



# COMBINED FEDERAL CAMPAIGN OF THE NATIONAL CAPITAL AREA

## 2010 APPLICATION CHECKLIST For Local Federations

- Completed and signed application.
- Attachment A**, Excel spreadsheet : a list of the federation and all member organizations' requested information. NEW: Federal regulations require the physical address of the federation and each member organization to be included in Attachment A.
- Attachment B**, a copy of your IRS determination letter, including Employer Identification Number (EIN)
  - If IRS letter is a group exemption, include a letter from the CEO of the group verifying your organization's bona-fide chapter status and financial reporting.
  - If using something other than a legal name, DBA paperwork in your home state or jurisdiction is required.
  - Verify that your EIN is valid (not expired) and that it is in the IRS database or Publication 78.
- Attachment C**, a copy of audited annual financial statements **REQUIRED** for organizations with \$250,000 or more in revenue for a period ended not more than 18 months prior to January 2009.
- Attachment D**, a copy of a complete signed IRS Form 990 for a period ended not more than 18 months prior to January 2009. **MUST** be the **SAME** period covered in the audit.
- Attachment E**, a list of federation's board of directors with beginning and ending date of board member's term; board's meeting dates and locations for calendar year 2009. .
- Signatures on application form.
- All certifications checked appropriately.
- All attachments submitted with signed application.

UPON COMPLETION, PLEASE SEND THE PRINTED APPLICATION AND ALL ATTACHMENTS TO:  
CFCNCA - 750 17TH STREET, NW - SUITE 200 - WASHINGTON, DC 20006



# COMBINED FEDERAL CAMPAIGN OF THE NATIONAL CAPITAL AREA

## 2010 APPLICATION FOR LOCAL FEDERATIONS

### Application - Page 1

DBA Name: My Chosen Cause

EIN: 12-3456789

Group Exemption EIN: Cause and Affect, Inc

CFC Number: 12345 (in 2009)

Mailing Address: 12345 Main Street Suite 1234 - Washington, DC 20001

Phone: (202)202-2002x10

Contact Name: John Doe

Contact Address: 12345 Main Street Suite 123 - Washington, DC 20001

Contact Phone: W: (202)202-2002x10

Contact Mobile: M: (202)202-2001

Contact Fax: (202)202-2003

Contact Email: john.doe@chosencause.org

Website: www.chosencause.org

Keywords: online shopping cart

Disbursement Address: 12345 Main Street Suite 123 - Washington, DC 20001



# COMBINED FEDERAL CAMPAIGN OF THE NATIONAL CAPITAL AREA

## 2010 APPLICATION FOR LOCAL FEDERATIONS

### Application - Page 2

1)  I certify that the federation named in the application has 30 member organizations that individually meet all local eligibility criteria of 5 CFR 950.202, 950.203, 950.204, and 950.401(i) for participation in this campaign by having either a substantial local presence in the geographic area served by the local campaign, a substantial local presence in the geographic area served by an adjacent local campaign, or a substantial statewide presence. Include as ATTACHMENT A a list of the federation and all member organizations that meet this requirement. See instructions for additional information.

2)  I certify that the Internal Revenue Service recognizes the federation named in this application as tax-exempt under 26 U.S.C. 501(c)(3) and to which contributions are tax deductible pursuant to 26 U.S.C. 170(c)(2). Include as ATTACHMENT B a copy of the federation's most recent IRS determination letter and the IRS determination letter and/or other supporting documentation that verifies the tax-exempt status of its member organizations. See instructions for additional information.

3)  I certify that the federation named in this application is a human health and welfare federation and either it or its member organizations provide services, benefits, or assistance to, or conduct activities that directly or indirectly affect, human health and welfare. The services, benefits, assistance, or program activities affecting human health and welfare were provided in calendar year 2009.

4) Place a check in the one appropriate box:

I certify that the federation named in the application accounts for its funds on an accrual basis in accordance with generally accepted accounting principles (GAAP) and has an audit of its fiscal operations completed annually by an independent certified public accountant in accordance with generally accepted auditing standards (GAAS). (Include as ATTACHMENT C a copy of the auditors report and the complete audited financial statements for a fiscal period ending not more than 18 months prior to January 2010 which verifies that the federation is honoring designations made to each member organization by distributing a proportionate share of receipts based on donor designations to each member.)

- OR -

I certify that the federation named in the application accounts for its funds on an accrual basis in accordance with generally accepted accounting principles (GAAP), but has been operating for less than one year and therefore is not required to submit audited financial statements.

5) Place a check in the one appropriate box:

I certify that the federation named in this application prepares and submits to the IRS a complete copy of the federation's IRS Form 990. (Include as ATTACHMENT D a copy of the complete IRS Form 990 for a period ending not more than 18 months prior to January 2010, including signatures in the box marked "Signature of Officer" or in IRS Forms 8879-EO or 8453-EO. The preparer's signature alone is not sufficient. IRS Forms 990EZ, 990PF, and comparable forms are not acceptable substitutes.)

- OR -



# COMBINED FEDERAL CAMPAIGN OF THE NATIONAL CAPITAL AREA

## 2010 APPLICATION FOR LOCAL FEDERATIONS

### Application - Page 3

I certify that the federation named in this application is not required to prepare and submit an IRS Form 990 to the IRS. (Include as ATTACHMENT D a pro forma IRS Form 990 for a period ending not more than 18 months prior to January 2010. See application instructions for pro forma IRS Form 990 requirements. IRS Forms 990 EZ, 990PF, and comparable forms are not acceptable substitutes.)

6)  I certify that the administrative and fundraising rate for the federation named in this application is 11.0%. This percentage is computed from the IRS Form 990 submitted with this application. Depending on which year's IRS Form 990 is submitted, the percentage will be calculated based on information contained on the:

(A) 2007 IRS Form 990 by adding the amount spent on "management and general" (line 14) to "fundraising" (line 15) and dividing the resulting total by "total revenue" (line 12);

- OR -

(B) 2008 (or more recent) IRS Form 990 by adding the amount in Part IX (Statement of Functional Expenses), Line 25, Column C (Management and General Expenses) to the amount in Line 25, Column D (Fundraising Expenses), and dividing the sum by Part VIII (Statement of Revenue), Line 12, Column A (Total Revenue). No other methods may be used to calculate this percentage. All percentages must be listed to the tenth of a percent (i.e. 10.0% or 15.5%).

7)  I certify that an active and responsible governing body, whose members have no material conflict of interest and a majority of whom serves without compensation, directs the federation named in this application. (Include as ATTACHMENT E a list of the federation's board of directors with the beginning and ending date of each board member's current term of office. ATTACHMENT E must also list the board's meeting dates and locations for calendar year 2009.)

8)  I certify that the federation named in this application prohibits the sale or lease of CFC contributor lists.

9)  I certify that the federation named in this application conducts publicity and promotional activities based upon its actual programs and operations, and that these activities are truthful and non-deceptive, include all material facts, and make no exaggerated or misleading claims.

10)  I certify that the federation named in this application effectively uses the funds contributed for its announced purposes.

11)  I certify that the federation named in this application does not employ, in its CFC operations, the services of private consultants, consulting firms, advertising agencies or similar business organizations to perform the policy-making or decision-making functions in the CFC.



# COMBINED FEDERAL CAMPAIGN OF THE NATIONAL CAPITAL AREA

## 2010 APPLICATION FOR LOCAL FEDERATIONS

### Application - Page 4

12)  I certify that the federation named in this application prepares and makes available to the public an annual report that includes a full description of the federation's activities and supporting services, member fees and/or service charges, and identifies its directors/governing body and chief administrative personnel. Include as ATTACHMENT F a copy of the most recently completed annual report. See Instructions Item 12 for additional information.

13)  I certify that the organization named in this application is in compliance with all statutes, Executive orders, and regulations restricting or prohibiting U.S. persons from engaging in transactions and dealings with countries, entities, or individuals subject to economic sanctions administered by the U.S. Department of the Treasury's Office of Foreign Assets Control. The organization named in this application is aware that a list of countries subject to such sanctions, a list of Specially Designated Nationals and Blocked Persons subject to such sanctions, and overviews and guidelines for each such sanctions program can be found at <http://www.treas.gov/ofac>. Should any change in circumstances pertaining to this certification occur at any time, the organization will notify OPM's Office of CFC Operations immediately.

#### CERTIFYING OFFICIAL

I, \_\_\_\_\_ (Print Name), am the duly appointed representative

of \_\_\_\_\_ (Print Organization Name) authorized to certify and affirm all statements enclosed in this application. I certify that I have read all the certifications set forth in this document and affirm their accuracy. In addition, by checking the box next to the certification, the organization named in this application acknowledges and agrees to comply with that certification.

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Typed or Printed Name)

\_\_\_\_\_  
(Title)

\_\_\_\_\_  
(Date Completed)



# COMBINED FEDERAL CAMPAIGN OF THE NATIONAL CAPITAL AREA

## 2010 APPLICATION FOR LOCAL FEDERATIONS

### Supplemental Worksheet

#### My Chosen Cause

We provide new ways for people to give to the charities of their choice.

**EIN:** 12-3456789

**2009 CFC Code:** 12345

**Phone Number:** (202)202-2002x10

**Website URL:** www.chosencause.org

**Taxonomy:** W T Z

**Overhead:** 11.0%

**IRS 990 Total Revenue:** \$20,000.00

**IRS 990 Management Expenses:** \$2,000.00

**IRS 990 Fundraising Expenses:** \$200.00

**Audit Total Revenue:** \$20,000.00

**Audit Total Expenses:** \$2,200.00

**This is how your listing will appear in the printed catalog:**

**12345 My Chosen Cause** (Chosen Cause, LLC) (202)202-2002x10  
www.chosencause.org EIN#12-3456789 We provide new ways for people  
to give to the charities of their choice. 11.0% W,T,Z