



Lancaster County Accommodations Tax Grant Application

Fiscal Year July 1, 2023 – June 30, 2024

Applications **must be received by 5:00 PM – Friday, August 5, 2023**

Return applications to:

Director of Economic Development
OR

Questions should be directed to:

Director of Economic Development
Director@lancastercountysc.net

Lancaster County Finance Department
Attn: Director of Economic Development
PO Box 1809
Lancaster, SC 29721

ATAX Grant Requested:

Date(s) of Specific Event:

Total cost of project:

(if applicable)

Location of Specific Event:

SECTION I: ORGANIZATION INFORMATION

Name of Organization:	
Contact Name and Title:	
Mailing Address:	
Phone Number:	
Fax Number:	
Email Address:	
Website:	

TYPE OF ENTITY (check one)

- 501(c)** Tax-exempt Governmental Other Nonprofit

Federal Employer Identification Number:

Briefly state the history and mission of your organization.

SECTION II: GENERAL INFORMATION

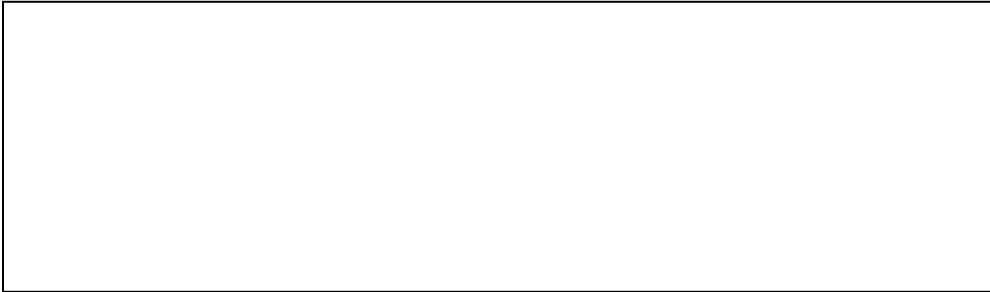
(Refer to program guideline- Application Components)

- 1. Describe the project you are requesting grant funds for:**

2. Describe how will your project benefit tourism in Lancaster County:



3. Describe how will your event benefit the community:



4. Describe previous successes and capacity for managing the project:



5. Describe your marketing plan and how you intend to track visitors:

SECTION III: FUNDING REQUEST FOR BUDGET YEAR 2022

1. The Accommodations Tax is available under section 6-4-10(4)(b) of the South Carolina Code of Laws for the following **tourism-related** expenditures.
 (Refer to guideline –Budget and Eligible Expenditures)

2. **Describe how your organization is currently funded:**

3. ITEMIZE EXPECTED PROJECT COSTS- TOURISM RELATED

MARKETING & PROMOTIONS

TYPE OF ADVERTISING	DESCRIPTION (media schedule, location of ad placement, etc.)	COST
TOTAL REQUEST FOR MARKETING & PROMOTIONS		

CONSTRUCTION AND/OR MAINTENANCE OF TOURIST-RELATED FACILITY

DESCRIPTION	COST
TOTAL REQUEST FOR CAPITAL & MAINTENANCE	

OTHER (PLEASE INDICATE TYPE OF EXPENDITURE)

DESCRIPTION	COST
TOTAL REQUEST (OTHER)	

TOTAL COUNTY ATAX GRANT REQUESTED	
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4. LIST FUNDS RECEIVED OR REQUESTED FOR TOURISM-RELATED EXPENSES

SOURCE	FY 21 AMOUNT	FY 22 AMOUNT	FY 22 STATUS
Lancaster County			
TOTAL Project or Event			

The following attachments MUST be submitted with your application or your application will NOT be considered.

- A. The Internal Revenue Service (IRS) tax status determination letter (not applicable to governmental agencies).
- B. Copy of Internal Revenue Service (IRS) Form 990 for the most recently completed year. (A financial statement must be substituted if an organization chooses not to file an IRS Form 990 because their revenues are less than the threshold to file an IRS Form 990).
- C. Copy of Annual Audit performed by a Certified Public Accountant (CPA):
 - 1. if a governmental agency, or;
 - 2. if entity's revenues are \$1,000,000 or more in the last completed fiscal year.

I hereby certify that I am an authorized signatory for the applicant organization and that this organization does not discriminate on the basis of race, color, age, sex, religion, sexual orientation, physical disability, veteran status, or national origin, and that all funds that may be received by applicant organization from the County of Lancaster will be solely used for the purposes set forth in this application and will comply with all laws and statutes. In particular, organizations receiving Accommodations Tax Funding will comply with state regulations requiring funds be utilized only for purposes as set forth in the Accommodations Tax Statute.

Executive Director's Signature

Date

Name and Title (please print)

Board Chair's Signature

Date

Name and Title (please print)

Administrative Purposes Only

Date Received:

Valid Accommodations Purpose under State Code of Laws 6-4-10(4)(b):
IRS determination letter:
IRS Form 990 (or Financial Statement if not required to file IRS 990):
Audit if government or revenue at least \$1M:

Yes No
Yes No
Yes No
Yes No