## KENTUCKY EMPLOYEES CHARITABLE CAMPAIGN REQUIREMENTS FOR ELIGIBILITY

Organization:		
Address:		
Telephone:		
Contact Person:		
Address:		
Telephone:		
I,(Name)	, am the duly appointed	
	(Organization)	
authorized to certify and affirm all statements enclosed in this application.		
		(Signature)
		(orginiture)
	(Typed or	Printed Name)
		(Title)

Date Completed: \_\_\_\_\_

1. I certify that the organization named in this application has a substantial Kentucky presence which means a facility, staffed by professionals or volunteers, available to provide its services and open at least 15 hours a week and with a regional or statewide presence. Such services are available to state employees in the local community. Such services directly benefit human beings whether children, youth, adults, the aged, the ill and infirm, or the mentally or physically handicapped. Such services consist of care, research, education or prevention in the fields of human health or social adjustment and rehabilitation; relief for victims of natural disasters and other emergencies; or assistance to those who are impoverished and in need of food, shelter, clothing and basic human welfare services.

Certifying Official's Signature

2. I certify that the organization named in this application is a charitable federation, a legally constituted grouping of at least 10 member health and human organizations, all of which qualify as exempt voluntary charitable organizations under 26 U.S.C. 501(c)(3).

Certifying Official's Signature

3. I certify that the organization named in this application is recognized by the Internal Revenue Service as tax-exempt under 26 U.S.C. 501 (c)(3). (Include a copy of the IRS determination letter as Attachment A.)

Certifying Official's Signature

4. I certify that the organization named in this application is currently registered and in compliance with the reporting requirements of the Secretary of State. (Include a copy of this form as Attachment B.)

Certifying Official's Signature

5. I certify that the expenses of the organization named in this application connected with lobbying and all attempts to influence voting or legislation at the local, State or Federal level would classify it as a tax-exempt agency under 26 U.S.C. 501(h).

Or

I certify that the organization named in this application does not engage in lobbying nor does it attempt to influence voting or legislation at the local, State or Federal level.

Certifying Official's Signature

6. I certify that the organization named in this application accounts for its funds in accordance with generally accepted accounting principles (GAAP) and was audited in accordance with generally accepted auditing standards (GAAS) by an independent certified public accountant in the immediately preceding year. (Include a copy of the organization's <u>most recently completed</u> audit as Attachment C.)

Certifying Official's Signature

7. I certify that the organization named in this application is directed by an active and responsive governing body whose members have no material conflict of interest and, a majority of which serve without compensation. (Include as Attachment D a list containing the names and addresses of the organization's governing body. Also include a statement describing each person's participation in the conduct of the organization's affairs. If there are more than ten members of the governing body, list the names and addresses of each and only a description of the executive committee member's role in the conduct of the organization's affairs.)

Certifying Official's Signature

8. I certify that the organization named in this application has a written non-discrimination policy. (Include a copy as Attachment E of this policy.)

Certifying Official's Signature

9. I certify that the organization named in this application in the immediately preceding year has spent 25% or less of its total support and revenue on administrative and fundraising expenses. The actual percentage of administrative and fundraising expenses is \_\_\_\_\_%.

Or

I certify that the organization named in this application in the immediately preceding year has spent in excess of 25% of its total support and revenue on administrative and fundraising expenses. The actual percentage of administrative and fundraising expenses is \_\_\_\_\_\_% and this percentage is reasonable under the circumstances. (Include as Attachment F a detailed justification of the organization's administrative and fundraising expenses and a detailed plan to reduce expenses to 25% in the next fiscal year.)

Certifying Official's Signature

10. I certify that the organization named in this application conducts publicity and promotional activities based upon its actual program and operations, that these activities are truthful and non-deceptive, includes all material facts and makes no exaggerated or misleading claims.

Certifying Official's Signature

11. I certify that the organization named in this application prepares and makes available to the public an annual report that includes a full description of the organization's activities and supporting services and identifies its directors/governing body and chief administrative personnel. (The annual report must cover the fiscal year or calendar year ending not more than 18 months prior to January of the campaign year to which the organization is applying. 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 describes the organization's activities and supporting services and identifies its directors and chief administrative personnel. Include as Attachment G a copy of the most recently completed annual report for the preceding year or newsletter.)

Certifying Official's Signature

12. I certify that the organization named in this application shall not duplicate or disclose its KECC contributor lists without written consent of participants, permits no payment of commissions, finders fees, percentages, bonuses, or similar practices in connection with its KECC fundraising practices.

Certifying Official's Signature

13. I certify that organizations represented by the federation named in this application will only solicit state employees during the campaign dates determined by the Kentucky Employees Charitable Campaign Committee.

Certifying Official's Signature

Secretary of Personnel Cabinet's Signature