



# CHARITY NOMINATION FORM

Please include this information in your presentation

## 100WWCA NONPROFIT CRITERIA

Nominated organizations must have 501(c)(3) tax deductible status

There may not be a political or religious component to the request for funds

Donations are expressly for charities in Albany, Schenectady, Rensselaer Counties

Previous recipients have a 2 year waiting period before they may be nominated again

Complete this form and email it to us with your nomination.

Name of Organization \_\_\_\_\_

EIN/Tax ID # \_\_\_\_\_ Is charity a 501(c)(3)\* \_\_\_\_\_ Yes \*required

Purpose/Mission \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Website \_\_\_\_\_

Contact Person \_\_\_\_\_ Title \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_

Briefly describe service area and whom the organization serves \_\_\_\_\_

\_\_\_\_\_

Annual budget? \_\_\_\_\_ Sources of Income \_\_\_\_\_

\_\_\_\_\_

Percentage of income for administrative costs vs direct services \_\_\_\_\_

Be sure to provide specific information on how our significant donation would be used:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Name of nominating member \_\_\_\_\_ Date \_\_\_\_\_

Email \_\_\_\_\_ Phone \_\_\_\_\_

Relationship to the organization \_\_\_\_\_

*Thank you for nominating!*

*Be sure to review the guidelines for making an effective presentation at [100wwcalbany.org](http://100wwcalbany.org)*