



2020 UNAFFILIATED AGENCY APPLICATION INSTRUCTIONS

APPLICATION DEADLINE IS MONDAY, MARCH 2, 2020. Applications will be accepted electronically or by mail with all supporting documents. **Applications submitted electronically will be accepted with typed signatures.** If mailed, must be postmarked by, or prior to March 2, 2020. There will be no extensions or exceptions.

Applications sent electronically: sobrien@njecc.net Applications sent by mail: NJECC, PO Box 566, Allentown, NJ 08501.

Before submitting your application, please check to make sure all information is accurate and all attachments and signatures are included. Incomplete applications will not be considered.

The ECC Steering Committee will assess applications for compliance and completeness before making recommendations for approval or decline. Charities Registration/Division of Consumer Affairs will notify all applicants within 30 days of the deadline of their campaign status.

Instructions for Completion

It shall be the responsibility of the Charity to certify you are in compliance with Charities Registration and to make sure updated documents are on file with Charities Registration. The NJECC Steering Committee reserves the right to request information at any time from a charity that documents it is in compliance with campaign regulations. Such information shall be provided within 10 days of the notification postmark date. The NJECC Steering Committee may deny eligibility of a charity if you fail to provide the requested information within the stated 10-day period.

APPLICANT INFORMATION

LEGAL NAME OF ORGANIZATION

The name of the applicant charity as it is listed with the NJ Department of Charities Registration/Division of Consumer Affairs.

MAILING ADDRESS

List the mailing address where communications from the NJECC will be sent.

NAME/TITLE OF ORGANIZATION CONTACT

Provide the name, title, telephone, and email address for the Primary Contact Person for communication about the NJECC application.

WEBSITE

List the complete Internet address to be used in all 2020 campaign materials. If your organization does not have a website, please put N/A in this space.

CHARITIES REGISTRATION # OR EXEMPTION

Please provide the Charities Registration Number for the Agency unless it is a religious entity or educational institution exempt from registration with the NJ Charities Registration Section. Charity number begins with CH, 7 digits long and ends with 00. If exempt, provide exemption number and basis for exemption.

FEIN#

Federal Employer Identification Number (9-digit number assigned by the IRS)

CERTIFICATIONS

“Yes” or “No” must be checked for all questions in this section. Charities Registration will confirm required (updated) documents are on file.

The following data must be submitted for each of the **TWO** fiscal year’s preceding this application. **Information prior to 2017 WILL NOT BE ACCEPTED. The agency must have raised at least \$15,000 from individual citizens of New Jersey.**

Total Amount of funds raised for FYE 2018: \$
Amount of those funds raised from individual citizens of NJ: \$

Total Amount of funds raised for FYE 2019: (if 2019 is unavailable, submit 2017): \$
Amount of those funds raised from individual citizens of NJ: \$

ATTACHMENTS

Attachment A List of Names and Address of Board of Directors and Executive Personnel

A list of names and addresses of the governing board, officers of the governing board, AND the names and addresses of executive staff at the time of application submission. **List will not be accepted without addresses.**

Attachment B Anti-Terrorism Compliance Measures Form

Attached completed and signed official certification that the Agency is in compliance with the USA PATRIOT ACT as well as other counterterrorism laws.

Attachment C List of 25-Word Description (Excel Spreadsheet)

Submit a 25-word description (**NO CAPS of entire name or description**) of the health, welfare or human care services that your agency provides, along with the Charities Registration number, telephone number, website and FEIN # via email to sobrien@njecc.net using **ONLY** the database spreadsheet provided on the NJECC website (www.njecc.net). This statement will be included in the published brochure/reference guide and must not exceed 25 words. The Amended Articles of Incorporation Name Change/Amendment Page must be submitted if there is a name change. Without this documentation, your eligibility cannot be verified and you will not be eligible to participate.

Attachment D CRI-200, CRI-150I, or CRI-300R

Submit completed most recent NJ Charities Registration Form; CRI-200, CRI-150I or CRI-300R
(Two years if you are a NEW applicant)

Attachment E IRS Form 990

Most recent IRS Form 990 **signature page, revenue page, and expense page. (Do not send entire Form 990)** Information prior to 2017 will not be accepted. **Attachment D & E must be for the same time period. Agency officer or preparer must sign IRS Form 990.** If the IRS 990 has been submitted electronically, please provide Form 8879EO – IRS eFile Signature Authorization.
(Two years if you are a NEW applicant.)

Attachment F Annual Report

Submit a copy of Annual Report for the most recent fiscal year (acceptable substitutes: year end summary, newsletter or flyer which describes the agency's activities and accomplishments and provides the names of chief administrative personnel)

SIGNATURE

The NJ Employees Charitable Campaign requires that all organizations applying for admission certify compliance with the requirements as outlined within the 2020 NJECC application.

Please sign and date your application. The signatory must be an authorized agent of the organization. If submitting electronically, typed signatures will be accepted.

Please submit your completed application package including all required attachments to:

Electronically: sobrien@njecc.net

Mail: New Jersey Employees Charitable Campaign
PO Box 566
Allentown, NJ 08501

**The deadline for receipt of applications is Monday, March 2, 2020
Applications must be postmarked no later than Monday, March 2, 2020.**

It is the applicant's responsibility to follow-up with the campaign manager prior to this date if they do not receive an acknowledgement of receipt for an electronic application submission.

We are glad to answer any questions regarding the application procedures.

Susan O'Brien/Campaign Manager
609.477.8306
sobrien@njecc.net

**NEW JERSEY EMPLOYEES CHARITABLE CAMPAIGN
PO BOX 566
ALLENTOWN, NJ 08501**

UNAFFILIATED AGENCY APPLICATION 2020 CAMPAIGN

READ INSTRUCTIONS CAREFULLY BEFORE COMPLETING

Each charitable organization accepted into the NJECC must be a registered charity in full compliance with the registration requirements of New Jersey law, unless it is a religious entity or an educational institution. To confirm the registration status of an agency or request the charitable registration number, call the Division of Consumer Affairs Charities Registration Section at 973-504-6215 or visit their website at <http://www.njconsumeraffairs.gov/charities/pages/default.aspx>. If the agency is not in full compliance with the registration requirements, it will not be accepted into the campaign.

PART A APPLICANT INFORMATION

Application Status: NEW RENEWAL

Legal Name of Agency: _____
(As Registered with NJ Division of Consumer Affairs)

Agency Address: _____

Contact Name/Title
For Application _____

Telephone #: _____

Fax #: _____

Email Address: _____

Web Address: _____

Charities Registration #: _____

FEIN (Federal Employer Identification Number) _____

If Exempt, provide Exemption # _____ Religious Educational Library

PART B CERTIFICATIONS

Must Check “Yes” or “No” to ALL the following questions:

Is the Agency directed by a governing body whose members have no material conflict of interest in their service on the governing body? YES NO

Has the agency received tax-exempt status pursuant to Section 501(c)(3) of the Internal Revenue Code? If “NO”, STOP you are not eligible to participate. YES NO

Has the agency registered as a charitable organization pursuant to the NJ Charitable Registration and Investigation Act? Your agency must be in compliance at the time of the application deadline (03/02/20). YES NO

Is your agency IRS Determination Letter on file with Charities Registration? YES NO

Has the agency been audited in accordance with generally accepted accounting principals by an independent CPA for each of the organizations 2 fiscal years preceding this application? YES NO

For new applicants only, is the agency Articles of Incorporation and By Laws on file with Charities Registration? YES NO

Submit the following data for each of the two fiscal years preceding this application. **Information prior to 2017 WILL NOT BE ACCEPTED.**

Total Amount of funds raised FYE 2018 \$ _____

Amount of those funds raised from individual citizens of NJ: \$ _____

Total Amount of funds raised FYE: 2019 (if 2019 is unavailable, submit 2017) \$ _____

Amount of those funds raised from individual citizens of NJ: \$ _____

PART C ATTACHMENTS

- Attachment A** List of Board of Directors AND Executive Personnel
- Attachment B** Anti-Terrorism Compliance Measures Form
- Attachment C** List of 25-Word Description – **Excel Spreadsheet, Not In All Caps**
- Attachment D** **CRI-200, CRI-150I, or CRI-300R** (most recent 2 years if first time applicant.)
- Attachment E** IRS Form 990 – signature page, revenue page and expense page **ONLY** (Most recent 2 years if first time applicant)
- Attachment F** Annual Report (most recent 2 years if first time applicant)

PART D SIGNATURE

*I certify that the information provided herein is true and correct to the best of my knowledge.
I also recognize that this campaign is the only vehicle by which State employees can be solicited for donations throughout the year and we will not reach out through the workplace for donations outside of this.*

Print, sign, and mail or email your completed application and attachments.

Date: _____

Authorized Official Signature: _____

Print Name/Title: _____

Typed signature will be accepted for electronic submission only.



EMPLOYEES CHARITABLE CAMPAIGN

ANTI-TERRORISM COMPLIANCE MEASURES

IN compliance with the spirit and intent of the USA PATRIOT ACT and other Counter-terrorism laws, the New Jersey Employees Charitable Campaign requests that each funded agency (“Organization”) certify the following:

“I hereby certify on behalf of (*Agency Name*) _____

that all New Jersey Employees Charitable Campaign funds and donations will be used in compliance with all applicable anti-terrorist financing and asset control laws, statutes and executive orders.”

Signature of Authorized Official (*required*) _____

Print Name _____

Title _____

Date _____

Typed signature will be accepted for electronic submission only.