



## CHARITABLE DONATION APPLICATION

After reviewing the Carl Zeiss Vision Charitable Guidelines below, please complete this form and email the completed Adobe PDF file to [legal.vis.us@zeiss.com](mailto:legal.vis.us@zeiss.com).

Due to the large number of proposals we receive and limited resources we have to support them, all requests must be submitted via this website at least 90 days prior to the event for consideration. We do not accept requests via mail, fax or e-mail. To submit a request, you will need to complete the on-line application.

In order to be considered for a charitable donation, the applicant must provide documentation from the Internal Revenue Service (IRS) validating the applicant's status as a public charity described by Section 501(c)(3) of the Internal Revenue Code.

Once a proposal has been submitted, an acknowledgement email will be sent to your inbox. We will review your proposal and will respond to all proposals within 120 days of submission.

Carl Zeiss Vision does not provide support for the following types of requests:

- Requests by or for the benefit of particular individuals
- Partisan political organizations
- Sectarian, religious, and denominational organizations
- Organizations that discriminate based on race, color, sex, gender identity and/or expression, religion, sexual orientation, national origin, age or disability
- Tax-supported city, county or state organizations
- Private foundations (even if tax-exempt under Section 501(c)(3))
- Local events in areas without Carl Zeiss Vision facilities

Carl Zeiss Vision grants priority to requests for funding relating to the following areas of focus:

- Charitable fundraising requests related to vision needs treated by the Company's products.
- Programs that provide vision services to low-income children at no cost to the family.
- Programs that provide or encourage science education.
- Programs that address unmet needs of local communities in which the Company has personnel or customers (including, for example, programs that provide relief for victims of natural disasters or other emergencies).
- Programs that encourage public health and wellness education and equitable access to healthcare, as well as community sports and recreation programs.
- Programs that provide accessible and affordable arts and cultural experiences to a community, e.g., the performing arts, architectural and historical societies, museums, zoos.
- Programs that improve the quality of life in the areas of economic and community infrastructure, capacity building, economic development, safe neighborhoods and job training.



- Programs that emphasize student academic achievement, with a focus on academic enrichment and advancement, e.g., early childhood education, K-12; post-secondary; technical and vocational schools.
- Programs that provide supportive services for low-income/at-risk individuals or families to help them on the road to self-sufficiency, e.g., services for families, disabled, elderly; domestic disaster prevention; temporary shelter; and support for the disadvantaged and those living in poverty.
- Programs that encourage sustainability through stewardship of community ecosystems, pollution abatement, natural resource conservation, environmental beautification, renewable energy and wildlife preservation.



#### A. ORGANIZATION INFORMATION

Complete Legal Name of Applicant Entity:			
Address:		City:	State: Zip Code:
Phone:	E-Mail:		
Website:		Has the organization been active for more than 1 year? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Applicant's Tax Identification Number:			
Section 501(c)(3) status: Yes <input type="checkbox"/> No <input type="checkbox"/> <i>Note: In order to be eligible for a charitable donation, the organization must have received a letter from the Internal Revenue Service determining it to be described by Section 501(c)(3) of the Internal Revenue Code.</i>			

#### B. POINT OF CONTACT WITHIN APPLICANT ORGANIZATION

Name:	
Phone:	E-Mail:

#### C. CHARITABLE PROJECT OR EVENT INFORMATION

*Describe the Applicant's charitable mission (attach additional sheets if needed):*

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*Describe the purposes for which the charitable donation will be used, including the geographic area(s) to be impacted by the donation. Please include the number and types of beneficiaries (or target audience) expected to be benefitted by the donation, and the proposed activities to be conducted. For example: number and types of activities offered; number of participants and others who will benefit from the project, etc.:*

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#### **D. AMOUNT REQUESTED**

*Indicate the amount of the charitable donation being requested (attach additional sheets if needed):*

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#### **E. ATTACHMENT**

*You must upload with this Application the organization's determination letter from the Internal Revenue Service recognizing the organization as a public charity described by Section 501(c)(3) of the Internal Revenue Code. The Application will not be complete without this document.*

#### **F. CERTIFICATION**

By submitting this Application, I hereby certify that:

- I am an officer of the applicant organization;
- I am authorized to submit this Application on behalf of the applicant organization;
- The information provided in this Application is complete and accurate;
- The applicant organization exists and is in good standing under all applicable state laws; and
- The applicant organization is in good standing with the Internal Revenue Service, is organized and operated in accordance with Section 501(c)(3) of the Internal Revenue Code, and the applicant organization's Section 501(c)(3) status has not been revoked or proposed for revocation.

Officer's Name: \_\_\_\_\_

Officer's Title: \_\_\_\_\_

Officer's Phone Number: \_\_\_\_\_

Officer's Email Address: \_\_\_\_\_