

Membership Sign-Up



Organization _____

Prefix _____ Name _____ Title _____

Email _____

Office address _____

City _____ State _____ Zip _____

Phone _____ (circle one: Office / Home / Mobile)

- Please select type:** 501 (c)(3) with operations in NC Anticipate becoming a 501 (c)(3) and operating in NC
 Unincorporated group serving charitable purposes in NC

Individuals or other organizations not matching the types above are **not** eligible for Center membership. However, we welcome support from businesses, government agencies, and other 501 (c) nonprofits! Contact us to learn more.

How did you hear about us? Internet Mailing Email Workshop

Referred by _____

| If annual expenses are: | Dues: |
|----------------------------|--------------------|
| Less than \$49,999 | \$100 |
| \$50,000 to \$99,999 | \$160 |
| \$100,000 to \$199,999 | \$230 |
| \$200,000 to \$299,999 | \$320 |
| \$300,000 to \$499,999 | \$390 |
| \$500,000 to \$749,999 | \$435 |
| \$750,000 to \$999,999 | \$515 |
| \$1 million to \$1,999,999 | \$650 |
| \$2 million to \$4,999,999 | \$725 |
| \$5 million to \$9,999,999 | \$1,030 |
| \$10 million or more | \$1,550 |
| Supporting Member | \$5,000 to \$9,999 |
| Sustaining Member | \$10,000 or more |

Total Annual Expenses \$ _____

Use "Total Expenses" from page 1 of your IRS Form 990 or 990-EZ, or use total expenses for the prior fiscal year. Private foundations, use "Total Operating & Admin Expenses" from your 990-PF.

Join online at www.ncnonprofits.org/join/membership, or return this form with payment to:

North Carolina Center for Nonprofits
1110 Navaho Dr, Ste 200
Raleigh NC 27609

This is an organizational membership that every staff, board member, and key volunteer in your nonprofit can use. *Dues cover 12 months from the date you join.*

Check or Money Order Visa/MasterCard/Discover Cardholder name _____

Card # _____

Exp Date _____ CVV _____ Total enclosed \$ _____

Signature _____