

APPLICATION FOR CONTRIBUTION

NAME OF ORGANIZATION: Sandy Area Chamber of Commerce								
ADDRESS: 35 E. 9270 S.								
CITY: Sandy STATE: UT ZIP CODE: 84070								
CONTACT PERSON: Greg Summerhays PHONE NUMBER: 801.727.4510 EMAIL: greg@sandycha								
ORGANIZATION OVERVIEW (which could include mission, history, and demographics served): The Sandy Chamber provides ongoing education and training opportunities to build the capacity of small to medium size businesses across the Wasatch Front. In addition, we provide events to help build people's professional networks and grow their business influence. TYPE OF REQUEST: Money In-Kind Have you previously requested money from SLCo? Yes If yes, when and how much (previous three years)? 08/28/2016 \$2,500.00								
What is the amount of your request? $\frac{$2,500.00}{}$ The amount you are requesting is $\frac{0.00\%}{}$ of your annual agency budget.								
What is the purpose of the money you are requesting?: \$2,500 contribution to help support companies participating in our training academies. As part of that we are offering Salt Lake County a table for 8 at our Titan Awards.								
PLEASE ATTACH: ✓ Copy of 501(c)(3) ✓ Copy of independent audit. If you do not have one, please enclose a copy of current financial statements.								
You will be expected to report to the Salt Lake County Mayor on how the money was used and the success of the project.								
The undersigned hereby acknowledges that he or she has authority to bind the organization listed in the application. The applicant accepts the following terms and conditions as a condition of receiving and using County funds or the waiver of fees: County funds will be used solely for the purposes approved by the Mayor of Salt Lake County as applied for in this application. Any expenditure for purposes other than those approved will require a return of the entire grant amount and may disqualify the grantee from receiving any additional County funds. It is further understood that no grant fund will be made available to any County officer of employee or in violation of the requirements of the Public Employees Ethics Act (67-16-1 et seq.). No grant funds will be used for political or campaign purposes. As a further condition of the grant, all County funds may be subject to an audit as required by Salt Lake County. The applicant is required to complete the Disbursement of Funds Report Form for contributions more than \$2,500.								
Dated this day of Aug, 18. Applicant Applicant								

INTERNAL REVENUE SERVICE P. O. BOX 2508 CINCINNATI, OH 45201

Date:

OCT 2 7 2015

THE SANDY CHAMBER ECONOMIC
DEVELOPMENT FOUNDATION
9350 S 150 E STE 580
SANDY, UT 84070-0000

Employer Identification Number: 47-2393288 DLN: 26053694001685 Contact Person: CUSTOMER SERVICE ID# 31954 Contact Telephone Number: (877) 829-5500 Accounting Period Ending: December 31 Public Charity Status: 170(b)(1)(A)(vi) Form 990/990-EZ/990-N Required: Effective Date of Exemption: November 01, 2014 Contribution Deductibility: Addendum Applies: No

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.

Form W-9

(Rev. November 2017) Department of the Treasury Internal Revenue Service

Request for Taxpayer Identification Number and Certification

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

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

	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.										
	SANDY AREA CHAMBER OF COMMERCE										
	2 Business name/disregarded entity name, if different from above								mmos.		
Print or type. Specific Instructions on page 3.	Check appropriate box for federal tax classification of the person who following seven boxes.					4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):					
	☐ Individual/sole proprietor or ☐ C Corporation ☐ S Corporati	poration LI Partnership LI				Exempt payee code (if any)					
	Limited liability company. Enter the tax classification (C=C corpor Note: Check the appropriate box in the line above for the tax clas LLC if the LLC is classified as a single-member LLC that is disreg another LLC that is not disregarded from the owner for U.S. fedei is disregarded from the owner should check the appropriate box:	sification of the single-member owner, arded from the owner unless the owner ral tax purposes. Otherwise, a single-m	the single-member owner. Do not check the owner unless the owner of the LLC is oses. Otherwise, a single-member LLC that			Exemption from FATCA reporting code (if any)					
20	Other (see instructions) >	501 (C)(6)		(Applies to ac	counts a	aintained	oulside	the U.S.	IJ		
Š	5 Address (number, street, and apt. or suite no.) See instructions.	Rec	uester's name	and address	s (option	onal)		3-311110	in west		
586	35 EAST 9270 SOUTH										
(J.)	6 City, state, and ZIP code	***************************************									
	SANDY, UTAH 84070						CONTRACTOR OF THE PARTY OF THE				
	7 List account number(s) here (optional)		2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.	***************************************		***************************************	***************************************				
Par	Taxpayer Identification Number (TIN)		***************************************			***************************************	***************************************	***********	*******		
	your TIN in the appropriate box. The TIN provided must match	the name given on line 1 to avoid	Social se	curity num	ber	***************************************		**********			
backı	in withholding. For individuals, this is generally your social secu	rity number (SSN). However, for a	TT	7 [\Box	Г	T	П	\exists		
resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other						-					
	es, it is your employer identification number (EIN). If you do not	have a number, see How to get a	or			L		<u></u>			
TIN, I		or line 1. Alon one Milat Alama and	_	r identifica	tion n	umber					
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.				oyer identification number							
2 MCS2 1 IN	to or		8 7	- 0 3	8	4 4	5	0			
Do	t II Certification								L		
	r penalties of perjury, I certify that:				***************************************						
		an number for I am maiting for a m	imher to he is	eriad to m	iel ar	art					
1. 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 2. 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											
3. I am a U.S. citizen or other U.S. person (defined below); and											
	e FATCA code(s) entered on this form (if any) indicating that I are	[20] [1] [1] [1] [1] [1] [1] [1] [1] [1] [1									
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		Date	e > S	1/11	2/	2	0	18)		
Ge	neral Instructions	• Form 1099-DIV (divid	ends, includin	those from	om st	ocks o	or mu	tual			
Sect	ion references are to the Internal Revenue Code unless otherwisd.	02	 Form 1099-MISC (various types of income, prizes, awards, or gross 								
	re developments. For the latest information about developmented to Form W-9 and its instructions, such as legislation enacted	Form 1099-B (stock of	Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)								
	they were published, go to www.irs.gov/FormW9.	• Form 1099-S (procee	 Form 1099-S (proceeds from real estate transactions) 								
Pu	rpose of Form		Form 1099-K (merchant card and third party network transactions)								
	ndividual or entity (Form W-9 requester) who is required to file a mation return with the IRS must obtain your correct taxpayer	n • Form 1098 (home mo 1098-T (tuition)	 Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition) 								
iden	tification number (TIN) which may be your social security number	7.7	Form 1099-C (canceled debt)								
	Individual taxpayer identification number (ITIN), adoption Identification number (ATIA), as application number (ITIN).		 Form 1099-A (acquisition or abandonment of secured property) 								
(EIN	ayer identification number (ATIN), or employer identification nur), to report on an information return the amount paid to you, or o unt reportable on an information return. Examples of information	other alian) to provide your	Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.								
	ms include, but are not limited to, the following.	If you do not return F	If you do not return Form W-9 to the requester with a TIN, you might								
	rm 1099-INT (interest earned or paid)	be subject to backup v	vithholding. Se	be subject to backup withholding. See What is backup withholding,							