

City and Borough of Sitka
ANNUAL GRANTS FROM GENERAL FUND
SUMMARY SHEET

Name of Organization: Sitka Cancer Survivors Society Inc.

Alaska State Business License Number (if applicable): _____

Name of Contact Person: Carolyn Fredrickson

Phone: [REDACTED] Email: [REDACTED]

Mailing address: [REDACTED]

Grant Category (check either annual or special emergency grant, and check type of services for annual grant):

- Annual Grant:
 - Human Services or
 - Cultural and Educational Services or
 - Community Development
- Special Emergency Grant

Dollars Requested: \$10,000

Match Dollars Committed: _____ Percentage: _____

Sources of Matched Dollars: _____

Brief Description of the Purpose of the Grant: Funds would be used to revitalize, replace, repair and improve signage for the Path of Hope. The goal is to assist members of the public in locating the park and include educational signage that is inclusive.

I, Carolyn Fredrickson, do hereby certify that all information provided for this grant application is accurate and complete to the best of my knowledge.

Name: Carolyn L. Fredrickson

Title: President Date: 7/31/2024

Project Description

Sitka Cancer Survivor's Society's (SCSS) mission is to honor, educate, comfort and inspire individuals and families affected by cancer. The Path of Hope is a collaborative park created in partnership with the City of Sitka and Sitka Trail Works.

We are requesting funds under the Cultural and Educational Services category. Our goal is to revitalize the Path of Hope by planning, designing, replacing, increasing and improving signage for the park. Cancer does not discriminate. Everyone is affected by cancer at some time in their life and we wish to have the park feel inclusive in our support for all who struggle with cancer.

The Path of Hope was intentionally designed to be an inspirational park to assist our community members facing cancer providing them with a quiet uplifting space for reflection and to honor cancer survivors. We have seen a drastic increase in request for mini-grants from our community. Over the last two years the numbers of requests have doubled. As such, there is more need for people to know about our community park and how to find it.

This new signage would be inclusive of native translations alongside English to better support our native neighbors struggling with cancer including a land acknowledgement. There is research available to documents higher survival rates for native populations when they are supported by their culture and art.

Statement of Need

The original benches and signage were placed in 2006. Since then, our southeast weather, vandalism and time have taken their toll.

The original signs were donated by Sitka Trail Works using their ATI grant. We have been in contact with Sitka Trail Works and they expressed their willingness to assist us with signage planning, placement and design once we can obtain funding.

Our signage plans include one large educational and directional sign to be placed on the Moller Field side to be visible from the upper parking lot by the Moller Baseball Field. Additional directional signage would be designed and placed to assist folks in locating the park as well as replacing damaged placards inside the park.

Organizational Capacity

SCSS has a long successful history of working collaboratively with agencies in our community. We have not received funding from CBS General Fund Grants for Non-Profits in the past.

All services provided by SCSS are done through volunteer efforts. We have no paid staff. We have a board of eight very active members who meet monthly to manage our affairs. Three members of which are original founding members as noted by an asterisk.

*Carolyn Fredrickson- Board President

*Candi Barger – Vice President

Jill Scheidt- Secretary

Patti MacPike-Treasurer

***Bonnie Richards- Quilt Sales**

Shannon Callahan- Path of Hope Guardian

Gail Roderick- Path of Hope Guardian

Pam Samuelson- Communications Director

Our organization provides mini-grants to Sitkans for up to five years who are diagnosed with Cancer. Additionally, we provide and offer support to them and their families through connecting them with other supporting agencies, sharing educational information and networking.

We are supported generously by Sitkans throughout the year who attend and participate in our fundraisers. Currently, we have received \$3000 from the White Elephant along with \$486.62 from the USCG Spouse & Wives Club grants to be used for mini-grants to individuals in need.

Company name: Sitka Cancer Survivor's Society, Inc.

Budget name: Budget_FY24_P&L

Budget type: Profit and loss

Period: FY 2024 (Jan 2024 - Dec 2024)

Consolidated

Accounts	Budget totals
FUNDRAISER EVENTS	\$14975.00
Get Your Pink On	\$5500.00
Mini grant income	\$4000.00
Total FUNDRAISER EVENTS	\$24475.00
2693-WFsv	\$750.00
Total Interest Income	\$750.00
NON-FUNDRAISER DONATIONS	\$1000.00
Board Member Contributions	\$900.00
Business/Group Donations	\$4668.09
In Memory Of Donations	\$1000.00
Individual Donations	\$1183.63
Total NON-FUNDRAISER DONATIONS	\$8751.72
RESTRICTED REVENUE	\$0.00
OWQG Raffle	\$9000.00
Raffle Tickets	\$1000.00
Total OWQG Raffle	\$10000.00
Path of Hope	\$10000.00
Total RESTRICTED REVENUE	\$20000.00
Sales of Product Revenue	\$500.00
Total Income	\$54476.72
Fundraiser Expense	\$350.00
Mini-Grant Payments	\$50000.00
Office expense	\$1750.00
Bank charges	\$-86.32
Meeting expense	\$264.00
Postage	\$342.00
Software	\$1018.50
Supplies	\$89.74
Total Office expense	\$3377.92
Organization Expense	\$0.00
Admin	\$500.00
Insurance	\$1200.00
Total Organization Expense	\$1700.00
Path of Hope Maintenance	\$400.00
Total Artwork	\$0.00
Signage	\$10000.00
Total Path of Hope Project	\$10000.00
Payroll Expenses	\$0.00
Printing	\$500.00
Square Fees	\$75.00
Total Expense	\$66402.92
Total Other Expense	\$0.00
Total Net Income	\$-11926.20

Wednesday, July 31, 2024 at 10:50 AM AKDT

Sitka Cancer Survivor's Society, Inc.

Statement of Financial Position

As of July 31, 2024

	TOTAL
ASSETS	
Current Assets	
Bank Accounts	
3mo CD Acct 2006	5,000.00
4mo CD Acct 2006	10,000.00
6878ck-Wells	23,015.79
Total Bank Accounts	\$38,015.79
Accounts Receivable	
Accounts receivable	0.00
Total Accounts Receivable	\$0.00
Other Current Assets	
Undeposited Funds	0.00
Total Other Current Assets	\$0.00
Total Current Assets	\$38,015.79
TOTAL ASSETS	\$38,015.79
LIABILITIES AND EQUITY	
Liabilities	
Current Liabilities	
Other Current Liabilities	
Quilt Raffle Tickets	1,834.84
Total Other Current Liabilities	\$1,834.84
Total Current Liabilities	\$1,834.84
Total Liabilities	\$1,834.84
Equity	
Opening Bal Equity	8,681.86
Unrestrict (retained earnings)	37,862.80
Net Revenue	-10,363.71
Total Equity	\$36,180.95
TOTAL LIABILITIES AND EQUITY	\$38,015.79

Sitka Cancer Survivor's Society, Inc.

Statement of Financial Position Summary

As of December 31, 2023

	TOTAL
ASSETS	
Current Assets	
Bank Accounts	46,544.66
Accounts Receivable	0.00
Other Current Assets	0.00
Total Current Assets	\$46,544.66
TOTAL ASSETS	\$46,544.66
LIABILITIES AND EQUITY	
Liabilities	
Current Liabilities	
Other Current Liabilities	0.00
Total Current Liabilities	\$0.00
Total Liabilities	\$0.00
Equity	46,544.66
TOTAL LIABILITIES AND EQUITY	\$46,544.66

Sitka Cancer Survivor's Society, Inc.

Statement of Activity

January - July, 2024

	TOTAL
Revenue	
NON-FUNDRAISER DONATIONS	
Board Member Contributions	1,300.00
Business/Group Donations	4,581.62
Individual Donations	3,370.00
Total NON-FUNDRAISER DONATIONS	9,251.62
RESTRICTED REVENUE	
OWQG Raffle	
T-Shirt Sales	135.00
Total OWQG Raffle	135.00
Total RESTRICTED REVENUE	135.00
Total Revenue	\$9,386.62
GROSS PROFIT	\$9,386.62
Expenditures	
Fundraiser Expense	446.39
Mini-Grant Payments	18,000.00
Office expense	35.18
Postage	136.00
Total Office expense	171.18
Organization Expense	643.76
Admin	289.00
Total Organization Expense	932.76
Total Expenditures	\$19,550.33
NET OPERATING REVENUE	\$ -10,163.71
Other Expenditures	
Reconciliation Discrepancies	200.00
Total Other Expenditures	\$200.00
NET OTHER REVENUE	\$ -200.00
NET REVENUE	\$ -10,363.71

Sitka Cancer Survivor's Society, Inc.

Statement of Activity

January - December 2023

	TOTAL
Revenue	
FUNDRAISER EVENTS	19,975.00
NON-FUNDRAISER DONATIONS	1,000.00
Board Member Contributions	900.00
Business/Group Donations	4,668.09
In Memory Of Donations	1,000.00
Individual Donations	1,183.63
Total NON-FUNDRAISER DONATIONS	8,751.72
RESTRICTED REVENUE	
OWQG Raffle	9,000.00
Raffle Tickets	1,000.00
Total OWQG Raffle	10,000.00
Total RESTRICTED REVENUE	10,000.00
Sales of Product Revenue	9.40
Total Revenue	\$38,736.12
GROSS PROFIT	\$38,736.12
Expenditures	
Mini-Grant Payments	38,500.00
Office expense	
Bank charges	-86.32
Meeting expense	264.00
Postage	342.00
Software	1,018.50
Supplies	89.74
Total Office expense	1,627.92
Organization Expense	
Admin	500.00
Insurance	905.00
Total Organization Expense	1,405.00
Path of Hope Maintenance	80.00
Square Fees	0.00
Total Expenditures	\$41,612.92
NET OPERATING REVENUE	\$ -2,876.80
NET REVENUE	\$ -2,876.80

Request for Taxpayer Identification Number and Certification

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

Go to www.irs.gov/FormW9 for instructions and the latest information.

Print or type.
See Specific Instructions on page 3.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.
Sitka Cancer Survivor's Society, Inc

2 Business name/disregarded entity name, if different from above

3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.

Individual/sole proprietor or single-member LLC

C Corporation

S Corporation

Partnership

Trust/estate

Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____

Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.

Other (see instructions) ▶ _____

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):

Exempt payee code (if any) _____

Exemption from FATCA reporting code (if any) _____

(Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.) See instructions.

6 City, state, and ZIP code

7 List account number(s) here (optional)

Requester's name and address (optional)

Part I Taxpayer Identification Number (TIN)

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

Social security number

--	--	--	--	--	--	--	--	--	--

OR

Employer identification number

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

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

Part II Certification

Under penalties of perjury, I certify that:

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

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

Sign Here Signature of U.S. person ▶ **Carolyn Fredrickson, President** Date ▶ **3/17/2020**

General Instructions

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

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

Purpose of Form

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

- Form 1099-INT (Interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
 - Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
 - Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
 - Form 1099-S (proceeds from real estate transactions)
 - Form 1099-K (merchant card and third party network transactions)
 - Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
 - Form 1099-C (canceled debt)
 - Form 1099-A (acquisition or abandonment of secured property)
- Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.
- If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What Is backup withholding, later.*

Sitka Cancer Survivors Society Inc.

██████████ | Sitka, Alaska, United States

Other Names

SITKA CANCER SURVIVORS SOCIETY INC

Publication 78 Data

Organizations eligible to receive tax-deductible charitable contributions. Users may rely on this list in determining deductibility of their contributions.

On Publication 78 Data List: Yes

Deductibility Code: PC ?

Form 990-N (e-Postcard)

Organizations who have filed a 990-N (e-Postcard) annual electronic notice. Most small organizations that receive less than \$50,000 fall into this category.

^ Tax Year 2023 Form 990-N (e-Postcard)

Tax Period:

2023 (01/01/2023-12/31/2023)

EIN:

██████████

Organization Name (Doing Business as):

SITKA CANCER SURVIVORS SOCIETY INC

Mailing Address:

██████████
██████████
██████████

Principal Officer's Name and Address:

Patricia A MacPike



Gross receipts not greater than:
\$50,000

Organization has terminated:
No

Website URL:

- ✓ **Tax Year 2022 Form 990-N (e-Postcard)**
- ✓ **Tax Year 2021 Form 990-N (e-Postcard)**
- ✓ **Tax Year 2020 Form 990-N (e-Postcard)**
- ✓ **Tax Year 2019 Form 990-N (e-Postcard)**
- ✓ **Tax Year 2018 Form 990-N (e-Postcard)**
- ✓ **Tax Year 2017 Form 990-N (e-Postcard)**
- ✓ **Tax Year 2016 Form 990-N (e-Postcard)**
- ✓ **Tax Year 2015 Form 990-N (e-Postcard)**
- ✓ **Tax Year 2014 Form 990-N (e-Postcard)**
- ✓ **Tax Year 2013 Form 990-N (e-Postcard)**
- ✓ **Tax Year 2012 Form 990-N (e-Postcard)**
- ✓ **Tax Year 2011 Form 990-N (e-Postcard)**
- ✓ **Tax Year 2009 Form 990-N (e-Postcard)**

✓ **Tax Year 2008 Form 990-N (e-Postcard)**

✓ **Tax Year 2007 Form 990-N (e-Postcard)**



THE STATE
of **ALASKA**

Department of Commerce, Community, and Economic Development
Division of Corporations, Business, and Professional Licensing
PO Box 110806, Juneau, AK 99811-0806
(907) 465-2550 • Email: corporations@alaska.gov
Website: corporations.alaska.gov

FOR DIVISION USE ONLY

Domestic Nonprofit Corporation

2024 Biennial Report
For the period ending June 30, 2024

Web-6/17/2024 10:00:03 AM

Due Date: This report along with its fees are due by July 2, 2024

Fees: If postmarked before August 2, 2024, the fee is \$25.00.
If postmarked on or after August 2, 2024 then this report is delinquent and the fee is \$30.00.

Entity Name: SITKA CANCER SURVIVORS SOCIETY,
INC.

Entity Number: 70076D

Home Country: UNITED STATES

Home State/Prov.: ALASKA

Physical Address: [REDACTED]

Mailing Address: [REDACTED]

Registered Agent information cannot be changed on this form. Per Alaska Statutes, to update or change the Registered Agent information this entity must submit the Statement of Change form for this entity type along with its filing fee.

Name: Candi Barger

Physical Address: [REDACTED]

Mailing Address: [REDACTED]

Officials: The following is a complete list of officials who will be on record as a result of this filing.

- Provide all officials and required information. Use only the titles provided.
- **Four (4) Mandatory Officers, who must be individuals:** this entity must have a President, Vice-President, Secretary, and Treasurer. Two or more offices may be held by the same individual, except the offices of President and Secretary cannot be the same individual.
- **Three (3) Mandatory Directors, who must be individuals.** The number of directors must be at least three (3).

Full Legal Name	Complete Mailing Address	Assistant Secretary	Assistant Treasurer	Director	President	Secretary	Treasurer	Vice President
Candi Barger								X
Bonnie Richards				X				
Carolyn Fredrickson					X			
Patricia MacPike							X	
Jill Scheidt				X		X		
Shannon Callahan				X				
Pam Samuelson				X				
Gail Roderick				X				

If necessary, attach a list of additional officers on a separate 8.5 X 11 sheet of paper.

Purpose: HONOR CANCER SURVIVORS AND FAMILY

NAICS Code: 813410 - CIVIC AND SOCIAL ORGANIZATIONS

New NAICS Code (optional):

Mandatory Property Value: Estimated value of all real or personal property of the corporation:

Mandatory. Do not leave blank.

This form is for use by the named entity only. Only persons who are authorized by the above Official(s) of the named entity may make changes to it. If you proceed to make changes to this form or any information on it, you will be certifying under penalty of perjury that you are authorized to make those changes, and that everything on the form is true and correct. In addition, persons who file documents with the commissioner that are known to the person to be false in material respects are guilty of a class A misdemeanor. Continuation means you have read this and understand it.

Name: Patricia A MacPike

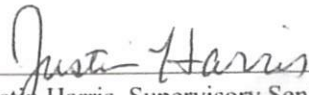
General Fund Grants for Non-Profit Organizations for Fiscal Year 2025

CBS Liabilities Form

Complete and submit this form with your Non-Profit Grant Application.

Organization Name: Sitka Cancer Survivor's Society, Inc

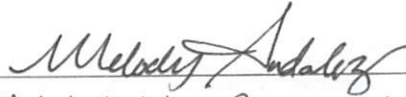
- Property Tax


Justin Harris, Supervisory Senior Accountant
747-1853


- Sales Tax


Justin Harris, Supervisory Senior Accountant
747-1853


- Municipal Leases


Melody Andaluz, Procurement Specialist
747-1852

- Loan/Promissory Note


Brooke Volschenk, Controller
747-1801

- Utilities


Chelsey Dumag, Utility/Harbor Billing Clerk
747-1843

CBS Department signatures must be complete to verify your organization is current on all CBS liabilities.