

COMMUNITY PARTNER

Dear Community Partner,

We are excited to invite you to join the Indiana Parkinson Foundation at our Annual *Choose to Move Race to Beat Parkinson's* on Saturday, April 27, 2024. This event raises awareness and funds to improve the lives of people with Parkinson's disease and their families. Approximately 1,000,000 people are currently living with Parkinson's and 90,000 will receive a new diagnosis of Parkinson's disease this year. Although Parkinson's disease (PD) is chronic and progressive, research shows quality and duration of life can be dramatically improved with exercise, therapy, medication, and surgical procedures.

For more than 14 years, the Indiana Parkinson Foundation has provided valuable programs and resources to those with Parkinson's and their families. With raised awareness, education and active participation in these programs, the Indiana Parkinson Foundation positively impacts the lives of people with Parkinson's by improving their lives physically, mentally, and spiritually.

Our annual Choose to Move race event is an opportunity to raise awareness for the Parkinson's community and the Indiana Parkinson Foundation. Thank you for your interest in this event. Our race sponsorship opportunities are attached for your review. Your support allows us to continue to our mission and give hope to those faced with Parkinson's.

Sincerely,

Kim Williams
Indiana Parkinson Foundation
2024 Choose to Move



EDUCATE

ENCOURAGE

EXERCISE

1M



5K

EDUCATE

ENCOURAGE

EXERCISE



SPONSORSHIP OPPORTUNITIES

BENEFIT TO SPONSOR	TITLE SPONSOR \$10,000	PLATINUM SPONSOR \$5,000	GOLD SPONSOR \$2,500	SILVER SPONSOR \$1,000	BRONZE SPONSOR \$500
Announced as Title Sponsor via PR / Social opportunities	•				
Speaking opportunity on event day	•				
Opportunity to supply 1 minute video to be placed on website	•				
Sponsor logo printed on back of shirt	Logo	Logo	Logo	Logo	Listed
Prominant signage around race course	•	•			
Sponsor hyperlink on the Indiana Parkinson Foundation website homepage	•	•	•		
Sponsor collateral material accepted for goodie bag	•	•	•	•	
Sponsor booth allowed at event	•	•	•	•	•
Includes race registrations	20	15	10	5	2
License to use event logo	•	•	•	•	•
Showcase logo on Indiana Parkinson Foundation Facebook page	•	•	•	•	•
Listed on Landing page	•	•	•	•	•

ADDITIONAL SPONSORSHIP OPPORTUNITIES

Title Sponsorship shared with Supernus (2 total Title Sponsors opportunity)	\$10,000 per Sponsor
Sponsor logo printed on left sleeve	\$2,500
Sponsor logo printed on right sleeve	\$2,500



THANK YOU!

Choose To Move Race Sponsor Agreement

We appreciate your support of
The Indiana Parkinson Foundation
and the Parkinson's Community.



Sponsor Information

Company Name: _____

Contact Name/Title: _____

Contact Email Address: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Sponsorship Level/Amount: _____

Please email this agreement and your company logo as a .eps to Kim Williams at:
kim@indianaparkinson.org no later than March 20th, 2024.

If you would prefer to mail it, please send to:
Kim Williams, Executive Director
Indiana Parkinson Foundation
14350 Mundy Dr. Suite 800 #181
Noblesville, IN 46060

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. Indiana Parkinson Foundation, Inc.	
2 Business name/disregarded entity name, if different from above Indiana Parkinson Foundation	
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 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 checked="" type="checkbox"/> Other (see instructions) ▶ Nonprofit Organization	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) _____ <i>(Applies to accounts maintained outside the U.S.)</i>
5 Address (number, street, and apt. or suite no.) See instructions. 14350 Mundy Dr. Ste 800 #181	Requester's name and address (optional)
6 City, state, and ZIP code Noblesville, IN 46060	
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	
2 6 - 4 2 6 3 8 0 1	

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 ▶ <i>Tom William</i>	Date ▶ <i>1/1/2024</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-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.