

2016 CFC LOCAL FEDERATION APPLICATION REVIEW

Federation: _____

IRS Master File Name (if different from above): _____

CFC Number: _____ EIN: _____ AFR: _____%

REVIEWER RECOMMENDATION: <input type="checkbox"/> ADMIT <input type="checkbox"/> DENY	
NUMBER OF MEMBERS APPLYING:	_____
NUMBER THAT WITHDREW:	_____
NUMBER RECOMMENDED FOR APPROVAL:	_____
NUMBER RECOMMENDED FOR DENIAL:	_____
(List each denied member with reason for denial:)	
 Comments:	
 Reviewer Name:	 Date:
FINAL LFCC DECISION: <input type="checkbox"/> ADMIT <input type="checkbox"/> DENY	
Comments:	
 Name:	 Date:

All Certification Statements Checked: (5 CFR §950.203(b))	Yes	No	
	<input type="checkbox"/>	<input type="checkbox"/>	
Certifying Official's Signature (5 CFR §950.203(b))	<input type="checkbox"/>	<input type="checkbox"/>	

Attachment A Lists at least 15 Member Organizations, in Addition to the Federation Itself, That Were Found Eligible to Participate as Local Organizations: Yes No (5 CFR §950.303(c))

Have the charities' 501(c)(3) status been verified through and updated in the OPM Charity Registry System? Yes No (5 CFR §950.303(c))

Comments:

IRS Determination Letter (Only 1 is required) (5 CFR §950.202(b))	Yes	No	N/A
IRS Letter is for Applicant: (5 CFR §950.202(b))	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If no, DBA Documentation Provided:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Group Exemption Letter:(CFC Memorandum 2006-22)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bona-Fide Chapter/Affiliate Documentation: (5 CFR §950.401(i))	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments:

			N/A
			<i>Federation in operation</i>
Audited Financial Statements (5 CFR §950.303(e)(2)(i))	Yes	No	less than one year
Name matches IRS determination letter or DBA: (Application Instructions Item 2)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
GAAS/GAAP Audit and Financial Statements: (5 CFR §950.203(a)(2))	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Audit report on letterhead with signature (CFC Memo 2008-10)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Fiscal Year ended 6/30/14 or later: (5 CFR §950.203(a)(2))
 Verifies that federation is honoring designations
 to member organizations: (5 CFR §950.303(e)(2)(i))
 Comments:

IRS Form 990:

	Yes	No	
Name and EIN match IRS determination letter or DBA: (Application Instructions Item 2)	<input type="checkbox"/>	<input type="checkbox"/>	
Same fiscal period as audit: (5 CFR §950.203(a)(3))	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Audit not required
Board, including comp. listed: (5 CFR §950.203(a)(5))	<input type="checkbox"/>	<input type="checkbox"/>	
Majority of Board is not compensated: (5 CFR §950.203(a)(5))	<input type="checkbox"/>	<input type="checkbox"/>	
Number of Board members listed on Page 1, Line 3 is equal to or less than the number of directors/trustees in Part VII:	<input type="checkbox"/>	<input type="checkbox"/>	
Administrative and Fundraising Rate Calculated by Local Campaign:			_____%
Add the amount in Part IX (Statement of Functional Expenses), Line 25, Column C (Management and General Expenses) to the amount in Line 25, Column D (Fundraising Expenses), and divide the sum by Part VIII (Statement of Revenue), Line 12, Column A (Total Revenue).			
Method of Accounting:	<input type="checkbox"/> Accrual	<input type="checkbox"/> Cash	<input type="checkbox"/> Other
Can be found on 990 Part XII, Line 1.			
(Note: Only organizations with \$100,000 or more in total revenue are required to use the accrual method of accounting.)			
Comments:			

Board Information:

	Yes	No
Each board member's term of office is provided (beginning and ending dates): (5 CFR §950.303(e)(2)(ii))	<input type="checkbox"/>	<input type="checkbox"/>
2015 Board meeting dates: (5 CFR §950.303(e)(2)(ii))	<input type="checkbox"/>	<input type="checkbox"/>
2015 Board meeting locations: (5 CFR §950.303(e)(2)(ii))	<input type="checkbox"/>	<input type="checkbox"/>
Comments:		

Annual Report:

	Yes	No
Covers a fiscal period that ended 6/30/14 or later: (5 CFR §950.303(e)(2)(iii))	<input type="checkbox"/>	<input type="checkbox"/>
Identifies Board: (5 CFR §950.303(e)(2)(iii))	<input type="checkbox"/>	<input type="checkbox"/>
Identifies chief administrative personnel: (5 CFR §950.303(e)(2)(iii))	<input type="checkbox"/>	<input type="checkbox"/>
Describes organization's activities during year of report: (5 CFR §950.303(e)(2)(iii))	<input type="checkbox"/>	<input type="checkbox"/>
Describes federation's dues/fees structure: (5 CFR §950.303(e)(2)(iii))	<input type="checkbox"/>	<input type="checkbox"/>
Comments:		

LFCC Assessment:

- No findings
- AFR calculated by LFCC is different from AFR in Certification #6
- Missing information submitted
- Did not provide the following information requested by LFCC (list):