

**Town of Mount Pleasant
Community Investment Application
Fiscal Year 2020-2021**

DEADLINE: February 3, 2020

MAIL TO: Town of Mount Pleasant, Community Investment Funding Application
100 Ann Edwards Lane Mount Pleasant, SC 29464; pburke@tompsc.com

Presentations shall be no more than 5 minutes in length and should address the items listed below as well as the questions listed on page 2 of the application.

1. Name of Applicant Organization: _____
2. Mailing Address: _____
Street or P. O. Box / City / State / Zip Code
3. Name of Project/Program: _____
4. Project Director: _____ Title: _____
Telephone #: _____ Fax #: _____
Email address _____
5. Applicant Category: (Check the description that best describes your organization)
 Government Agency Eleemosynary Private Business Other
6. Please check which tax status applies to your organization:
 Not-For-Profit as registered with the Secretary of State of South Carolina
Date of Incorporation _____ Charter # _____
 Federal Exempt Under IRS Code 501(c)
Date of IRS Tax Exempt Determination Letter _____
(Attach copy of letter)
7. Federal Employee Identification Number (EIN) _____
(Please provide proof of Exemption Status and Federal Employee Identification Number)
8. Year organization was founded: _____ Year first started serving Town residents: _____
9. Amount of Request: _____
10. Have you received funds from the Town of Mount Pleasant previously? Yes No
If yes, how much? _____ What Years? _____

Applicants must complete this application in its entirety. Supplemental information shall be no more than 2 pages in length. Projects submitted for consideration must demonstrate a relationship to or impact on the Mount Pleasant community and be consistent with the Town of Mount Pleasant's Comprehensive Plan. **Funding recipients must recognize the Town of Mount Pleasant as a sponsor on all promotional materials.**

Applications will be reviewed annually at a Town Council Committee meeting during the budget process. Once a meeting date is established, you will be advised of the date and time for a brief presentation.

By signing this application, the applicant agrees to spend awarded monies as described in this application, not towards political activities, and will spend the monies by June 30, 2021. Otherwise, the applicant must return awarded monies to the Town.

Project Director (SIGNATURE)

Date

Name of Applicant Organization: _____

If you are a returning applicant, please complete the Performance Report below.

1. How much funding did you request in previous years from the Town of Mount Pleasant?

2. How much did you spend?

3. Please list the ways funds were allocated or attach an expenditure/expense report to your application.

Amount received:

Expenditures/expenses:

4. Describe how your funding from the Town of Mount Pleasant was used for the benefit of the public.

5. Provide the number of residents served by your project/program.