



# Ohio State Beekeepers Association

## Affiliated Association Program

### Renewal Form *(Please respond by February 28, 2023)*

**1. Association Name:**

**2. Federal Employer Identification Number (EIN):**

**3. Contact Information:**

The IRS requires the listing of an address for each association for which the 501(c)(3) tax exempt status is sought. If the association does not have a permanent address, the address of the current president should be used. This address will be used for all official communication by OSBA, the Ohio Secretary of State, Ohio Attorney general and the IRS. The address may not be a PO Box.

Name/Title:

Address:

City:

State:

Zip:

Telephone Number:

Email:

**4. Association Information:**

Website:

Facebook Page:

Email Address:

Phone Number:

**5. Officer's Contact Information:** Attach any additional officers not listed below on a separate page.

**President:**

Address:

City:

State:

Zip:

Telephone Number:

Email:

**Vice-President:**

Address:

City:

State:

Zip:

Telephone Number:

Email:

**Treasurer:**

Address:

City:

State:

Zip:

Telephone Number:

Email:

**Secretary:**

Address:

City:

State:

Zip:

Telephone Number:

Email:

**6. Club Bylaws/Constitution:** If your associations Bylaws and/or Constitution have been revised since your application or last renewal, please attach your revised Bylaws and/or Constitution. Please initial the appropriate area to indicate changes.

**Our Bylaws and/or Constitution has been revised.** We have reviewed the **IRS-APPROVED LANGUAGE** document and have checked to make sure that our club bylaws have all the language required by the IRS. **A copy of our associations Bylaws and/or Constitution, as approved by our association and signed and dated by our club president and another officer, is attached to this document.**

**No Changes** have been made to our Bylaws and/or Constitution.

**7. As the authorized representative for this association,** I affirm that our beekeeping association understands that: Please initial the appropriate box below.

- a) Our association will uphold the guidelines as specified in the Articles of Association with The Ohio State Beekeepers Association, Inc.
- b) Our association will be required to submit a financial report for its most recently ended fiscal year to The Ohio State Beekeepers Association, Inc. on or before the deadline specified by The Ohio State Beekeepers Association, Inc. Affiliated Association Program Chairperson.
- c) Our association is responsible for reporting any changes or activities that may affect it's 501(c)3 status.

Yes, I understand.

No, I do not understand.

**8. Financial information:** Please indicate fiscal year:

