Corporate Giving Program/Foundation Membership Application

___________________________________________
Date of Application

______________________________________________________________________________
Name of Organization (as it should appear in directory and Philanthropy WV records)

______________________________________________________________________________
Primary Contact (voting member of record) Title

______________________________________________________________________________
Address

City State ZIP(+4 code)
(______)_______________________ (______)_______________________
Phone Fax

Email Website

Please list other staff, board members, or contacts who should receive regular mailings & electronic announcements from Philanthropy WV: (attach additional pages or separate list, if necessary)

______________________________________________________________________________
Name Title Email

______________________________________________________________________________
Name Title Email

Philanthropy WV recognizes that corporations/businesses handle their charitable giving in different ways. In most cases, it is handled in three ways which include: Marketing Department/Team through the corporation; directly from the company through their Corporate Giving; or setting up their own Corporate Foundation. Philanthropy WV provides programming and resources for each of these arrangements. As you review this brief two page form, please fill out the section that best reflects your business/corporation’s giving program/foundation.

(A) If you are a CORPORATE GIVING PROGRAM (marketing department or general corporate giving), please complete this section:

Total giving/grantmaking in the last year $___________________ for fiscal year ending: __________________

Grantmaking in WV last year: $___________________ for fiscal year ending: __________________

(B) If you are a CORPORATE FOUNDATION, please complete this section:

Number of Paid Staff (if applicable, for a corporate foundation): full-time: ___ part-time: ___

If a Foundation, Market Value of Assets: $___________________ for fiscal year ending: ___________

Total grantmaking in last year: $___________________ for fiscal year ending: ___________ Grantmaking in WV in last year: $___________________ for fiscal year ending: ___________

If a Corporate Foundation, what is your EIN?: ______________________________

☐ My organization files a 990
☐ My organization files a 990-PF
☐ N/A, my organization does not file a 990
Both CORPORATE GIVING OR FOUNDATIONS please complete this section

(These sections are used for internal purposes to identify programs and services best for you. This information is not shared publicly.)

Year founded: ________________
Funding Interests:

☐ Arts, Culture, Humanities
☐ Education
☐ Environment and Animals
☐ Health
☐ Human Services
☐ International/Foreign Affairs
☐ Public/Society Benefit
☐ Religion
☐ Science and Technology
☐ Other: ___________________

Target Populations, if any:

☐ Early Childhood
☐ Youth
☐ Families
☐ Women
☐ Elderly
☐ Minority:

☐ Other: ___________________

Target Geographic Region:

☐ ___________________

Is there anything else you would like to tell us about your grantmaking institution?

_____________________________________________________________________________

In addition to the application, please attach the following applicable documents (If applying as a corporate giving program, please complete information as available):

☐ Latest 990 or 990-PF and IRS letter of determination (Corporate Foundations)
☐ Annual report and/or list of grant recipients and amounts during past fiscal year (Corp Giving or Fdtn)
☐ Grant guidelines (if any) (Both)
☐ Grant application form (if any) (Both)

Applications are considered for approval by the executive committee or board of directors on a regular basis throughout the year.

Consent & Legal Assurance
We permit the use of the email addresses, fax numbers, and mailing address provided in this application to be used for Philanthropy WV communication and correspondence. I affirm to the best of my knowledge that our organization or corporation is in compliance with applicable state and federal regulations and all information provided in this application is accurate and current. Our organization will respect and comply with Philanthropy WV’s non-solicitation policy.

_____________________________________________________________________________

Authorized Signature                       Date

Print Name                                Title

Dues: Philanthropy West Virginia has set a minimum membership level for Corporate Giving Programs and Foundations to be $1,000. If more than two employees participate in programming, the amount increases per the schedule below.

<table>
<thead>
<tr>
<th>Corporate Giving Pgm/Foundation</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Minimum, up to two participants</td>
<td>$1,000</td>
</tr>
<tr>
<td>Up to five participants</td>
<td>$2,500</td>
</tr>
<tr>
<td>Corporate Wide Membership</td>
<td>$5,000</td>
</tr>
</tbody>
</table>

Please mail completed application and payment to:

Philanthropy West Virginia,
P.O. Box 1584,
Morgantown, WV 26505
T: 304-517-1450
info@philanthropywv.org
www.PhilanthropyWV.org

Please note that the information provided in this document is confidential and maintained by Philanthropy West Virginia in our central office records.