my knowled | ne and belief, it is | | | |
| correct | t, and complete | . Declaration of preparer (other than | officer) is based on all information of w | hich preparer has any knowledge | b. | , | | | |
| | 40 | | | | | | | | |
| | | ff Gales | | | | | ate | | |
| n | | nature of officer | | | | 0. | aic | | |
| re | | ff Gales, Executi | ve Director | | | | | | |
| | Тур | e or print name and title | | | | | | | |
| | Print/Typ | e preparer's name | Preparer's signature | Date | | Check X if | PTIN | | |
| d | Duane | e Anderson | | 07-31-2 | 020 | self-employed | P00003800 | | |
| pare | er Firm's na | me > Duane | E Anderson CPA | | Firm's | EIN > | | | |
| e On | ly Firm's ad | idress ▶ 261 Ma | rgaret Street Suit | e 3 | Phon | е по. | | | |
| | | Port I | udlow WA 98365 | | | 360- | -437-1392 | | |
| the II | DC discuss | | shown above? (see instruction | ne) | | 828282023245A | X Yes No | | |

| m! | 990 (2019) United States Lighthouse Society Inc | 94-2919484 | Page 2 |
|--------|---|----------------|--------|
| - | Statement of Program Service Accomplishments | 1. | |
| 96 H 4 | Check if Schedule O contains a response or note to any line in this Part III | | 🗆 |
| | Briefly describe the organization's mission: | | |
| | 시네 (1) 1 (1 | | |
| | Preservation of Light stations | | |
| | | | |
| | | | |
| | | | |
| | Did the organization undertake any significant program services during the year which were not listed on the | | |
| | prior Form 990 or 990-EZ? | Yes | No |
| | If "Yes," describe these new services on Schedule O. | | |
| | Did the organization cease conducting, or make significant changes in how it conducts, any program | F 8 | |
| | services? | Yes | No |
| | If "Yes," describe these changes on Schedule O. | | |
| | Describe the organization's program service accomplishments for each of its three largest program services, as measur | ed by | |
| | expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to | | |
| | | , , , | |
| | the total expenses, and revenue, if any, for each program service reported. | | |
| ı | (Code:) (Expenses \$, 1,169,756 including grants of \$) (Revenue | \$ 1,282,4 | 417) |
| | Assist, in every possible way, the restoration and preservation of America's | ration To so | TUA 20 |
| | research the history of light stations, lightships, and related aids to navi | restaunties of | those |
| | the means of communication between all who care about the preservation and | restoration of | tnese |
| | unique symbols of our maritime heritage. | | |
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| ч | Other program services (Describe on Schedule O.) | | |
| u | (Expenses \$ including grants of \$) (Revenue \$ |) | |
| _ | | | |
| 6 | Total program service expenses ▶ 1,169,756 | | |



Lodging Tax Request: Organization/Event Description

Final length may not exceed two pages

Project Title: Point No Point Lighthouse (Station) - Maggs House

Name of Organization: U.S. Lighthouse Society

Size of staff and board: 12

Size of Volunteer Base: 30 (in Kitsap)

Geographic Area Served: Northern Kitsap County

Demographic Served: Everyone

Type of Service Provided:

Description of Proposed Project:

Beginning in 2009, the U.S. Lighthouse Society started the process to restore the historic structures on site and create access to them. The four buildings include: The lighthouse, keeper's residence, keeper's workshop and historic Maggs House (home of the 1st lighthouse keeper at Point No Point). All four projects were completed some years ago through funding attained by grants the Society applied for and received which include the National Trust for Historic Preservation, the Seattle Foundation and the Kitsap Community Foundation. Private donations were also received and over the years the U.S. Lighthouse Society has contributed funds to annual upkeep. The historic Maggs House in need of rehabilitation in order to maximize its potential as a Northern Kitsap County vacation rental.

History of Organization/Event:

The U.S. Lighthouse Society is a national nonprofit corporation that helped to kick-start the lighthouse preservation movement in America over 35 years ago. The Society has been headquartered at the Point No Point Light Station in Hansville, WA since 2008. Education is at the forefront of its operations and to that end the Society produces a highly respected lighthouse journal, operates educational excursions, extends capital grants to lighthouses annually, provides research and educational services (utilizing its extensive archive and website) to anyone looking to learn more about lighthouse history and tackles specific lighthouse restoration projects nationally. The Society is the proud recipient of numerous preservation awards including a special commendation from The White House. Today, the U.S. Lighthouse Society is made up of dedicated members around the world all contributing to its mission in a variety of ways. The Society is committed to continuing to serve as an important voice for those who are passionate about lighthouse preservation, and is dedicated to making sure that these national maritime treasures survive for future generations.

The U.S. Lighthouse has a great deal of experience working on the Point No Point Light Station and our direct involvement over the past 12 years gives us a unique perspective and the experience necessary to facilitate important rehabilitation. During the initial restoration work, each phase of the project received a tremendous amount of press statewide. This included newspaper articles, television news, radio broadcasts and PSAs to mention a few. The exposure statewide and locally was important as the vast majority of visitors to the property are local or from surrounding counties. These projects were also captured nationally in magazines and other media outlets. We will make sure that future work receives the same exposure – greater in fact, drawing attention to Kitsap County, specifically Northern Kitsap, as a tourist destination. The U.S. Lighthouse Society will create press releases, news articles, engage social media and spread the word for maximum press coverage. The Point No Point Lighthouse is the only lighthouse in Kitsap County and the first to be constructed on Puget Sound making it extremely special in WA state. The park and beach surrounding the historic structures are second to none and a source of great pride for Kitsap County residents. This property, with its breathtaking scenery and lovely lighthouse, is capable of attracting media like no other, ultimately benefiting tourism in Kitsap County.

The U.S. Lighthouse Society operates two successful vacation rentals at the Point No Point Light Station. The success of prior restoration efforts were measured by a substantial increase in reservations at Point No Point as well other vacation homes in the area who benefited from the project and the press it received. There was also a marked increase in the number of people who visited the lighthouse which is tracked carefully by docents. Park and beach goers who do not check in at the lighthouse also increased during each phase of restoration and were tracked by the number of cars parked on site extending to overflow. The U.S. Lighthouse Society expects the same results with this new rehabilitation proposal with the numbers actually being greater due to park infrastructure improvements which allow for more parking and the construction of "The Point" hotel. The Point No Point Light Station currently enjoys approximately 40,000 visitors annually, and this number is projected to grow with the right press, increasing visitation especially during off season months (October through April) tracked by the U.S. Lighthouse Society who is on site. Upon completion of this rehabilitation project, we would expect annual visitation to jump at least 10% with a rise in lodging bookings in Northern Kitsap.

Scope of Work:

This project is straight forward in the sense that our goal is to improve the experience of vacationing at the Maggs House for Kitsap county visitors. This includes improving the view, adding outdoor space and making improvements to the extremely dated kitchen. All work will be proposed will adhere to Washington State Historic Preservation guidelines and project benchmarks will be established by the U.S. Lighthouse Society in order to ensure rehabilitation goals are being met and are on budget.

Project Timeline:

It is our goal to complete all the work by April 2021, in advance of the busy summer season.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 01/14/2019

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

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

| RODUCER | CONTACT NAME: | | | | | |
|--|--|-------------------------|--|--|--|--|
| ABD INSURANCE AND FIN SVCS/PHS i2813251 The Hartford Business Service Center 3600 Wiseman Blvd San Antonio, TX 78265 | PHONE (866) 467-8730 FAX (888) (A/C, No, Ext): | | | | | |
| | E-MAIL ADDRESS: | | | | | |
| | INSURER(S) AFFORDING COVERAGE NAIC | | | | | |
| NSURED | INSURER A: The Hartford Casualty | Insurance Company 29424 | | | | |
| J.S. LIGHTHOUSE SOCIETY | INSURER B : | | | | | |
| 1005 POINT NO POINT RD N E 1ANSVILLE ,WA 98340 | INSURER C: | | | | | |
| | INSURER D: | | | | | |
| | INSURER E: | | | | | |
| | INSURER F: | | | | | |

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

| NSR LTR | TYPE OF INSURANCE | ADDL INSR | SUBR | POLICY NUMBER | POLICY EFF (MM/DD/YYYY) | POLICY EXP (MM/DD/Y YYY) | LIMITS | | |
|------------|---|--------------|-------------------|---------------|----------------------------|-----------------------------------|-------------------------------------|---|-------------|
| -IK | COMMERCIAL GENERAL LIABILITY | INSK | VVVD | | (MINIODE TTTT) | (MIN) | EACH OCCURRENCE | \$2,000,000 | |
| A | CLAIMS-MADE X OCCUR | | | | | | | DAMAGE TO RENTED PREMISES (Ea occurrence) | \$300,000 |
| | x General Liability | | | | | MED EXP (Any one person) | \$10,000 | | |
| | ^ - | x | | 52 SBA FV9869 | 03/06/2018 | 03/06/2019 | PERSONAL & ADV INJURY | \$2,000,000 | |
| | GEN'L AGGREGATE LIMIT APPLIES PER: | | ^ | | 02 02.11 1 0000 | 30.00.2010 | | GENERAL AGGREGATE | \$4,000,000 |
| | POLICY PRO- X LOC | | | | | | PRODUCTS - COMP/OP AGG | \$4,000,000 | |
| | OTHER: AUTOMOBILE LIABILITY | | | Mark Control | | | COMBINED SINGLE LIMIT (Ea accident) | \$2,000,000 | |
| | ANY AUTO | | | | | | BODILY INJURY (Per person) | | |
| | ALL OWNED SCHEDULED | | | 52 SBA FV9869 | 03/06/2018 | 03/06/2019 | BODILY INJURY (Per accident) | | |
| | X AUTOS NON-OWNED AUTOS AUTOS AUTOS | | 02037.1 70000 | | | PROPERTY DAMAGE (Per accident) | | | |
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| | DED RETENTION\$ | | 1 | 15 | | | | | |
| | WORKERS COMPENSATION | | | | | | PER OTH- | | |
| Α | AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below | | | | | | E.L. EACH ACCIDENT | \$1,000,000 | |
| | | | N/A 52 SBA FV9869 | 52 SBA FV9869 | 03/06/2018 | 03/06/2019 | E.L. DISEASE -EA EMPLOYEE | \$1,000,000 | |
| | | | | | | E.L. DISEASE - POLICY LIMIT | \$1,000,000 | | |
| Α | EMPLOYMENT PRACTICES LIABILITY | | | 52 SBA FV9869 | 03/06/2018 | 03/06/2019 | Each Claim Limit Aggregate Limit | \$5,000 \$5,000 | |

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Those usual to the Insured's Operations. Certificate Holder is an Additional Insured per the Business Liability Coverage Form SS0008 attached to this policy.

| CERTIFICATE HOLDER | CANCELLATION |
|--|--|
| KITSAP COUNTY PARKS 614 DIVISION ST PORT ORCHARD WA 98366-4614 | SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. |
| TONT SKOTUNG TUNESCOOL TO | Susan S. Castaneda |

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