



APPLICATION FOR CONTRIBUTION

NAME OF ORGANIZATION: American Heart Association

ADDRESS: 465 S 400 E Ste 110

CITY: Salt Lake City STATE: UT ZIP CODE: 84111

CONTACT PERSON: Kim Gourley PHONE NUMBER: 801-702-4436 EMAIL: kim.gourley@heart.org

ORGANIZATION OVERVIEW (which could include mission, history, and demographics served):

Our mission is to be a relentless force for a world of longer, healthier lives. We raise funds to support life-saving heart and brain research, health education initiatives, community programs, advocacy for heart-healthy legislation and quality of care guidelines for our healthcare systems.

TYPE OF REQUEST: Money ☒ In-Kind ☐

Have you previously requested money from SLCo? No

If yes, when and how much (previous three years)? _____

What is the amount of your request? \$2,000

The amount you are requesting is 0.00%.1% of your annual agency budget.

What is the purpose of the money you are requesting?:

Table sponsorship for women to attend the 2020 Go Red for Women luncheon

PLEASE ATTACH:

- ☐ Copy of organizations nonprofit status.
- ☐ 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 or 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 8 day of Nov, 2019

Applicant Kimberly Gourley



IRS Department of the Treasury
Internal Revenue Service

P.O. Box 2508
Cincinnati OH 45201

In reply refer to: 0248225078
Jan. 12, 2017 LTR 4168C 0
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BODC: TE

AMERICAN HEART ASSOCIATION INC
NATIONAL CENTER
% SUNDER JOSHI EVP CFO
7272 GREENVILLE AVE
DALLAS TX 75231-5129

106811

Employer ID Number: 13-5613797
Form 990 required: YES

Dear Taxpayer:

This is in response to your request dated Jan. 03, 2017, regarding your tax-exempt status.

We issued you a determination letter in July 1949, recognizing you as tax-exempt under Internal Revenue Code (IRC) Section 501(c) (03).

Our records also indicate you're not a private foundation as defined under IRC Section 509(a) because you're described in IRC Sections 509(a)(1) and 170(b)(1)(A)(vi).

Donors can deduct contributions they make to you as provided in IRC Section 170. You're also qualified to receive tax deductible bequests, legacies, devises, transfers, or gifts under IRC Sections 2055, 2106, and 2522.

In the heading of this letter, we indicated whether you must file an annual information return. If a return is required, you must file Form 990, 990-EZ, 990-N, or 990-PF by the 15th day of the fifth month after the end of your annual accounting period. IRC Section 6033(j) provides that, if you don't file a required annual information return or notice for three consecutive years, your exempt status will be automatically revoked on the filing due date of the third required return or notice.

For tax forms, instructions, and publications, visit www.irs.gov or call 1-800-TAX-FORM (1-800-829-3676).

If you have questions, call 1-877-829-5500 between 8 a.m. and 5 p.m., local time, Monday through Friday (Alaska and Hawaii follow Pacific Time).

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Sincerely yours,

A handwritten signature in black ink, appearing to read "K. A. Billups". The signature is fluid and cursive, with the first letters of the first and last names being capitalized and prominent.

Kim A. Billups, Operations Manager
Accounts Management Operations 1

To: The Salt Lake County Council
Attn: Richard Snelgrove, Chair

From: Jennifer Wilson, Salt Lake County Mayor

Date: November 21, 2019

Subject: Community Contribution Recommendation

Council Members:

I have reviewed and approved the Salt Lake County Contribution Review Committee's recommendations for the following community contribution amount under the Mayor's Contribution Fund, subject to the ratification of the County Council as outlined in county ordinance:

<u>Entity</u>	<u>Granted</u>
American Heart Association – 2020 <i>Go Red for Women</i>	\$500.00
<hr/>	
	\$500.00 Cash

Purpose: To support the American Heart Association's 2020 *Go Red for Women* program. *Go Red for Women* is the AHA's signature women's initiative; it is a comprehensive platform designed to increase women's heart health awareness and serve as a catalyst for change to improve the lives of women globally.

This contribution is approved under the authority of **County Wide Policy 1200:**

- 2.9 Public Purpose - Salt Lake County government's authority or responsibility to promote the safety, health, prosperity, moral well-being, peace, order, comfort, or convenience of County inhabitants.

This contribution will be appropriated in the Salt Lake County Mayor's 2019 budget. Please place this item on your next available agenda for action. Thank you for your help in this matter.