

**Community Shares of Illinois
Member Application Form**

1. APPLICANT ORGANIZATION INFORMATION

Organization _____

Address _____

City _____ State _____ Zip _____ Phone _____

Contact Person _____ E-Mail _____

Mission of Organization: _____

Describe the program activities/service provided: _____

Geographic Area Served: _____

Populations or client groups: _____

Currently has 501(c) 3 tax exempt status: ___Yes ___No Accrual accounting used? _____

Date tax-exemption status granted? _____ Date organization incorporated? _____

Does your organization conduct an annual audit? ___Yes ___No

Number of Staff members: ___Full-Time ___Part-time ___Volunteer

Size of annual budget: ___Below \$100,000 ___\$100,000 - 250,000 ___Over \$250,000

2. MOTIVATION FOR CSI MEMBERSHIP

How will your organization benefit from membership in Community Shares of Illinois?

How will Community Shares of Illinois benefit from your organization joining?

3. ATTACHMENTS

- List of Current Board Members
- IRS 501(c)3 Letter
- Most recent IRS 990
- Most Recent Audit if income over \$100,000
- Copy of Annual Report or brochures/newsletters that provide a general description of your agency programs/services and lists Board of Directors and Chief Administrative personnel (if applicable)

CSI Membership Committee reviews applications in November and makes recommendations to full membership for a final decision in January of each year.

Upon acceptance, member pays annual dues of \$400 - \$975 based on annual revenue.