

**FEDERAL COMMUNICATIONS BAR ASSOCIATION FOUNDATION**  
**CHARITY AUCTION BENEFICIARY APPLICATION**

For questions regarding this application, or further information about the FCBA Charity Auction, please contact Janeen Wynn (202-293-4000, [janeen@fcba.org](mailto:janeen@fcba.org)). Applications should be submitted to the FCBA by U.S. Mail (1020 19<sup>th</sup> Street NW, Suite 325, Washington, DC 20036) or e-mail ([janeen@fcba.org](mailto:janeen@fcba.org)). All applications must be received by **Friday, April 10, 2020**. Applicants will be notified whether they have been selected no later than **Friday, June 5, 2020**.

**Part A: General Information**

**Organization Name:** \_\_\_\_\_

**Organization Legal Name:** \_\_\_\_\_

**EIN Number:** \_\_\_\_\_

**Website:** \_\_\_\_\_

**Part B: Primary Contacts**

	<b>Organizational Contact #1</b>	<b>Organizational Contact #2</b>
<b>Name</b>		
<b>Title</b>		
<b>Street Address 1</b>		
<b>Street Address 2</b>		
<b>City, State, Zip</b>		
<b>Phone Number</b>		
<b>Fax Number</b>		
<b>E-mail Address</b>		

**Part C: Detailed Organizational Information**

NOTE: All application information must be specific to the applicant organization. National materials will not be accepted for regional or local chapters.

**C1. Mission Statement:** Include a TYPED statement describing the program of the organization in 500 words or less. The statement should describe real services, benefits, or program activities the organization provides.

**C2. Short Description:** Provide a one sentence explanation of your organization that could be used to introduce potential FCBA Charity Auction donors to your organization and the services it provides.

**C3. Antidiscrimination:** Include the full text of your organization's antidiscrimination and equal opportunity statement.

**C4. Local Presence:** Describe your organization's local presence in the DC metropolitan area, either by itself or through its member organizations. Include a description of facilities, employees, beneficiaries, resources, and activities in the greater Washington area. Please also include a general description of any out-of-area facilities, employees, resources, beneficiaries, or activities.

**C5. Groups Served:** Identify in detail the primary beneficiaries of your organization's work, and the services provided to those beneficiaries.

**C6. IRS Determination:**

- I certify that the Internal Revenue Service recognizes the organization 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. **Include a copy of the most recent IRS determination letter.** *(Interim 501(c)(3) letters with expiration dates prior to 12/31/2004 will be accepted only with verification from the IRS that the organization will continue with a 501(c)(3) ruling.)*

**C7. Financial Information:**

Provide the following information and attach a detailed description of each	Amount
Total Government contributions per year (note whether they are recurring or non-recurring)	
Total annual revenue	
Annual management and general expenses	
Annual fundraising expenses	

**C8. Budget:** Attach a copy of your most recent budget and a projected budget for 2018.

**C9. Expense Ratio:** The percentage of administrative and fund-raising expenses to total support and revenue is \_\_\_\_\_%.

**C10. Percent of Government Funding:**

- I certify that the organization named in this application has in the preceding year received \_\_\_\_\_% of its total revenue from government funding.

**C11. Charter:**

- I certify that the organization named in this application is chartered/incorporated under a governmental entity.

Governmental entity or state under which the applicant is chartered/incorporated: \_\_\_\_\_

Year organization was founded \_\_\_\_\_

**C12. Fundraising Activities:** Please describe in detail your fundraising events/activities in the past two years, including the amount of funds raised and the approximate date(s) of the event(s). Also, please include a notation if any of the fundraising events are annual events.

**C13. Annual Report:** Include a copy of the organization's most recently completed annual report. The annual report must identify its directors and chief administrative personnel. If the organization does not publish such a report, a written substitute should be included with this application. A more frequently published document, such as a quarterly newsletter, may be used to meet this requirement, provided that such document is available to the general public upon request and identifies its directors and chief administrative personnel.

**C14. Oversight:** Please describe the practices and policies your organization has in place to oversee the disbursement, use, and tracking of monetary donations. Include in this answer a description of how the organization accounts for funds disbursed.

**C15. Performance Metrics:** Please explain how you measure the effectiveness of your activities, including a description of your criterion for success and indicate the timeframes for the results or findings. Please also identify any studies, measurements, reports, or other metrics you or other organizations have completed or prepared that measure the effectiveness of your organization. Include information about longitudinal studies (if any) and describe the procedures and policies (if any) that you have in place for following up with persons or companies that your organization helps.

**C16. Outreach:** Please describe the nature of your outreach to your target beneficiaries. How can impacted parties become aware of your services?

**C17. Volunteers:** Please describe your methods for recruiting, training and retaining volunteers. Please describe the nature of the services provided by volunteers.

**C18. Affiliated Entities:** Please list any other businesses and charitable organizations that you work with on a regular basis. Please describe the nature of your organization's relationship with this group.

## **Part D: The FCBA Charity Auction**

**D1.** Please provide a detailed description of how the organization plans to use any FCBA donation, including details about the specific project to which the funds would be dedicated. If applicable, please provide an example of the uses of previous charitable donations greater than \$50,000. Please include a description of how you plan on evaluating the success of any project(s) or activity that the FCBA donation is used for.

**D2.** If you are selected as a beneficiary for the FCBA Charity Auction, will you commit, as a condition of receiving an FCBA donation, to use the FCBA donation in accordance with your description in D1 and send the FCBA a report or summary by the end of the following calendar year that identifies how the FCBA's donation was used or the status of any unused funds.

**D3.** What efforts will be made by the applicant to publicize and support the charity auction, including, but not limited to, the sale of raffle tickets and the solicitation of businesses for donations of goods/and or services to be used as raffle or auction prizes? Please identify specific examples of support the applicant can commit to providing.

**D4.** If you are applying as a combination of charitable organizations, how will the proceeds of the auction be divided amongst the charitable organizations?

**D5.** How did you hear about the FCBA Charity Auction?

**D6.** Please identify and describe the opportunities you see for FCBA members (either individually or in groups) to volunteer with your organization.

## **Part E: Signature and Certification**

*I CERTIFY THAT I HAVE READ ALL OF THE CERTIFICATIONS SET FORTH IN THIS DOCUMENT AND THAT MY SIGNATURE BELOW SIGNIFIES THAT I ACKNOWLEDGE AND AGREE WITH ALL SUCH CERTIFICATIONS.*

\_\_\_\_\_  
Certifying Official's Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date