

WALK WITH US TO PREVENT SUICIDE

Out of the Darkness™ Community Walks: Sponsorship Opportunities

September 7, 2024

Aberdeen Area Out of the Darkness Walk
AFSP.org/AberdeenArea



Walk with us!
Scan to get registered.



American
Foundation
for Suicide
Prevention





Dear Community Supporter,

Supporting mental health is critical, now more than ever. We invite you to be part of the movement to prevent suicide by joining us for the 10th annual Aberdeen Area Out of the Darkness Walk on September 7th, 2024. Last year, over 700 individuals came together to take a stand against suicide.

In South Dakota, suicide ranks as the 10th leading cause of death, and unfortunately, the rates continue to climb. The impact is particularly devastating among young South Dakotans, where it stands as the leading cause of death for those aged 10-24.

Your support plays a pivotal role in our efforts. It enables us to provide complementary, essential programming and resources to our community. Last year, thanks to generous donations, we were able to offer programming for parents, teachers, and faith leaders as well as students in Aberdeen, Ipswich, Groton, and Fredrick.

Your involvement goes beyond financial support. It helps foster a culture that prioritizes mental health awareness and suicide prevention. By aligning your business with this cause, you not only demonstrate your commitment to the well-being of your employees and community but also contribute to a broader societal shift in attitudes toward mental health.

To show our appreciation for your support, we have developed various sponsorship options designed to enhance your brand visibility while championing an important cause. Whether through financial contributions, in-kind donations, or providing raffle prizes, every contribution makes a difference.

We also encourage you to rally your team and join us for the walk on September 7th. You can get registered at afsp.org/aberdeenarea. Together, we can create a community that is informed, supportive, and proactive in addressing mental health challenges. Thank you for your consideration. We look forward to partnering with you to save lives!

Sincerely,

A handwritten signature in black ink that reads "Katie Carlson".

Katie Carlson, Walk Co-Chair
katiec@zuntafi.com
(605) 622-4446

A handwritten signature in black ink that reads "Kelli Schun".

Kelli Schaunaman, Walk Co-Chair
kelli@productionmonkeys.com
(605) 262-5075

Together, we're leading the fight against suicide.

Since 1987, the American Foundation for Suicide Prevention (AFSP) has grown from a grassroots network of researchers and volunteers into a national movement with chapters in all 50 states. AFSP is also the largest private funder of suicide prevention research, and because we've built the infrastructure to deliver evidence-based programs to local communities across the country, our work impacts millions of people. We are consistently ranked one of the best charities for mental health, and we're powered by everyday heroes like you!



Research

Discovering better ways to prevent suicide through research. Findings from our studies have shaped prevention efforts around the world. Today, AFSP is the leading private funder of suicide prevention research.



Advocacy

Pushing for key federal and state legislation, such as mandatory suicide prevention training for clinicians and educators, and funding for mental health resources, with the help of thousands of volunteer advocates across the country.



Education

Delivering effective suicide prevention programs to schools, communities and workplaces, showing people how to recognize signs of distress and connect those suffering with help. Our Talk Saves Lives™ and More Than Sad programs have taught over a million people how to be smart about mental health.



Support

Providing support through initiatives like Healing Conversations, which connects trained loss survivors with people whose grief is recent, and events across the country for International Survivors of Suicide Loss Day. The Interactive Screening Program, available for schools, workplaces, and other organizations, provides an anonymous way to engage with counselors, for those least likely to seek help.

Your Support Helps Save Lives

AFSP is leading the fight in suicide prevention. Our mission is to save lives and bring hope to those affected by suicide. We do so by creating a culture that's smart about mental health through education and community programs, research advocacy, and support for those affected by suicide. Out of the Darkness Community sponsors and walkers help us do this great work in South Dakota.



42

Education programs delivered



4

Out of the Darkness™ Walks



4,682

South Dakotans who received programming



2

International Survivors of Suicide Loss Day Events



1.7 K

Social media followers



156

Advocates who are fighting for local and federal policy change



34

New research grants awarded internationally, made possible through chapter fundraising efforts



American Foundation for Suicide Prevention



OUT OF THE DARKNESS Community Walks

Sponsorship Benefits

Presenting Sponsor	Champion Sponsor	Hope Sponsor	Advocate Sponsor	Prevention Sponsor
\$10,000	\$5,000	\$2,500	\$1,000	\$500

Marketing Benefits					
Sponsorship of South Dakota Chapter AFSP educational programming (i.e. Talk Saves Lives)	X				
Dedicated press release announcing partnership	X				
Recognition on AFSP South Dakota Chapter social channels	X	X			
Recognition in Aberdeen Area Walk email communications	Logo	Logo	Name	Name	
Presence on Aberdeen Area Walk web page	Logo	Logo	Logo	Name	Name
Complimentary 988 yard sign	X	X	X	X	X

Walk Day Benefits					
Activity area sponsorship at Aberdeen Area Walk (i.e. Community Art Project)	X				
Speaking opportunity during opening ceremony of Aberdeen Area Walk♦	X				
Recognition during opening ceremony of Aberdeen Area Walk	X	X			
Stage banner with logo at Aberdeen Area Walk*	X	X			
Opportunity to table at Aberdeen Area Walk▲	X	X	X		
Logo with sponsor level on route signage at Aberdeen Area Walk*	X	X	X	X	X
Option to include promotional item in Aberdeen Area Walk giftbags	X	X	X	X	X
Presence on Aberdeen Area Walk t-shirts*	Logo	Logo	Logo	Name	Name
Complimentary Aberdeen Area Walk t-shirts*	20	15	10	5	2

*Deadline for this benefit is July 12

♦Script will need to be pre-approved by AFSP staff member

▲ Subject to application and terms of South Dakota Chapter Tabling Agreement, deadline to confirm is July 12

AFSP reserves the right to substitute any benefits listed for a benefit of equal value.

Sponsor Agreement

Aberdeen Area Out of the Darkness Community Walk

This form, logo upload (if applicable), and payments can be completed online through the payment method links below. You'll be asked for our walk date of September 7th.

Sponsor Level

- | | |
|--|---|
| <input type="checkbox"/> Presenting Sponsor \$10,000 | <input type="checkbox"/> Advocate Sponsor \$1,000 |
| <input type="checkbox"/> Champion Sponsor \$5,000 | <input type="checkbox"/> Prevention Sponsor \$500 |
| <input type="checkbox"/> Hope Sponsor \$2,500 | <input type="checkbox"/> Other \$ _____ |
| | <input type="checkbox"/> Please arrange pick up for a raffle item |

Payment Method

- Invoice Needed**
 - Request an invoice and upload your logo at afsp.org/invoicerequest
- Check**
 - Fill out the form online and upload your logo at afsp.org/checksponsor
 - Make check payable to: American Foundation for Suicide Prevention or AFSP
 - Mail check with this or online form to: Kelli Schaunaman, 20 2nd Ave SE, Aberdeen, SD 57401
- Credit Card**
 - To make a secure credit card payment, complete this form electronically and upload your logo go to afsp.org/ccsponsor

Logo Guidelines

- T-shirt: Vector files (EPS, PS, PDF) to ensure logo integrity.
- Website: Stacked logos appear best (max width 80px) and image files only (JPEG, PNG).
- Logo is due by July 12, 2024.
- Logos needed for sponsors of \$2,500+ only.

Complete the Information Below If Sending a Check

(Please Print) Company Name: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Contact Name: _____ Phone (with Area Code): _____

Email: _____ Company Website: _____

I hereby authorize the American Foundation for Suicide Prevention and Out of the Darkness Walks to include our corporate name and/or logo on all "Out of the Darkness" materials consistent with our sponsorship selection.

Authorized Signature: _____ Date: _____

Tax ID# 13-3393329, financials available at afsp.org/financials

Thank you for your generous support!

In-Kind Donation Form

Aberdeen Area Out of the Darkness Community Walk

You may go to afsp.org/inkindsponsor to complete the information below online and/or upload your logo (if applicable). You'll be asked for our walk date of September 7th.

Donor Information

(Please Print) Donor Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____ Website: _____

Contact Name: _____ Contact Title: _____

Contact Email: _____ Contact Phone: _____

Gift Information

Item(s)/Services Donated: _____

Description: _____

Restrictions (e.g. Exp Date): _____

Fair-Market Cash Value: \$ _____

* Donations with a fair-market cash value will receive sponsorship benefits in line with half that value

Please also arrange pick up for a raffle item

Processing Instructions & Important Deadlines

- **In-Kind Gift Delivery:** Please contact Kelli at kelli@productionmonkeys.com or 605-262-5075 to coordinate delivery.
- **In-Kind Donation Deadline: July 12, 2024.** This ensures logos for in-kind donations of \$5,000+ are included on walk t-shirts.
- Email signed agreement and logo to kelli@productionmonkeys.com.

I hereby authorize the American Foundation for Suicide Prevention and Out of the Darkness Walks to include our corporate name and/or logo on all "Out of the Darkness" materials consistent with our in-kind donation.

Authorized Signature: _____ Date: _____

IRS/Tax Deduction Information: AFSP will provide the donor with an acknowledgment letter after the delivery and/or provision of the in-kind gift. This receipt can reflect a dollar value for the in-kind gift as communicated to AFSP by the donor using this form. Any transfer documentation that will help to describe and evaluate the gift in-kind will be appreciated. The donor assumes all other responsibilities relating to the tax deductibility of this contribution. The donor should consult professional advisors regarding any tax reporting requirements.

Tax ID# 13-3393329, financials available at afsp.org/financials.

Thank you for your generous support!

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 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. <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input checked="" type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> 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. <input type="checkbox"/> Other (see instructions) ▶ _____	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) <u> 1 </u> Exemption from FATCA reporting code (if any) _____ <i>(Applies to accounts maintained outside the U.S.)</i>
5 Address (number, street, and apt. or suite no.) See instructions 199 Water Street, FL 11	Requester's name and address (optional)
6 City, state, and ZIP code New York, NY 10038	
7 List account number(s) here (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										
				-						
or										
Employer identification number										
1	3		-	3	3	9	3	3	2	9

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 ▶	Date ▶	02/24/2023
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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)

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.