



Stipend and/or Reimbursement for Board & Advisory Members of Non-Profit Organizations

To encourage a more diverse set of community voices on non-profit boards, Mount Baker Foundation has established a fund administered by Whatcom Family and Community Network from which Board or Advisory members of non-profits may request stipends or reimbursement.

<p>Date Requested: _____</p> <p>Date(s) of Meeting(s): _____</p> <p>Total Amount: \$ _____</p> <p>FOR: Check all that apply</p> <p><input type="checkbox"/> Meeting Stipend (\$100 flat rate per meeting)</p> <p><input type="checkbox"/> Childcare (\$40 flat rate per meeting)</p> <p><input type="checkbox"/> Mileage (calculate below)</p> <p>Mileage will be paid at IRS Rate for round trip mileage. Please calculate your own reimbursement</p> <p>RT Miles: _____ X</p> <p>IRS Rate (2023) \$0.655= _____</p> <p>TOTAL: _____</p> <p>Note: Please inquire in advance for lengthy meetings such as strategic retreats.</p>	<p>All fields are required for payment and tax purposes.</p> <hr/> <p>Your Name</p> <hr/> <p>Mailing Address, where check will be sent</p> <hr/> <p>City/State / Zip</p> <hr/> <p>E-Mail</p> <hr/> <p>Phone</p> <hr/> <p>Name of Organization(s) for which you serve</p> <hr/>
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Important Notes:

1. You will need to report stipends as income on your federal taxes and pay any associated tax.
2. Your request cannot be filled until a W9 form is completed. The form needs to be completed once annually and can be found at <https://www.irs.gov/pub/irs-pdf/fw9.pdf>
3. The check will be mailed to the address you have listed on this form. Watch for an envelope with perforated tabs marked "Payment Enclosed."
4. Proof of attendance is required. Submit meeting minutes showing record of attendance.

Requested by: _____
 Your Signature Date

Authorized: _____
 Kristi Slette, Executive Director - WFCN Date