

UNITED SQUARE DANCERS OF AMERICA

501 (C)(3) Nonprofit Group Exemption Program Application



1. Name of USDA Affiliate / Associate: _____
Name of Applicant Organization - USDA Affiliate / Associate / Member Organization
2. Applicant's Employer Identification Number (EIN): _____
(EIN Employer Identification Number)
 (If Applicant does not currently have a Federal EIN, it may be obtained online at <https://sa2.www4.irs.gov/modiein/individual/index.jsp>)
3. Applicant's State of Incorporation _____
4. Applicant's current IRS 501 (c) status Determination (check one) ☐ Yes or ☐ No
 If Yes, please check one ☐ 501 (c)(3); ☐ 501 (c)(4); ☐ 501 (c)(7); ☐ Other _____
If you have such a ruling or determination letter, please enclose a copy of it when submitting the application form.
5. It will be necessary to submit the following information with the completed Application Form
 - a. ☐ Letter to USDA Authorizing USDA to Include Affiliate / Associate / Member in the USDA Group Exemption Program
 - b. ☐ Group's Bylaws
 - c. ☐ Articles of Incorporation
(Usually Filed with the State)
 - d. ☐ Standing Rules
 - e. ☐ Constitution, (if any)
 - f. ☐ Financial Report showing total revenue and total expenses for the most recently completed fiscal year.
6. Our group regularly grosses (check one) ☐ More than \$50,000 per year ☐ Less than \$50,000 per year.
7. Applicant's fiscal year (*Note - This Must Coincide with USDA's Fiscal Year - Jan 1 - Dec 31*)
 begins _____ and ends _____.
(Month) (Month)
8. Contact Person: _____ Title: _____
9. Address: _____ City: _____ State: _____ Zip: _____
10. Phone: _____ Email: _____
11. Applicant's Website: _____
12. Officer responsible for annual financial statement if other than above:
 Name: _____ Title: _____
 Address: _____ City: _____ State: _____ Zip: _____
 Phone: _____ Email: _____
13. Group's mailing address:
 Address: _____ City: _____ State: _____ Zip: _____
14. If mailing address is a post office box, we also need a street address for one of the group's officers:
 Address: _____ City: _____ State: _____ Zip: _____

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15. Please enclose the following information with this form:

List of your officers, with their official titles, addresses, phones, and emails.

President: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Vice President: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Secretary: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Treasurer: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

16. **Signature:**

Please read and sign the following statement:

I am a duly authorized officer of the applicant group. I have read and understand the information sheet entitled 501(c)(3) Nonprofit Group Exemption Program Application Procedures / Requirements for Applying for Inclusion in the USDA Group Tax Exemption Program.

I verify that to the best of my knowledge and belief, the _____

Name of Applicant Organization - USDA Affiliate / Associate / Member Organization

is eligible to participate in the United Square Dancers of America 501(c)(3) Nonprofit Group Exemption Program; is not a private school; is eligible to qualify for exemption under section 501(c)(3) of the Internal Revenue Code; and is not a private foundation as defined in section 509(a) of the IRS Code. USDA is hereby authorized to include the _____ in the USDA Nonprofit Group Exemption Program.

Name of Applicant Organization - USDA Affiliate / Associate / Member Organization

With the submission of this application, I affirm that our organization wishes to be included in the USDA 501(c)(3) Nonprofit Group Exemption Program

I attest that to the best of my knowledge; the above information is correct.

Name of USDA Affiliate / Associate: _____

Name of Applicant Organization - USDA Affiliate / Associate / Member Organization

Signature: _____

Print Name: _____

Title: _____ Date: _____

Please return with all enclosures to USDA – Post Office Box 712918 – San Diego, CA 92171-2918 or email to: jmaczko@san.rr.com

Jim Maczko – Co-Administrator – Applications
USDA Group Exemption Program
Post Office Box 712918
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Pat Inglis – Co-Administrator - Renewals
USDA Group Exemption Program
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Stone Mountain, Georgia 30087
404-294-0268
501c3renew@usda.org inglisp@bellsouth.net