

Together To Fight Suicide

Out of the Darkness™
Experience:

Sponsorship Opportunities

2020 New Mexico Experience
Saturday, September 19th
afsp.org/albq



Foundation
for Suicide
Prevention





**American
Foundation
for Suicide
Prevention**



July 27, 2020

Dear Friend and Community Leader,

While the Out of the Darkness Walks in New Mexico are going to look different this year, our mission to **Save Lives and Bring Hope to Those Affected by Suicide** has not changed.

Though there are many unknowns, there are a few things we know for sure:

- We are a strong and resilient community, united in our effort to fight suicide, raise awareness, educate our communities, support those who have lost loved ones, and support those with lived experience.
- We remain dedicated to providing communities throughout New Mexico with opportunities to connect, heal, share stories, create impact, and show those who struggle that they are not alone.
- Mental health and suicide prevention are more important than ever, and we're confident that with your help we can reach more people than ever before.

Why support the (new) New Mexico Out of the Darkness Experience?

Our community has always been the heart of the Out of the Darkness Walks. We realize that nothing can substitute the experience of coming together in person, and we will continue to seek ways in which we can do that safely. Until that time comes, we will use our voices and share our stories virtually to provide hope. Sponsor the 2020 New Mexico Out of the Darkness Experience and show our community that you're a voice for suicide prevention.

The American Foundation for Suicide Prevention (AFSP) leads the fight against suicide.

Funds raised from the Out of the Darkness Experience will allow us to fund research, create educational programs, advocate for public policy, and support survivors of suicide loss.

I look forward to discussing our 2020 sponsorship opportunities and benefits with you in more detail. **#TogetherToFightSuicide**

For more information, please contact:

Jessica van der Stad
AFSP Regional Director
855-869-AFSP (2377)
jvanderstad@afsp.org

Enclosures

¹ [2013 Cone Communications/Echo Global CSR Study](#)

² [Edelman goodpurpose® 2012](#)



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NEW MEXICO OUT OF THE DARKNESS EXPERIENCE 2020 SPONSORSHIP LEVELS

LIFESAVER Sponsor | Donate \$10,000

Benefits Include:

- ☑ All BRONZE + SILVER + GOLD + PLATINUM Sponsorships Benefits Listed Below
- ☑ 10 complimentary t-shirts
- ☑ Named "Presenting Sponsor" in e-vent related marketing (*includes press release*)
- ☑ Opportunity for check presentation and air-time during e-vent livestream (*live or recorded*)
- ☑ Named 2020 *International Survivors of Suicide Loss Day* sponsor (*taking place on November 21, 2020*)

PLATINUM Sponsor | Donate \$5,000

Benefits Include:

- ☑ All BRONZE + SILVER + GOLD Sponsorships Benefits Listed Below
- ☑ 8 complimentary t-shirts
- ☑ Recognition during e-vent related promotions (*television, radio, etc.*)
- ☑ 1 virtual presentation for your group about AFSP
- ☑ Opportunity to co-host National Suicide Prevention Week activity (*September 6-12, 2020*)

GOLD Sponsor | Donate \$2,500

Benefits Include:

- ☑ All BRONZE + SILVER Sponsorships Benefits Listed Below
- ☑ 6 complimentary t-shirts
- ☑ Profile in e-blast to entire AFSP New Mexico database (*5,200+ distribution list*)
- ☑ Recognition via social media announcement on AFSP New Mexico Chapter accounts (*1250+ Facebook & 300+ Instagram "followers"*)
- ☑ 3 minute air-time during e-vent livestream (*live or recorded*)
- ☑ ROI meeting upon completion of e-vent

SILVER Sponsor | Donate \$1,000

Benefits Include:

- ☑ All BRONZE Sponsorships Benefits Listed Below
- ☑ 4 complimentary t-shirts
- ☑ LOGO included in e-vent announcement to registered walkers
- ☑ 1-minute air-time during e-vent livestream (*recorded*)

BRONZE Sponsor | Donate \$500

Benefits Include:

- ☑ Tax-deductible donation & donation receipt
- ☑ 2 complimentary t-shirts
- ☑ LOGO included on e-vent registration page with a link to your website (www.afsp.org/albq)
- ☑ LOGO added to sponsor slide displayed during e-vent livestream
- ☑ Opportunity to participate in virtual resource fair (*subject to terms of AFSP Tabling Agreement*)

WALK Sponsor | Donate \$250

Benefits Include:

- ☑ Tax-deductible donation & donation receipt
- ☑ NAME listed on e-vent registration page (www.afsp.org/albq)
- ☑ Opportunity to participate in virtual resource fair (*subject to terms of AFSP Tabling Agreement*)



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NEW MEXICO OUT OF THE DARKNESS EXPERIENCE 2020 SPONSORSHIP AGREEMENT

Please Print

Name/Company: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Contact Name: _____

Phone: _____ Email: _____

Company Website Address: _____

Please select one of two sponsorship options:

Cash Sponsorship:

- Lifesaver Level Sponsor | Donate \$10,000
- Platinum Level Sponsor | Donate \$5,000
- Gold Level Sponsor | Donate \$2,500
- Silver Level Sponsor | Donate \$1,000
- Bronze Level Sponsor | Donate \$500
- Walk Level Sponsor | Donate \$250

OR

In-Kind Sponsorship:

Product: _____

OR Service: _____

Fair market Value* (product or service): \$ _____

Value Determined by: _____

**min* _____

Do you plan to participate in the virtual resource fair? (This benefit is included in ALL sponsorship levels.)

Yes No

Additional Options:

- Call me, I am interested in forming a team.
- Unable to sponsor, but please accept this donation \$ _____
- Referred by (if someone referred you to us, please let us know): _____

Authorized Signature: _____ **Date:** _____

We authorize The American Foundation for Suicide Prevention to include our corporate name and logo on all "Out of the Darkness" materials consistent with our sponsorship selection and publication dates.

Donation Via:

Enclosed check Invoice required to process payment Call me to process payment via phone

Credit Card: AMEX Mastercard Visa Discover

CARD NO. _____

EXP. DATE: _____ CODE: _____ BILLING ZIP: _____

Card Holder Name (if different than Contact Person Name): _____

Logo Specifications (where applicable): Website: Stacked logos appear best (max width is 80px) and we accept vector files and/or high-resolution image files (.jpeg, .png). **If high-resolution (vector or image) logo file is not provided, company name will appear on website as text, only.**

Please sign and upload this agreement & logo to: www.afsp.org/walksponsors

If preferred, mail signed form with payment to: AFSP New Mexico – 300 Menaul Blvd. Ste. A235 – Albuquerque, NM 87107

Request for Taxpayer Identification Number and Certification

Give Form to the requester. Do not send to the IRS.

▶ Go to www.irs.gov/FormW9 for instructions and the latest information.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.
American Foundation for Suicide Prevention

2 Business name/disregarded entity name, if different from above

3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.

Individual/sole proprietor or single-member LLC

C Corporation

S Corporation

Partnership

Trust/estate

Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____

Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.

Other (see instructions) ▶ _____

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):

Exempt payee code (if any) 1

Exemption from FATCA reporting code (if any) _____

(Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.) See instructions.
199 Water Street, 11th FL

6 City, state, and ZIP code
New York, NY 10038

7 List account number(s) here (optional)

Requester's name and address (optional)

See Specific Instructions on page 3.

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number

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OR

Employer identification number

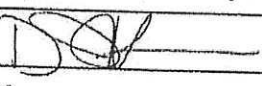
| | | | | | | | | | |
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| 1 | 3 | - | 3 | 3 | 9 | 3 | 3 | 2 | 9 |
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Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification Instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here Signature of U.S. person ▶ 

Date ▶ 08 / 28 / 2019

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
 - Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
 - Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
 - Form 1099-S (proceeds from real estate transactions)
 - Form 1099-K (merchant card and third party network transactions)
 - Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
 - Form 1099-C (canceled debt)
 - Form 1099-A (acquisition or abandonment of secured property)
- Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.
- If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What Is backup withholding, later.