

Food Assistance PO Box 42560 Olympia, WA 98504-2560 foodassistance@agr.wa.gov

## Food Assistance – Alternate 501(c)(3) Church Verification

Washington State Department of Agriculture (WSDA) Food Assistance (FA) programs require a participating food pantry or meal program to have current proof of 501(c)(3) status with the Internal Revenue Service (IRS). If a church does not have proof of 501(c)(3) status, they may be required to complete this form and obtain verification from a local elected official that the organization is recognized in the community as a church. Lead Agencies are authorized to request Sub Agencies complete this church verification form. A "church" may include conventions and associations of churches as well as integrated auxiliaries of a church.

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Are either of the following true? If yes, please include application 1. The organization has applied to the IRS for 501(c).  The organization has had its 501(c)(3) status revo	c)(3) status and been denied.
The IRS uses 14 characteristics to determine whether an organization qualifies as a church. In accordance with this provision, the WSDA requires that a church without current proof of 501(c)(3) status declare that at least 9 of these characteristics are evidenced by its program. Documentation of checked items must be provided where appropriate. The characteristics are as follows (please check all items that apply):  1. A distinct legal existence 2. A recognized creed and form of worship 3. A definite and distinct ecclesiastical government 4. A formal code of doctrine and discipline 5. A distinct religious history 6. A membership not associated with any other church or denomination 7. An organization of ordained ministers 8. Ordained ministers selected after completing prescribed courses of study 9. A literature of its own 10. Established places of worship 11. Regular congregations 12. Regular religious services 13. Sunday schools for religious instruction of the young 14. Schools for the preparation of its ministers	
As a duly authorized officer of  Church Name  I declare under penalty of perjury that this organization	As an elected official of  Community/City Name  I confirm to the best of my knowledge that the above organization mosts the requirements indicated for the
meets the above requirements indicated for the identification as a church.	organization meets the requirements indicated for the identification as a church.
Signed: Signature of Pastor	Signed: Signature of Elected Official
Name:	Name:
Title:	Title:
Date:	Date:
Food Pantry/Meal Program Information	
Pantry/Meal Program Name:	Director/Contact Name: