 **2024 Charity Application**

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| **Charity** Name Click to enter text\_\_\_\_\_ **Date**\_Click to enter text\_\_**EIN** Click to enter text.\_ **Mailing Address** \_\_\_ Click to enter text \_ |
| **Charity’s Executive Director or Board Chairman** \_\_ Click to enter text \_\_**Phone** \_ Click to enter text \_ **Email Address** \_\_ Click to enter text \_ |
| **Contact Person (Charity Team Leader)** \_\_ Click to enter text \_**Phone** \_ Click to enter text \_ **Email Address** \_\_ Click to enter text |
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**Please submit the following information to us.**

1. Provide your 501(c)3 tax-exempt status letter from the IRS affirming such status. Click to enter text
2. Provide a description of the services your charity provides, along with the number of those served in the SML geographic area. . Click to enter text
3. Provide a statement describing why your charity should be chosen as a participating charity and how awarded funds would be utilized. . Click to enter text
4. Provide a copy of the charity’s IRS Form 990, 1120 (or similar) of your most recent tax return or your most current audited financial statement (a compilation is acceptable). . Click to enter text

1. Provide an overview of the number of current employees and volunteers who are affiliated with your charity. . Click to enter text

**Please have the charity’s Executive Director or Board Chairman complete and sign the following statement:**

I hereby authorize \_\_\_ Click to enter text \_\_ (insert Charity Team Leader’s name) to submit an application for \_ Click to enter text \_ (insert Charity’s name) to be a participating Charity in the 2024 Smith Mountain Lake Charity Home Tour and to sign the Participation Agreement on my behalf. I will support \_ Click to enter text \_ (insert Charity Team Leader’s name) in this regard.

Printed Name \_\_ Click to enter text \_\_ Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title \_\_ Click to enter text \_\_\_

Both mailed (paper) and emailed (scanned) applications are acceptable. Submit your completed application and all supporting documentation by **Friday, November 24, 2023** to Marci Waro at:

SML Charity Home Tour, Inc., c/o Charity Administrator, P.O. Box 416, Moneta, VA 24121 or smlcharityhometour.charityadm@gmail.com

 *Note: By applying to the SML Charity Home Tour, the applicant consents to having an Independent Selection Committee review the application.*