

2020 AGENCY ALLOCATION QUESTIONNAIRE

Agency Name:	
Contact Person/Title:	Date:
Address:	Telephone:
Email:	
	Tax Exempt Organization 501c(3):Y/N?
Website address:	
Amo	ount Requested:

Instructions: To be considered for funding by the Greensboro Jewish Federation for this year, all agencies must return one copy of each, via email to Michele Perrell, Director of Finance and HR: mperrell@shalomgreensboro.org and copy Marilyn Chandler, Executive Director: mchandler@shalomgreensboro.org by Monday, April 20, 2020

- Completed questionnaire, please limit to 4 pages
- List of current Board of Directors
- Actual Statement of Financial Position (Balance Sheet) and Statement of Activities (P&L) for trailing twelve months if possible, or for the most recent fiscal year end
- Most recent budget
- IRS letter indicating tax exempt status
- Last year-end audit for agencies requesting \$10,000 or more
- Detailed statement of its history, purposes and activities
- Each applicant may prepare a short video (up to 10 minutes) that highlights their organization's mission and what impact the funding will make. These videos will be shared with the allocations committee. Deadline for the video is May 1.
- Organizations requesting \$25,000 or more will have an opportunity to make a presentation to the committee in person (no more than 30 minutes followed by a Q & A session) on one of the following dates: May 21 or May 27 between 6 p.m. and 7 p.m. Please contact Michele Perrell to schedule.
- Requests for equipment or other capital expenditures will not be considered
- Funding for programs serving children younger than kindergarten or for day camps or day care services will not be considered

1. Agency mission statement? If you do not have one, please describe the purpose of your agency in one paragraph.
2. Give a brief summary of your agency's notable successes. In what ways have these successes been impactful or important?
3. If you received an allocation last year, how was it spent?
4. Specifically how will your agency be using the funds from the Federation? If possible, please identify the approximate number of Jews and Jewish families in North Carolina served by your organization. If you have made a request in the past, what is the difference between this current request and your earlier requests(s)?
5. Please state anticipated program changes (enhancements of existing programs, addition of new ones, elimination of program components) for your agency/institution over the next 3 to 5 years, and why.

6. Briefly describe how you evaluate whether your agency is meeting its objectives (e.g. surveys, community feedback, service statistics, other methods).
7. Do you work collaboratively with other agencies (please identify them), and on which programs or projects?
8. If other agencies/organizations provide similar services/programs within your target demographic, how are you unique? How do you work together? (please be specific)
9. Please briefly describe the agency's Board or other governing bodies, addressing: a. How frequently does it meet and what are its primary functions?
b. Is there an Executive Committee? How frequently does it meet and what are its primary functions?
c. Are 100% of the Board members donors to your organization?
d. Do Board members participate in fundraising for the organization?
10. Does your agency conduct supplementary fundraising in the Greensboro area? If so, describe your fundraising activities. How much was raised in Greensboro during the last fiscal year and from how many individuals? Do you anticipate any new fundraising this coming year? (Please specify.)

11. Other Funding Sources:		
<u>Funding Source</u>	<u>Total Request</u>	Amount Committed
12. What percent of your revenue is from	n Federations?	
13. [for local agencies only] Do 100% of Federation?	your board member	rs contribute to your local Jewish
14. What percent of your annual revenu	e is received from er	ndowment revenue?
15. In regard to your current financial s than 25%.	tatement, please exp	lain budget variances of greater
16. [for national agencies only] Do you co	nsider the allocation	made by the Greensboro Jewish
Federation to your organization to be an	nual dues?	
17. [for national/regional agencies only] A	re there members of	f the Greenshoro Jewish
Community who sit on your board? If so		one of consisting the state of
· ·		
Signature of chief staff person and officer of	of the requesting agen	cy Board indicating approval of
request submitted and of all written Federat		• • • •
print name/title	print name/t	itle
	-	
signature	signature	