



Town of Wickenburg

Bed Tax Marketing Grant Application

Organization Name: Wickenburg Breast Cancer Network

Address: PO Box 3302, Wickenburg, AZ 85358

Phone: 623-341-5977 2nd Phone: _____

Email: wbcn2018@gmail.com

Contact Name and Title: Bernadine McCollum, Secretary

Scope of Work:

We are seeking BTMG funding to support a professionally produced broadcast segment on AZTV Channel 7's Daily Mix. Filmed on-site in Wickenburg, the segment will spotlight the walk and raise awareness of the importance of early detection. It will also promote Wickenburg as a destination. The grant will also cover the cost of re-airing the segment closer to the October event

Funding Amount Requested: \$1,400

Bernadine McCollum Secretary 7/24/25

Authorized Agency Representative

Title

Date

Wickenburg Breast Cancer Network
Bed Tax Marketing Grant
Project Budget 2025-26

Channel 7 AZ TV Daily Mix On-location segment and re-air.	\$1,400
Total Request	\$1,400

Wickenburg Breast Cancer Network

Board of Directors

2025

Rudee Lange, President

Leslie Morrison, Treasurer

Bernadine McCollum, Secretary

P. O. BOX 2508
CINCINNATI, OH 45201

JUN 27 2009

Date:

WICKENBURG BREAST CANCER NETWORK
INC
PO BOX 3302
WICKENBURG, AZ 85358

Employer Identification Number:
27-0216087
DLN:
17053167027009
Contact Person:
RENEE RAILLEY NORTON ID# 31172
Contact Telephone Number:
(877) 829-5500
Accounting Period Ending:
December 31
Public Charity Status:
170(b)(1)(A)(vi)
Form 990 Required:
Yes
Effective Date of Exemption:
April 29, 2009
Contribution Deductibility:
Yes
Addendum Applies:
No

Dear Applicant:

We are pleased to inform you that upon review of your application for tax exempt status we have determined that you are exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code. Contributions to you are deductible under section 170 of the Code. You are also qualified to receive tax deductible bequests, devises, transfers or gifts under section 2055, 2106 or 2522 of the Code. Because this letter could help resolve any questions regarding your exempt status, you should keep it in your permanent records.

Organizations exempt under section 501(c)(3) of the Code are further classified as either public charities or private foundations. We determined that you are a public charity under the Code section(s) listed in the heading of this letter.

Please see enclosed Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, for some helpful information about your responsibilities as an exempt organization.

Letter 947 (DO/CG)

Section 2

1. Provide a brief description of your proposed program/event/activity. Include any previous history, evidence that the event will take place in the Town of Wickenburg, any partnerships with other groups/organizations and how the BTMG funds will be used.

WBCN has proudly hosted Wickenburg Walks to Boot Breast Cancer since 2009. This uplifting annual event draws between 400 and 600 participants from across the Northwest Valley. The walk is more than a fundraiser, it is a celebration of survivorship, a show of community togetherness, and a crucial source of funding for uninsured and underinsured women and men in need of breast cancer screenings and diagnostics.

Held the third Sunday in October, which is also Breast Cancer Awareness month, in downtown Wickenburg, the event begins with an opening ceremony honoring breast cancer survivors and recognizing teams who have raised the most money and have the most members. Participants can choose to walk one-mile or 5K through our historic downtown and scenic Simpson's Ranch. Local nonprofits and healthcare organizations host information booths, adding an educational dimension to the event.

WBCN works in close partnership with Wickenburg Community Hospital's Pink Ribbon Angels to ensure that funds raised directly benefit residents of Wickenburg and 12 surrounding rural communities. To date, we have raised over \$260,000 and provided life-saving services, including mammograms, diagnostic imaging, ultrasounds, and biopsies, to more than 2,700 individuals.

Funds raised come from generous sponsors such as Blue Cross Blue Shield of Arizona, Wickenburg Ranch Pickleball Club, and Texas Roadhouse, registration fees, fundraisers throughout the year, and community donations.

We are seeking BTMG funding to support a professionally produced broadcast segment on AZTV Channel 7's Daily Mix. Filmed on-site in Wickenburg, the segment will spotlight the walk and raise awareness of the importance of early detection. It will also promote Wickenburg as a destination. The grant will also cover the cost of re-airing the segment closer to the October event, reinforcing visibility and impact. With a reach of 4.9 million households in the greater Phoenix area, this coverage will significantly enhance both our walk participation and Wickenburg's visibility.

This annual event is staffed 100% by local volunteers, is supported by businesses and numerous organizations, and provides a critical benefit to Wickenburg.

2. Demonstrate the need for the proposed project/program.

Breast cancer remains one of the most common yet most treatable of all cancers when detected early. Too many individuals in our greater Wickenburg area still face a heartbreaking choice: buy groceries or pay for critical health screenings. The Wickenburg Walks to Beat Breast Cancer event addresses this by raising both awareness and funds to ensure that no woman or man goes without potentially life-saving mammograms or diagnostics due to financial hardship.

Demand for support continues to grow. Each year, more people turn to us for help with a broader range of needed services while the costs of screenings, imaging, and biopsies continue to rise. At the same time, we are working hard to educate our communities about the importance of early detection, which can lead to survival rates exceeding 90% when detected and treated early.

To meet this growing need and maintain the success of our program, it is essential that we expand our outreach and engage a broader audience to increase awareness and participation. In addition to our use of traditional publicity like flyers, social media, and the press, we need other avenues to increase our reach.

A professionally produced segment on AZTV Channel 7's Daily Mix, filmed right here in Wickenburg, will allow us to share our message with millions of households across the greater Phoenix area. The Daily Mix feature will serve a dual purpose: raise awareness of breast cancer prevention and spotlight Wickenburg as a welcoming and vibrant destination. A larger audience means more walkers, more donations, and, most important, more lives saved.

3. Specify the total number of people expected to be served by this project during the funded year and the number of Wickenburg residents who will be served.

We expect to have 500-600 people participate in the walk. Funds raised will provide free mammograms, ultrasounds, biopsies and other diagnostic services to more than 120 underinsured and uninsured individuals in Wickenburg and 12 surrounding rural communities each year. These essential services would otherwise be out of financial reach for many.

Of those directly receiving medical services, approximately 75% are residents of Wickenburg. In addition to those directly served, hundreds more are impacted through our education and outreach efforts. This program is not only about the numbers served, but also about creating a ripple effect of awareness and prevention that benefits the entire Wickenburg area.

4. Identify one goal and three measurable objectives which will be met by this project.

Our goal is to increase breast cancer awareness and fund early detection for the underinsured and uninsured people in our Wickenburg area communities.

Our measurable objectives for 2025-2026 are:

- 1) Increase NW Valley registrations by 10%
- 2) Increase total walk registration by 10-15%
- 3) Increase total funds raised through all sources by 15%.

5. Provide evidence of other leveraged resources.

The Wickenburg Breast Cancer Network (WBCN) has a broad network of partnerships and volunteers. Collaboration with the Wickenburg Community Hospital Foundation's Pink Ribbon Angels (PRA) ensures that proceeds from our events are used directly and efficiently to fund mammograms and diagnostic services for underinsured and uninsured individuals in Wickenburg and surrounding communities. All patient services are coordinated and paid through PRA, which maintains medical privacy.

Corporate and community sponsorships play a major role in our fundraising success. Our top financial supporters include Blue Cross Blue Shield of Arizona and the Wickenburg Ranch Pickleball Club. Additional support comes from groups such as the Elks Club, Wranglers' Tough Enough to Wear Pink, and Texas Roadhouse in Surprise, who raise funds through events hosted on our behalf.

We also receive generous in-kind donations from hotels, resorts, local shops, and statewide businesses that contribute high-value items for our free drawing at the walk, adding excitement for participants.

WBCN's board of directors, event committees, outreach teams, and administrative support are all volunteers. At the annual walk, student groups, including the Wickenburg High School Spirit Line and Vulture Peak Student Council, along with dozens of local residents help with setup, logistics, and crowd support.

In addition, local and regional nonprofits and healthcare providers set up informational tables at the event, promoting preventive health and showcasing available community resources.

Department of the Treasury
Internal Revenue Service

for Tax-Exempt Organization not Required to File Form 990 or 990-EZ

2024

Open to Public Inspection

A For the 2024 Calendar year, or tax year beginning 2024-01-01 and ending 2024-12-31

B Check if available

☐ Terminated for Business☒ Gross receipts are normally \$50,000 or lessC Name of Organization: WICKENBURG BREAST CANCER
NETWORKPO Box 3302, Wickenburg,AZ, US, 85358

D Employee Identification

Number 27-0216087

E Website:

wickenburgbootsbreastcancer.orgF Name of Principal Officer: Rudae Lange1290 S 325th Ave,Wickenburg, AZ, US, 85390

Privacy Act and Paperwork Reduction Act Notice: We ask for the information on this form to carry out the Internal Revenue laws of the United States. You are required to give us the information. We need it to ensure that you are complying with these laws.

The organization is not required to provide information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. The rules governing the confidentiality of the Form 990-N is covered in code section 6104.

The time needed to complete and file this form and related schedules will vary depending on the individual circumstances. The estimated average times is 15 minutes.

Note: This image is provided for your records only. Do Not mail this page to the IRS. The IRS will not accept this filing via paper. You must file your Form 990-N (e-Postcard) electronically.

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.

Print or type. See Specific Instructions on page 3.	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. Wickenburg Breast Cancer Network, Inc.	
	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 ☐ 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) _____ 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. PO Box 3302 6 City, state, and ZIP code Wickenburg, AZ 85358 7 List account number(s) here (optional)	Requester's name and address (optional)

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 <i>How to get a TIN</i> , later. Note: If the account is in more than one name, see the instructions for line 1. Also see <i>What Name and Number To Give the Requester</i> for guidelines on whose number to enter.	Social security number [][]-[][]-[][][][][][] or Employer identification number [2][7]-[0][2][1][6][0][8][7]
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Part II Certification Under penalties of perjury, I certify that: 1. 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 2. 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 3. I am a U.S. citizen or other U.S. person (defined below); and 4. 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 ► <i>Rudée Lange</i> Date ► <i>8/4/22</i>

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. <i>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.</i>
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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.
Wickenburg Breast Cancer Network, Inc.

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) _____

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.
PO Box 3302

6 City, state, and ZIP code
Wickenburg, AZ 85358

7 List account number(s) here (optional)

8 Requester's name and address (optional)

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

2	7	-	0	2	1	6	0	8	7
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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 ▶ *Rudae Lange*

Date ▶ *8/4/22*

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-INT (interest earned or paid)

- 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)

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