## City of Detroit

Janice M. Winfrey City Clerk

OFFICE OF THE CITY CLERK

Andre P. Gilbert II Deputy City Clerk

#### DEPARTMENT PETITION REFERENCE COMMUNICATION

To: The Department or Commission Listed Below

From: Janice M Winfrey, Detroit City Clerk

The following petition is herewith referred to you for report and recommendation to the City Council.

In accordance with that body's directive, kindly return the same with your report in duplicate within four (4) weeks.

Petition No.

2024-096

Name of Petitioner

First Tee - Greater Detroit

Description of Petition

Request from your Honorable Body a resolution in support of a Charitable Gaming License for an golf outing that will be held on 08/23/24 at the Cardinal at Saint John's Resort in Plymouth, MI.

Type of Petition

**Charitable Gaming License** 

Submission Date

03/18/2024

**Concerned Departments** 

City Clerk, City Council

Petitioner Contact

Todd Krieger

CEO

First Tee – Greater Detroit todd@firstteegreaterdetroit.org



March 14, 2024

To Whom It May Concern,

Detroit Your Golf d/b/a First Tee – Greater Detroit (EIN 88-3369258) seeks a raffle license for its upcoming golf outing on August 23, 2024 to be held at the Cardinal at Saint John's Resort in Plymouth, Michigan. We expect about 125 guests with the event taking place most of the day. This will be a traditional golf outing.

As a non-profit, First Tee – Greater Detroit is highly dependent on the support of the community and engages in events to help us raise money. We hope to institute a raffle at this event so that we may raise additional funds for our chapter.

The golf outing is a staple event and critical fundraiser for us with proceeds supporting the operations of our chapter. Without it, we would be unable to run our program which uses golf to teach kids critical life skills such as self confidence, perseverance and resiliency. As background, we operate at local courses including Belle Isle, Rouge Park and Rackham, to name a few, as well as the Durfee Innovation Society once the weather is too cold for us to be outside.

If you have any questions, whatsoever, please don't hesitate to contact me.

Thank you for your consideration.

Todd Krieger

CEO

First Tee - Greater Detroit

todd@firstteegreaterdetroit.org

### City of Detroit

OFFICE OF THE CITY CLERK

Janice M. Winfrey
City Clerk

Andre P. Gilbert II
Deputy City Clerk

March 18, 2024

Honorable City Council

RE: **Petition No.:** <u>2024-096</u> – <u>First Tee- Greater Detroit</u>, a nonprofit organization, requests a resolution from your Honorable Body in support of a charitable gaming license.

The petitioner wishes to be recognized as a nonprofit organization operating in the community for purposes of obtaining a gaming license from the Bureau of State Lottery. Be advised that the organization meets the criteria for such recognition as established by the City Council on May 15, 2012.

Therefore, approval of this petition is recommended, and an appropriate resolution is attached.

Respectfully submitted,

Janice M. Winfrey

JMW:kw

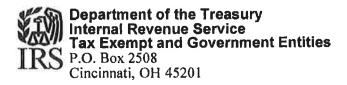
#### RESOLUTION

By Council Member:	

Whereas, First Tee-Greater Detroit (3011 W. Grand Blvd. #218, Detroit, MI 48202) requests for recognition as a nonprofit organization operating in the community for the purpose of obtaining a charitable gaming license from the State of Michigan, and

Whereas, the organization meets the criteria for such recognition as established by the City Council on May 15, 2012.

Therefore Be it Resolved, the Detroit City Council recognizes First Tee-Greater Detroit (3011 W. Grand Blvd. #218, Detroit, MI 48202) as a nonprofit organization operating in the community for the purpose of obtaining a charitable gaming license from the Bureau of State Lottery.



DETROIT YOUTH GOLF C/O LAWRENCE J BURNS 3011 WEST GRAND BLVD SUITE 218 DETROIT, MI 48202 Date: 08/24/2022 Employer ID number: 88-3369258 Person to contact: Name: Customer Service ID number: 31954 Telephone: 877-829-5500 Accounting period ending: December 31 Public charity status: 170(b)(1)(A)(vi) Form 990 / 990-EZ / 990-N required: Yes Effective date of exemption: July 22, 2022 Contribution deductibility:

Yes

Addendum applies:

No DLN:

26053631005242

#### Dear Applicant:

We're pleased to tell you we determined you're exempt from federal income tax under Internal Revenue Code (IRC) Section 501(c)(3). Donors can deduct contributions they make to you under IRC Section 170. You're also qualified to receive tax deductible bequests, devises, transfers or gifts under Section 2055, 2106, or 2522. This letter could help resolve questions on your exempt status. Please keep it for your records.

Organizations exempt under IRC Section 501(c)(3) are further classified as either public charities or private foundations. We determined you're a public charity under the IRC Section listed at the top of this letter.

If we indicated at the top of this letter that you're required to file Form 990/990-EZ/990-N, our records show you're required to file an annual information return (Form 990 or Form 990-EZ) or electronic notice (Form 990-N, the e-Postcard). If you don't file a required return or notice for three consecutive years, your exempt status will be automatically revoked.

If we indicated at the top of this letter that an addendum applies, the enclosed addendum is an integral part of this letter.

For important information about your responsibilities as a tax-exempt organization, go to www.irs.gov/charities. Enter "4221-PC" in the search bar to view Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, which describes your recordkeeping, reporting, and disclosure requirements.

We sent a copy of this letter to your representative as indicated in your power of attorney.

Sincerely,

Stephen A. Martin

Director, Exempt Organizations

stephen a martin

Rulings and Agreements



Authority: Acts 382 of the Public Acts of 1972, as amended:

# RAFFLE LICENSE APPLICATION

For E	Bureau	Use	Only

PLEASE PRINT OR TYPE IN BLUE OR BLACK INK

QU	Organization Name	Organization ID Number or Last License Number Issued						
ALIF	3. Organization Street Address	City	State	Zip Code				
C A T	Organization Mailing Address	City	State	Zip Code	County			
-02 -2F0R	4. Has your organization ever received a license such as bingo, raffle or charity game ticket?  Yes - Complete application and submit with the appropriate fee.  No - You must submit the documentation requested on the Qualification Requirements sheet and become qualified before any licenses can be issued. The Qualification Requirements sheet can be obtained from our website at www.michigan.gov/cg or by calling our office at (517) 335-5780.  5. Is your organization a candidate committee, political committee, political party committee,  6. Has your organization received contributions or made expenditures							
MATION	ballot question committee, independent committee or any by, and organized pursuant to, the Michigan Campaign F Public Acts of 1976, as amended, being sections 169.20 Compiled Laws?	endar year for the purpose of influencing action of voters for or against the ndidate, or the qualification, passage,						
	Yes No							
	7. Provide name, title, home address, and telephone numbers for the PRINCIPAL OFFICER, e.g., president, grand knight, worthy matron, etc., and the vice president or equivalent and one other officer of the organization. SIGNATURE OF PRINCIPAL OFFICER REQUIRED - OR - signatures of the vice president or equivalent and one other officer. NOTE: Executive director signature not acceptable.							
	Name and Title	Street, City, State, ZIP Code			Telephone Numbers			
	Principal Officer				Day ( )			
	Title		Evening ( )					
	Signature of Principal Officer	Date						
	Name and Title	Telephone Numbers						
S I G	Vice President or Equivalent	Street, City, State, ZIP Code			Day ( )			
N A T U	Title				Evening ( )			
R E (S)	Signature of Vice President or Equivalent	Date						
	Name and Title	Street, City, State, ZIP Code			Telephone Numbers			
	Other Officer			ţā.	Day (			
	Title				Evening (			
	Signature of Other Officer  Date							
	By signing above, I CERTIFY that I am at least 18 years of misrepresentation or falsification in the information stated or chairpersons associated with this raffle will read and under before performing any duties as a chalrperson. I FURTHEI revocation of the right to obtain any future licenses and I All and directives of the Michigan Bureau of State Lottery.	r attached, and the facts underlyii stand the duties and responsibilities R CERTIEY that I am aware that fa	ng our original es of a Raffle C alse or mislead	qualification status i hairperson as desci ing statements will t	remain unchanged. I CERTIFY that AL cribed in the Raffle Guide and Raffle Ru be cause for rejection of this application	LL ules on or		

COMPLETE THE ENTIRE APPLICATION AND MAKE A COPY FOR YOUR RECORDS



	8. 0	Contact Person			Raffle Location (bullding name, if any)				
	N	Mailing Address Where License Should Be Sent			Street Address				
		City	State	ZIP Code	City				
		Telephone Number (Day)	dence		ZIP Code	County			
		Telephone Number (Day) Email Ad ( )	uress		ZII Code	County			
	10.	10. List name, home address, and telephone numbers of the raffle chairperson(s). Must be a member for 6 months. If your organization does not have general membership, chairperson must be a board member for 6 months. Playing card progressive raffles require at least 2 chairpersons.  Attach additional list if necessary.							
		Raffle Chairperson	Street, City, State, ZIP Code			Telephone Numbers			
R A F	Nar	me				Day (			
F L							Evening		
E	Name				Day				
N F							( ) Evening		
O R M							( )		
A T	11.								
0		Drawing Date(s) and Time(s) (Must be between			12. License Fee				
N	S M	Date a.m.					plication must be at the same location.		
	A L L	Date Time a.m.	IIMeIO			Small Raffle Drawings - \$15 for 1, 2, or 3 dates plus \$5 for each addition drawing date.			
		Dateto			Large Raffle Drawings - \$50 for each drawing date.				
		Check here if there are additional drawing d			a, 1, 2, or 3 small drawing dates \$15 =				
	Dat	tes when total value of all prizes awarded in one Drawing Date(s) and Time(s) (Must be between			b. Additional small drawing datesx \$5 =				
	L Date Time a.m.								
	A R G	Date Time a.m.	to	a.m.	o. Edigo diaming date				
	E	Check here if there are additional drawing d			FEE (total lines a, b a	and c)			
	13.	If you are conducting an in-house raffle ONLY w	here there	is no presale of the ra	iffle tickets before the event	t, there is no nee	ed to complete the raffle licket		
	14;	below.  • If you are preselling tickets before the event,	complete ti	he boxes below in ink;	ensure the ticket is printed	with all of the re	quired items according to Raffle		
		Rule 506,  Indicate any additional information that will a							
	RAFFLE					001_	001		
Ţ						Ticket#	Ticket #		
C K									
E							Purchaser's Name		
l N	l	Drawing Date(s)			Drawing Time(s)	.m.			
F O		(Stating Subject)					Purchaser's Address		
R M A		First Prize *							
Ť		Filst Filze					Purchaser's Phone #		
O N	ı				T. I. A.D.				
				_	Ticket Price				
		Raffle Location			(to be added when License Number	issued)			
				<del></del>	Ficelize Mattinet				
		* For large prizes, you may want t	o include	a disclaimer that st	ates "If xxx (indicate nur \$xxx (indicate dollar am	mber) tickets a	re not sold, the		

	15.; If you will be using an	Electronic Man	agement Sys	stem, provide the fo	ollowing information			٦
				8			RAFFLE	
	<ul> <li>Supplier Name</li> </ul>						*Name of Licensee	
A	Supplier License I	Number					Ticket Number(s)	
L T							Drawing Date Drawing Time	
E R N	<ul> <li>Submit a sample of information shown</li> </ul>		et that will be	used. Raffle ticke	ts must contain all		Raffle Location	
A							Top Prize to be Awarded	
     	* NOTE: The licent business or grou	see must apper p name may ap	ar as the sol opear on the	le sponsor of the raffle ticket as a	raffle. No other sponsor.		Where Winning Numbers will be Publicly Posted	
Ŕ							Ticket Price	
F F							License Number	
L E							(to be added when issued)	
S								_
	<ol> <li>Approved Methods: directive. (View all av</li> </ol>	If you will be us ailable raffle dir	sing an alterr ectives at wy	native method that vw.michigan.gov/c	has been approved through g.)	a bureau directive, you	a must ensure the raffle complies with	the
	17. Request Approval: i	If you intend to u	use en altern	ative method that I	has not been approved throu ill be conducted including th	igh a bureau directive, e random selection me	you must submit a detailed descriptio thod that will be used, how a tle will be	of the
	handled (if applicable	), and your reco	rd keeping p	rocedures. (NOTE	: THE BUREAU DOES NO	T APPROVE GAMES	OF SKILL.)	
	ADDITIONAL DRA	AWING DA	TES WHI	EN PRIZES A	AWARDED ARE \$5	00 OR LESS		
	Date	Time	a.m	to				
	Date	Time	a.m.	to				
	Date	Time	a.m.	to				
	Date	Time	a.m	to	a.m.			
	Date	Time	a.m.	to	a.m.			
	Date	Time	a.m.	to	a.m.			
	Date	Time	a.m.	to	a.m.			
	Date	Time	a.m	to	a.m.			
	Date	Time	a.m	to	a.m.			
	Date	Time	a.m.	to	a.m.			
	Date	Time	a.m	to	a.m.			
	Date	Time	a.m.	to	a.m.			
	ADDITIONAL DRA	AWING DA			AWARDED ARE MO	ORE THAN \$500	)	
	Date	Time	a.m	to	a.m.			
	Date	Time	a.m	to	a.m.			
	Date	Time	a.m.	to	a.m.			
	Date	Time	a.m	to	a.m.			
	Date	Time	a.m.	to	a.m.			
	Date	Time	a.m	to	a.m.			
	Date	Time	a.m.	to	a.m.			
	Date	Time	a.m	to	a.m.			
	Date	Time	a.m.	to	a.m.			
	Date	Time	a.m.	to	a.m.			
	Date			to				

a.m. \_\_\_\_\_to \_\_\_\_a.m.

Time

Date \_\_\_\_\_



## LOCAL GOVERNING BODY RESOLUTION FOR CHARITABLE GAMING LICENSES (Required by MCL.432.103(K)(ii))

At aREGULAR	OR SPECIAL	_ meeting of the _	TOWNSHIP, CITY, OR VILLAG	E COUNCIL/BOARD
called to order by			on	
at a.	m./p.m. the following	resolution was offe		DATE
Moved by		and supported by		
that the request from	NAME OF ORG	ANIZATION	of	TY
county of	COUNTY NAME	askin	g that they be rec	ognized as a
nonprofit organization of	perating in the comr	munity for the purpo	se of obtaining ch	aritable
gaming licenses, be co	nsidered for	APPROVAL/DISAPPROVAL	<u></u> :	
AF	PROVAL	DISAF	PROVAL	
Yeas:		Yeas:		
Nays:	<del></del>	Nays:		
Absent		Absent:		
I hereby certify that the adopted by the		at a		
	NSHIP, CITY, OR VILLAGE COUNC	IL/BOARD	REGULAR OR S	.PECIAL
meeting held on	DATE	•		
SIGNED:		SHIP, CITY, OR VILLAGE CLERK		
	Pt	RINTED NAME AND TITLE		
		ADDRESS		