TFEC Fiscal Sponsorship Application



PROJECT The Foundation for Enhancing Communities (TFEC) appreciates the opportunity to consider your application for fiscal sponsorship, reviewing your Project's purpose,

goals, actions items, budget and fundraising plan. We strive to review all applications within 1 month of submission, however, this time frame is not guaranteed.

Steps to Apply for Fiscal Sponsorship

Complete the Fiscal Sponsorship Application

• Please review all eligibility requirements before starting the application.

What Happens Next?

- **Phase 1:** Reviewers may contact you directly with questions or feedback about your application during the review process.
- **Phase 2:** TFEC receives your application, reviews it and contacts you to set up a phone screening to learn more about your Project, answer any of your questions about Fiscal Sponsorship with TFEC and share IRS and/or governmental fiscal sponsorship guidelines.
- **Phase 3:** Your application will be submitted for final review (including legal and insurance assessment) to determine if TFEC can extend fiscal sponsorship to your Project. This phase could take up to three months, since the fiscal sponsorship committee may have additional questions or request additional documentation.
- **Phase 4:** Once your Project has been determined to be eligible for fiscal sponsorship:
 - Your Project's fiscal sponsorship administrative fee will be determined based on your Project's scope of work, budget and needs
 - You will work with directly with a TFEC team member in developing your Fiscal Sponsorship Agreement

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- You will complete an online review of TFEC's Project Services Handbook
- o You will sign the Fiscal Sponsorship Agreement
- You will work directly with a TFEC team member in reviewing the next steps to begin implementing your Project's scope of work

Questions About the Fiscal Sponsorship Process?

Reach out the Debbie Garrison, Philanthropic Officer at dgarrison@tfec.org or at 717-236-5040

FISCAL SPONSORSHIP APPLICATION

* Required Response

Fiscal Sponsorship Application Acknowledgment I acknowledge that I have read the eligibility criteria for TFEC's fiscal sponsorship listed below.*

Yes, I have read the criteria

- Projects are not providing a duplication of community services
- Projects do not attempt to influence legislation as a substantial part of their activities
- Projects cannot participate in any campaign activity for or against political candidates
- Projects must be organized or operated for the benefit of private interests
- No part of the Project's donations may inure to the benefit of any private shareholder or individual
- Projects fundraising activities must be in compliance with fundraising guidelines from the IRS and any federal, state, local laws and regulations that may affect these activities
- Projects and any of its activities must not present unacceptable levels of liability for TFEC, as determined by TFEC's legal consultants
- Projects and any of its activities must fall within TFEC's current insurance coverage, as determined by TFEC's insurance broker
- Projects and any of its activities cannot provide any child care/day care services

PROJECT PRIMARY CONTACT INFORMATION

Project Primary Contact Name*

First Last

Project Primary Contact Address*

Street Address

Address Line 2

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| City | State | ZipCode | | |
|--|-------|---------|--|--|
| Project Primary Contact Phone* | | | | |
| Project Primary Contact Email* | | | | |
| SECONDARY PROJECT CONTACT INFORMATION Project Secondary Contact Name* | | | | |
| First | Last | | | |
| Project Secondary Contact Address* Street Address | | | | |
| Address Line 2 | | | | |
| City | State | ZipCode | | |
| Project Secondary Contact Phone* | | | | |
| Project Secondary Contact Email* | | | | |
| PROJECT INFORMATION What is the name of the Project for which you are seeking fiscal sponsorship? * | | | | |
| Where is the location of your Project i.e., where will activities take place?* (Please provide geographic information) | | | | |

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If you have one, what is the website address of your Project?

| Is your Project currently being fiscally sponsored by another organization?* | | | | |
|--|----|--|--|--|
| Yes | No | | | |
| If yes, please describe* | | | | |
| Is your Project incorporated as any type of legal entity?* Yes No | | | | |
| If yes, please describe* | | | | |

If you have any other social media pages for your Project, please list them here.

PURPOSE OF THE PROJECT

What is the charitable mission and purpose of your Project? *

(Please tell us what problem/challenge your Project seeks to solve. Please also tell us what the expected positive influences of your Project will be including how many people will benefit as a result of your work or any other benefit to the community?)

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GOALS OF THE PROJECT

How does your Project seek to solve the challenge/problem? *

ACTION ITEMS FOR THE PROJECT

Please provide a list of current and/or proposed activities that your Project will engage to meet this community need. *Please be specific, realistic and as thorough as possible.**

PROJECT BUDGET

Please attach a detailed line item of expenses and project income for your Project's 1st year. *

A Project budget must be included with your Fiscal Sponsorship Application.

PROJECT FUNDING PLANS

Do you currently have funding for your Project? *

Yes No

If yes, please describe*

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| Where do you expect the funding to come from? (Please check all that apply) * | | |
|---|----------------------------|---|
| | Individual donations | |
| | Fundraising community ev | ents |
| | Foundation grants | |
| | Governmental grants | |
| | Corporate sponsorships | |
| | Web page donation page | |
| | Other | |
| If Other, ple | ase describe* | |
| | | |
| Do you curr | ently have commitments for | r any of your funding* |
| Yes | | No |
| If yes, please | e describe* | |
| Do you curr county, state | | for any type of government funding (city, |
| 162 | | 110 |
| If yes, please | e describe* | |

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ADDITIONAL PROJECT QUESTIONS

| Does your Project currently or plan to work with independent contractors?* | | | | |
|--|---|--|--|--|
| Yes | No | | | |
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| If yes, please describe* | | | | |
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| Do you currently have or intend to develo | p any significant intellectual property? | | | |
| Yes | No | | | |
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| If we also describet | | | | |
| If yes, please describe* | | | | |
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| Is there anything else you would like to te | ll us about your Project that you feel we | | | |
| should know or understand?* | 11 us us out 1 20,000 111ut you 2001 We | | | |
| should know of understand: | | | | |
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| How did you hear about us?* | | | | |
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Email completed application and project budget to Debbie Garrison, Philanthropic Officer at dgarrison@tfec.org