



Instructions for Completing the 2023-2024 SECC Charity Application Worksheet

CERTIFICATION

Each application must include the name and email address of the person submitting the application. By submitting the application you certify that your umbrella organization and each member charity is aware of and will adhere to the conditions of the SECC Policies set forth by the SECC Steering Committee. The SECC Steering Committee will review this application for accuracy and compliance with eligibility requirements. The SECC may request a copy of any and all documents identified in this application at any time. Failure to comply with a request, or false certification by the applicant, may result in exclusion from the SECC.

Column A	Each Umbrella is issued a unique deduction code by the State of Michigan upon inclusion in the SECC. This column is for SECC use only and CANNOT be modified.
Column B	Each Member Charity is issued a unique designation code by the State of Michigan upon inclusion in the SECC. This column is for SECC use only and CANNOT be modified.
Column C	This column contains the name of your organization and that of your Member Charities, if applicable. This list includes both current and end dated Member Charities. All names and codes should remain on the application worksheet until they are removed by SECC. If a new charity is applying for membership into the 2023-2024 SECC add the charity name to the bottom of the list in column C.
Column D	This column represents the date when the Umbrella or Member Charity joined the SECC. This column is for SECC use only and CANNOT be modified.
Column E	A date in this column indicates that the charity is no longer actively participating in the campaign. This column is for SECC use only and CANNOT be modified.
Column F	If a Member Charity has an end date listed but wishes to participate in this year's campaign, place an 'x' in column F.
Column G	If a new charity is applying for membership into the 2023-2024 SECC add the charity name to column C (at the bottom of the list), place an 'x' in column G. Before adding a new charity to your list, please check to confirm that they are not already on the spreadsheet. If they have participated in SECC in the past, they have already been assigned a designation code and can be reinstated. <i>This list is italicized just under your most current list of participating charities on your worksheet.</i>
Column H	If a Member Charity will not be participating in the 2023-2024 SECC, place an 'x' in column H.

Column I	If a Member Charity has a name change, place an 'x' in column I and type the designation code from column B and the new name in column C at the bottom of the page.
Column J	Enter charity's Tax ID or EIN. (Include hyphen xx-xxxxxxx)
Column K	501(c)(3) determination effective date. This should reflect the date of the most recent IRS determination.
Column L	Charitable Solicitation Registration Number (License to Solicit). Registrations/Licenses are considered expired if the expiration date is prior to April 1, 2023. (If Member Charity does not require Registration/Licensure, type 'exempt' in column L and attach a copy of the exemption letter from Michigan Attorney General with the application. Exemption letters must be submitted electronically on an annual basis.
Column M	Michigan Charitable Solicitation Registration (License) Expiration Date. Registrations/Licenses are considered expired if the expiration date is prior to April 1, 2023. (If Member Charity does not require Registration/Licensure, type 'exempt' in column M.)
Column N	Each Umbrella is required to have the most recent available IRS 990, 990-EZ or Pro Forma Financials on file for themselves and each of their Member Charities. The date on the 990 cannot precede 2021 and the fiscal year end date cannot be more than 18 months prior to January 2023 (must be on or after 6/30/21). If 'exempt', enter the fiscal year end date.
Column O	Place an 'x' in the column verifying that the charity has reviewed and signed the SECC Affirmation of Non-Discrimination. Umbrella charities are responsible for keeping these on file. A signed copy may be requested at any time. The date signed cannot precede 2023.
Column P	Review the Taxonomy Codes on 'Tab 2' of the application spreadsheet. Place a letter A through Z for the 'organization type' that best describes the Member Charity, mission and/or the services it provides.
Column Q, R	Use columns Q and R if more than one taxonomy code is applicable to the charity.
Column S	Charity contact (first and last name)
Column T	Charity email
Column U	Charity phone number (must be in this format xxx-xxx-xxxx)
Column V	Charity website, if applicable
Column W	List the counties the charity serves. If statewide, national or international, include that in the space provided. All counties must be listed individually and be separated by a comma in the same cell.
Column X	Charity mission or vision statement. Please keep to 25 words or less.
Columns Y	Charity Facebook address, if applicable (must include direct link or it will not be included)
Columns Z	Charity Twitter address, if applicable (must include direct link or it will not be included)
New Column	Video Link – 3 minutes or less (YouTube, Vimeo, etc.)