

Grant Eligibility Application for Government Entities



Congratulations! You are receiving this form because one of our donors has recommended a grant to your organization. However, to process this grant recommendation, we need to update some information. Please respond within two business days of receipt of this form. If you cannot, or if you have questions or need assistance, please contact the Giving Specialist noted below.

Schwab Charitable™ is an independent 501(c)(3) public charity with a mission to increase giving in the U.S. with donor-advised funds and philanthropic services that make charitable giving tax-smart, simple, and efficient. We offer tools, guidance, and relationships that empower donors to incorporate charitable planning into their everyday lives and make a bigger difference in the world. For more information about who we are, please visit www.schwabcharitable.org.

We appreciate your help in completing this form and supplying any requested documentation.

Questions or need assistance?

Giving Specialist: Lisa Fandrich

Email: lisa.fandrich@schwab.com

Phone: 1-800-746-6216 ext. 431529

Please reference Grant ID: 7655510

1. Organization Information

Village of Poplar Grove

Organization Legal Name

36-6009364

Federal Employer Identification Number (FEIN)

Other names by which donors can search for your organization

2. Contact Information

200 N. Hill St.

Physical Address of Business Office (PO. box not acceptable)

Poplar Grove

City

Illinois

State or Province

61065

Zip or Postal Code

Grant Mailing Address (if different from above)

City

(815) 765-3201

Primary Telephone Number

State or Province

(815) 765-3571

Fax Number

Zip or Postal Code

info@villageofpoplargo.com

General Email Address

poplargo-il.gov

Web Address

treasurer@villageofpoplargo.com

Alternate email for specific grant-related questions

3. Responses Required

A. Return this application with a copy of any letter from the Internal Revenue Service describing your organization's status for federal tax purposes.

B. Is your organization any of the following? (Check all that apply.)

- State government (including the District of Columbia, Puerto Rico, the Virgin Islands, and interstate instrumentalities)
- Local government and subdivisions
- Indian tribal governments
- Instrumentalities

C. Does your organization have any of the following governmental powers? (Check all that apply.)

- The power to levy any tax
- The power of eminent domain
- Police power over any area

For any checked boxes, please provide a supporting statement or documentation.

D. If your organization was formed pursuant to a statute or a constitutional provision, provide a copy of such statute or provision.

E. Provide copies of your organization's founding documents (e.g., charter or other evidence of incorporation, joint powers agreement, or any other document that created or governs the entity).

4. Certification of Compliance (Please read, complete, and sign this section.)

A tax-exempt organization will jeopardize its exemption if it ceases to be operated exclusively for exempt purposes. An organization will be operated exclusively for exempt purposes only if it engages primarily in activities that accomplish the exempt purposes specified in Internal Revenue Code Section 501(c)(3). An organization will not be so regarded if more than an insubstantial part of its activities does not further an exempt purpose. A tax-exempt organization:

- must absolutely refrain from participating in the **political campaigns** of candidates for local, state, or federal office
- must restrict its **lobbying activities** to an insubstantial part of its total activities
- must ensure that its earnings do not **inure** to the benefit of any private shareholder or individual; In addition to loss of the organization's tax-exempt status, activities constituting inurement may result in the imposition of **penalty excise taxes** on individuals benefiting from excess benefit transactions.
- must not operate for the **benefit of private interests** such as those of its founder, the founder's family, its shareholders, or persons controlled by such interests
- must not operate for the primary purpose of conducting a trade or business that is not related to its exempt purpose, such as a school's operation of a factory
- may not provide **commercial-type insurance** as a substantial part of its activities
- may not have purposes or activities that are **illegal** or violate fundamental public policy
- must satisfy **annual filing requirements**

A tax-exempt organization that does not file a required annual return or notice for three consecutive years **automatically loses** its tax-exempt status.

By completing and returning this Grant Eligibility Application, I certify that:

- This organization is a governmental entity as described in Section 170(c)(1) of the Internal Revenue Code and that I am not aware of any revocation or challenge to the organization's tax-exempt status.
- The organization acknowledges that the grant funds from Schwab Charitable® can be used solely for public purposes as that term is used in Section 170(c)(1) of the Internal Revenue Code.
- No donor or related individual or entity will receive any quid pro quo or other benefit as a result of grants from Schwab Charitable®.
- The information contained in this application is correct, complete, and accurate.

X

Signature (Please sign in blue or black ink.)

Today's Date (mm/dd/yyyy)

Donald Sattler

Village President

Print Name

Title

5. Delivery Instructions

Completion and return of this form is not a guarantee of receipt of a grant from Schwab Charitable.

STOP! For faster processing, please be sure to deliver any requested documentation with this form.

- **Email:** **Recommended** for fastest processing, you may take a picture of/scan all pages of this form and attach in an email to the Giving Specialist identified at the beginning of this form.
- **Fax:** 1-877-535-3852
- **Mail:** Schwab Charitable, P.O.Box 628298, Orlando, FL 32862

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