



**Private & Family Foundation
Membership 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, trustees, 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

Number of Paid Staff (if applicable): full-time: _____ part-time: _____

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:** _____

Type of Grantmaker:

- Private/Independent Foundation
- Family Foundation
- Government Agency
- Other (please specify below):
- Bank Trust
- Donor Advised Funds
- Federated Fund
- Organized Giving Circle

Funding Interests:

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

Year founded: _____

Target Populations, if any:

EIN: _____

- My organization files a 990
- My organization files a 990-PF
- N/A
- Operating Foundation
- Religious Organization
- Service Club
- Supporting Organization
- Other: _____

- Early Childhood
- Youth
- Families
- Women
- Elderly
- Minority: _____
- Other: _____
-

Target Geographic Region:

Does your organization also raise funds or seek grants? ___ Yes ___ No

*If yes, please supply your last year's annual budget. Your organization's grant expenditures (grants, related program costs, administrative costs for administering grants) must represent at least 30% or more of your annual budget, ensuring that you are primarily a grant**MAKING** institution.*

Are your organization's grant distributions primarily made on a discretionary basis to multiple recipients that are not subsidiary or related to the grantmaker?

___ Discretionary ___ Directed ___ Combination

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:

- Latest 990 or 990-PF
- IRS letter of determination
- Annual report and/ or list of grant recipients and amounts during past fiscal year
- Grant guidelines (if any) and Grant application form (if any)
- Budget

The executive committee or board of directors on a regular basis throughout the year considers applications for approval.

Contact Consent:

I understand that by providing the fax number(s) and email address(es) on behalf of _____, I am authorized to and hereby consent for this organization to receive faxes and/or email messages sent on behalf of Philanthropy West Virginia

Signature

Date

Legal & Confidentiality Assurance:

I affirm to the best of my knowledge that our organization is in compliance with applicable state and federal regulations. Our foundation/corporate giving program promises to respect the non-solicitation policy and space of Philanthropy WV.

Authorized Signature

Date

Print Name

Title

Dues schedule: Philanthropy West Virginia bases its dues on the average of the previous two year's grantmaking.

Total grantmaking in last year: \$ _____ **for fiscal year ending:** _____

Total grantmaking two years ago: \$ _____ **for fiscal year ending:** _____

Average grantmaking during previous two years \$ _____

Average Grantmaking	Dues Level
<i>Private & Family Foundations (In-State)</i>	
\$1 -- \$100,000	\$350
\$100,001 -- \$500,000	\$650
\$500,001 -- \$1,000,000	\$950
\$1,000,001 -- \$2,500,000	\$1,300
\$2,500,001+	\$3,000

** Membership allows for two primary contacts who will receive all communications and benefits, including member discounts for Philanthropy WV programs.

Please mail completed application and payment to:

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