Form **1023** (Rev. September 1998) Department of the Treasury Internal Revenue Service

Application for Recognition of Exemption
Under Section 501(c)(3) of the Internal Revenue Code

OMB No. 1545-0056

Note: *If exempt status is approved, this application will be open for public inspection.*

Read the instructions for each Part carefully.
A User Fee must be attached to this application.
If the required information and appropriate documents are not submitted along with Form 8718 (with payment of the appropriate user fee), the application may be returned to you.
Complete the Procedural Checklist on page 8 of the instructions.

Part I Identification of Applicant

1a Full name of organization (as shown in organizing document) Community Foundation of Tompkins County, Inc.	2 Employer identification number (EIN) (If none, see page 3 of the **Specific Instructions.**) 16 : 1587553
1b c/o Name (if applicable)	3 Name and telephone number of person to be contacted if additional information is needed
1c Address (number and street): 317 West State Street — Room/Suite:	(607) 273-4200 Elena S Flash
1d City, town, or post office, state, and ZIP + 4. If you have a foreign address, see **Specific Instructions** for Part I, page 3. Ithaca, New York 14850-5490	4 Month the annual accounting period ends March
	5 Date incorporated or formed 2 May 2000
1e Web site address www.tcounty.org (name reserved only)	6 Check here if applying under section: a ☐ 501(e) b ☐ 501(f) c ☐ 501(k) d ☐ 501(n)

7 Did the organization previously apply for recognition of exemption under this Code section or under any other section of the Code? If "Yes," attach an explanation. ☐ Yes ☑ No

8 Is the organization required to file Form 990 (or Form 990-EZ)? If "No," attach an explanation (see page 3 of the **Specific Instructions**). ☐ N/A ☑ Yes ☐ No

9 Has the organization filed Federal income tax returns or exempt organization information returns? If "Yes," state the form numbers, years filed, and Internal Revenue office where filed. ☐ Yes ☑ No

10 Check the box for the type of organization. ATTACH A CONFORMED COPY OF THE CORRESPONDING ORGANIZING DOCUMENTS TO THE APPLICATION BEFORE MAILING. (See **Specific Instructions** for Part I, Line 10, on page 3.) See also Pub. 557 for examples of organizational documents.)

a ☑ Corporation—Attach a copy of the Articles of Incorporation (including amendments and restatements) showing approval by the appropriate state official; also include a copy of the bylaws.

b ☐ Trust— Attach a copy of the Trust Indenture or Agreement, including all appropriate signatures and dates.

c ☐ Association—Attach a copy of the Articles of Association, Constitution, or other creating document, with a declaration (see instructions) or other evidence the organization was formed by adoption of the document by more than one person; also include a copy of the bylaws.

If the organization is a corporation or an unincorporated association that has not yet adopted bylaws, check here ▶ ☐

I declare under the penalties of perjury that I am authorized to sign this application on behalf of the above organization and that I have examined this application, including the accompanying schedules and attachments, and to the best of my knowledge it is true, correct, and complete.

Please Sign Here ▶ Diane H. Shafer (Signature) DIANE H. SHAFER - CO-CHAIR (Type or print name and title or authority of signer) 6/23/00 (Date)

For Paperwork Reduction Act Notice, see page 7 of the instructions. Cat. No. 17133K

Part II Activities and Operational Information

1 Provide a detailed narrative description of all the activities of the organization—past, present, and planned. **Do not merely refer to or repeat the language in the organizational document.** List each activity separately in the order of importance based on the relative time and other resources devoted to the activity. Indicate the percentage of time for each activity. Each description should include, as a minimum, the following: **(a)** a detailed description of the activity including its purpose and how each acitivity furthers your exempt purpose; **(b)** when the activity was or will be initiated; and **(c)** where and by whom the activity will be conducted.

The Community Foundation of Tompkins County, Inc., solicits and manages permanent charitable endowments for the benefit of the region's nonprofit, charitable, and human service organizations. All activities will be initiated during the summer and fall of 2000 and then continue into the new calendar year. In nearly all cases, staff, volunteers and board members will perform the activities. Where appropriate outside services may be hired: accountant, legal counsel, financial and investment managers.

Grantmaking (30 percent): The ultimate purpose of the Community Foundation of Tompkins County, Inc. is to make effective and strategic grants to benefit the residents of the community and enhance the charitable and nonprofit services in the region. Grants will be made by the board of directors of the Foundation based on a thoughtful assessment of the charitable priorities in the community. Some grants will be made based on these assessed needs and others will be made in response to requests for proposals (RFPs). The activity will begin once sufficient funds have been raised by the Foundation.

Solicitation (30 percent): Critical to the grantmaking process will be the cultivation of organizations and individuals and the solicitation of the same for permanent charitable endowments. Staff, board members and other volunteers will cultivate and solicit through group gatherings, one-on-one meetings, direct mail and publications including brochures and newsletters. In addition, the Foundation will approach the financial and legal advisory community to encourage them to approach their clients to consider charitable giving in their family financial and estate planning.

Educational (20 percent): Through communications, publications, public service advertisements, and workshops, the Foundation will educate and inform the public about charitable giving and philanthropy, the nonprofit community and nonprofit management. It will also seek ways to utilize new technologies, including the Internet, to provide resources and information to individuals, organizations, and corporations.

Investment (10 percent): Oversee outside managers in the investment of the Foundations assets and permanent endowments. A board committee will most probably be responsible for monitoring the investment managers' performance and reporting these results to the full board.

Other Administration (10 percent): This includes general stewardship of the prospects and donors to the Foundation, office operations and personnel management, accounting and computer database management. This will be done by the staff and, as appropriate, volunteers.

2 What are or will be the organization's sources of financial support? List in order of size.

The organization's sources of financial support – in order of size from largest to smallest – are anticipated to be individuals (through gifts of cash, appreciated securities, and bequests), foundations, organizations, and corporations. The Foundation will receive some pro bono services (accounting, legal, office space).

3 Describe the organization's fundraising program, both actual and planned, and explain to what extent it has been put into effect. Include details of fundraising activities such as selective mailings, formation of fundraising committees, use of volunteers or professional fundraisers, etc. Attach representative copies of solicitations for financial support.

The fundraising focuses on building permanent endowments for charitable purposes in the local community. Grant proposals have been submitted to individuals and a foundation. To date, $16,000 has been pledged to the Foundation. We expect to hear by July 2000 the outcome of a $150,000 grant proposal for operating support. Staff, volunteers, fundraising committees, and the board of directors will be responsible for the cultivation and solicitation of these gifts. No fundraising events are anticipated and no outside professional fundraisers will be contracted.

Part II Activities and Operational Information *(Continued)*

4 Give the following information about the organization's governing body:

a Names, addresses, and titles of officers, directors, trustees, etc.	b Annual compensation
Jeff Furman, 108 N Cayuga St, Ithaca, NY 14850 (Director) **Howard Harnett (Secretary), 118 N Tioga St, Ithaca, NY 14850 (Director)** **Bill Myers (Co-chair), 301 West State St, Ithaca, NY 14850 (Director)** **John Semmler (Vice Chair), 630 Mt Pleasant Rd, Freeville, NY 13068 (Director)** **Diane Shafer (Co-Chair), 95 Teeter Rd, Ithaca, NY 14850 (Director)** **Robert Sieringa (Treasurer), 207 Sage Hall, Ithaca, NY 14853 (Director)**	**No compensation for any officers or directors** **$0**

c Do any of the above persons serve as members of the governing body by reason of being public officials or being appointed by public officials? . . . . ☐ **Yes** ☑ **No**
If "Yes," name those persons and explain the basis of their selection or appointment.

d Are any members of the organization's governing body "disqualified persons" with respect to the organization (other than by reason of being a member of the governing body) or do any of the members have either a business or family relationship with "disqualified persons"? (See **Specific Instructions** for Part II, Line 4d, on page 3.) . . . . ☐ **Yes** ☑ **No**
If "Yes," explain.

5 Does the organization control or is it controlled by any other organization? . . . . ☐ **Yes** ☑ **No**
Is the organization the outgrowth of (or successor to) another organization, or does it have a special relationship with another organization by reason of interlocking directorates or other factors? . . . . ☐ **Yes** ☑ **No**
If either of these questions is answered "Yes," explain.

6 Does or will the organization directly or indirectly engage in any of the following transactions with any political organization or other exempt organization (other than a 501(c)(3) organization): **(a)** grants; **(b)** purchases or sales of assets; **(c)** rental of facilities or equipment; **(d)** loans or loan guarantees; **(e)** reimbursement arrangements; **(f)** performance of services, membership, or fundraising solicitations; or **(g)** sharing of facilities, equipment, mailing lists or other assets, or paid employees? . . . . . . ☐ **Yes** ☑ **No**
If "Yes," explain fully and identify the other organizations involved.

7 Is the organization financially accountable to any other organization? . . . . ☐ **Yes** ☑ **No**
If "Yes," explain and identify the other organization. Include details concerning accountability or attach copies of reports if any have been submitted.

Part II **Activities and Operational Information** *(Continued)*

8 What assets does the organization have that are used in the performance of its exempt function? (Do not include property producing investment income.) If any assets are not fully operational, explain their status, what additional steps remain to be completed, and when such final steps will be taken. If none, indicate "N/A."
N/A

9 Will the organization be the beneficiary of tax-exempt bond financing within the next 2 years? . . . . ☐ Yes ☑ No

10a Will any of the organization's facilities or operations be managed by another organization or individual under a contractual agreement? . . . ☐ Yes ☑ No

b Is the organization a party to any leases? . . . ☐ Yes ☑ No

If either of these questions is answered "Yes," attach a copy of the contracts and explain the relationship between the applicant and the other parties.

11 Is the organization a membership organization? . . . ☐ Yes ☑ No

If "Yes," complete the following:

a Describe the organization's membership requirements and attach a schedule of membership fees and dues.

b Describe the organization's present and proposed efforts to attract members and attach a copy of any descriptive literature or promotional material used for this purpose.

c What benefits do (or will) the members receive in exchange for their payment of dues?

12a If the organization provides benefits, services, or products, are the recipients required, or will they be required, to pay for them? . . . ☑ N/A ☐ Yes ☐ No

If "Yes," explain how the charges are determined and attach a copy of the current fee schedule.

b Does or will the organization limit its benefits, services, or products to specific individuals or classes of individuals? . . . ☑ N/A ☐ Yes ☐ No

If "Yes," explain how the recipients or beneficiaries are or will be selected.

13 Does or will the organization attempt to influence legislation? . . . ☐ Yes ☑ No

If "Yes," explain. Also, give an estimate of the percentage of the organization's time and funds that it devotes or plans to devote to this activity.

14 Does or will the organization intervene in any way in political campaigns, including the publication or distribution of statements? . . . ☐ Yes ☑ No

If "Yes," explain fully.

Part III Technical Requirements

1 Are you filing Form 1023 within 15 months from the end of the month in which your organization was created or formed? . . . . ☑ Yes ☐ No
If you answer "Yes," do not answer questions on lines 2 through 6 below.

2 If one of the exceptions to the 15-month filing requirement shown below applies, check the appropriate box and proceed to question 7.
Exceptions—You are not required to file an exemption application within 15 months if the organization:

☐ **a** Is a church, interchurch organization of local units of a church, a convention or association of churches, or an integrated auxiliary of a church. See **Specific Instructions,** Line 2a, on page 4;
☐ **b** Is not a private foundation and normally has gross receipts of not more than $5,000 in each tax year; or
☐ **c** Is a subordinate organization covered by a group exemption letter, but only if the parent or supervisory organization timely submitted a notice covering the subordinate.

3 If the organization does not meet any of the exceptions on line 2 above, are you filing Form 1023 within 27 months from the end of the month in which the organization was created or formed?. . . . . . ☐ Yes ☐ No

If "Yes," your organization qualifies under Regulation section 301.9100-2, for an automatic 12-month extension of the 15-month filing requirement. Do not answer questions 4 through 6.

If "No," answer question 4.

4 If you answer "No" to question 3, does the organization wish to request an extension of time to apply under the "reasonable action and good faith" and the "no prejudice to the interest of the government" requirements of Regulations section 301.9100-3? . . . . ☐ Yes ☐ No

If "Yes," give the reasons for not filing this application within the 27-month period described in question 3. See **Specific Instructions,** Part III, Line 4, before completing this item. Do not answer questions 5 and 6.

If "No," answer questions 5 and 6.

5 If you answer "No" to question 4, your organization's qualification as a section 501(c)(3) organization can be recognized only from the date this application is filed. Therefore, do you want us to consider the application as a request for recognition of exemption as a section 501(c)(3) organization from the date the application is received and not retroactively to the date the organization was created or formed? . ☐ Yes ☐ No

6 If you answer "Yes" to question 5 above and wish to request recognition of section 501(c)(4) status for the period beginning with the date the organization was formed and ending with the date the Form 1023 application was received (the effective date of the organization's section 501(c)(3) status), check here ▶ ☐ and attach a completed page 1 of Form 1024 to this application.

Part III Technical Requirements *(Continued)*

7 Is the organization a private foundation?

☐ **Yes** (Answer question 8.)

☑ **No** (Answer question 9 and proceed as instructed.)

8 If you answer "Yes" to question 7, does the organization claim to be a private operating foundation?

☐ **Yes** (Complete Schedule E.)

☐ **No**

After answering question 8 on this line, go to line 14 on page 7.

9 If you answer "No" to question 7, indicate the public charity classification the organization is requesting by checking the box below that most appropriately applies:

THE ORGANIZATION IS NOT A PRIVATE FOUNDATION BECAUSE IT QUALIFIES:

a	☐	As a church or a convention or association of churches (CHURCHES MUST COMPLETE SCHEDULE A.)	Sections 509(a)(1) and 170(b)(1)(A)(i)
b	☐	As a school (MUST COMPLETE SCHEDULE B.)	Sections 509(a)(1) and 170(b)(1)(A)(ii)
c	☐	As a hospital or a cooperative hospital service organization, or a medical research organization operated in conjunction with a hospital (These organizations, except for hospital service organizations, MUST COMPLETE SCHEDULE C.)	Sections 509(a)(1) and 170(b)(1)(A)(iii)
d	☐	As a governmental unit described in section 170(c)(1).	Sections 509(a)(1) and 170(b)(1)(A)(v)
e	☐	As being operated solely for the benefit of, or in connection with, one or more of the organizations described in **a** through **d, g, h,** or **i** (MUST COMPLETE SCHEDULE D.)	Section 509(a)(3)
f	☐	As being organized and operated exclusively for testing for public safety.	Section 509(a)(4)
g	☐	As being operated for the benefit of a college or university that is owned or operated by a governmental unit.	Sections 509(a)(1) and 170(b)(1)(A)(iv)
h	☑	As receiving a substantial part of its support in the form of contributions from publicly supported organizations, from a governmental unit, or from the general public.	Sections 509(a)(1) and 170(b)(1)(A)(vi)
i	☐	As normally receiving not more than one-third of its support from gross investment income and more than one-third of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions (subject to certain exceptions).	Section 509(a)(2)
j	☐	The organization is a publicly supported organization but is not sure whether it meets the public support test of **h** or **i**. The organization would like the IRS to decide the proper classification.	Sections 509(a)(1) and 170(b)(1)(A)(vi) or Section 509(a)(2)

If you checked one of the boxes a through f in question 9, go to question 14. If you checked box g in question 9, go to questions 11 and 12. If you checked box h, i, or j, in question 9, go to question 10.

Part III Technical Requirements *(Continued)*

10 If you checked box **h**, **i**, or **j** in question 9, has the organization completed a tax year of at least 8 months?

☐ **Yes**—Indicate whether you are requesting:

☐ A definitive ruling. (Answer questions 11 through 14.)

☐ An advance ruling. (Answer questions 11 and 14 and attach two Forms 872-C completed and signed.)

☑ **No—You must request an advance ruling by completing and signing two Forms 872-C and attaching them to the Form 1023.**

11 If the organization received any unusual grants during any of the tax years shown in Part IV-A, **Statement of Revenue and Expenses,** attach a list for each year showing the name of the contributor; the date and the amount of the grant; and a brief description of the nature of the grant.

None have been received as of the application date, though one is anticipated as shown in Part IV-A

12 If you are requesting a definitive ruling under section 170(b)(1)(A)(iv) or (vi), check here ▶ ☐ and:

a Enter 2% of line 8, column (e), Total, of Part IV-A . . . . __________

b Attach a list showing the name and amount contributed by each person (other than a governmental unit or "publicly supported" organization) whose total gifts, grants, contributions, etc., were more than the amount entered on line **12a** above.

13 If you are requesting a definitive ruling under section 509(a)(2), check here ▶ ☐ and:

a For each of the years included on lines 1, 2, and 9 of Part IV-A, attach a list showing the name of and amount received from each "disqualified person." (For a definition of "disqualified person," see **Specific Instructions,** Part II, Line 4d, on page 3.)

b For each of the years included on line 9 of Part IV-A, attach a list showing the name of and amount received from each payer (other than a "disqualified person") whose payments to the organization were more than $5,000. For this purpose, "payer" includes, but is not limited to, any organization described in sections 170(b)(1)(A)(i) through (vi) and any governmental agency or bureau.

14 Indicate if your organization is one of the following. If so, complete the required schedule. (Submit only those schedules that apply to your organization. **Do not submit blank schedules.**)	**Yes**	**No**	**If "Yes," complete Schedule:**
Is the organization a church?		✔	A
Is the organization, or any part of it, a school?		✔	B
Is the organization, or any part of it, a hospital or medical research organization?		✔	C
Is the organization a section 509(a)(3) supporting organization?		✔	D
Is the organization a private operating foundation?		✔	E
Is the organization, or any part of it, a home for the aged or handicapped?		✔	F
Is the organization, or any part of it, a child care organization?		✔	G
Does the organization provide or administer any scholarship benefits, student aid, etc.?	✔		H
Has the organization taken over, or will it take over, the facilities of a "for profit" institution?		✔	I

Part IV Financial Data

Complete the financial statements for the current year and for each of the 3 years immediately before it. If in existence less than 4 years, complete the statements for each year in existence. **If in existence less than 1 year, also provide proposed budgets for the 2 years following the current year.**

A. Statement of Revenue and Expenses

		Current tax year	3 prior tax years or proposed budget for 2 years			
		(a) From 5-2-00 to 3-31-01	(b) 4-1-01 3-31-02	(c) 4-1-02 3-31-03	(d)	(e) TOTAL
Revenue	1 Gifts, grants, and contributions received (not including unusual grants—see page 6 of the instructions)	$90,000	260,000	255,000		$605,000
	2 Membership fees received					
	3 Gross investment income (see instructions for definition)	2,000	8,000	8,000		$18,000
	4 Net income from organization's unrelated business activities not included on line 3					
	5 Tax revenues levied for and either paid to or spent on behalf of the organization					
	6 Value of services or facilities furnished by a governmental unit to the organization without charge (not including the value of services or facilities generally furnished the public without charge)					
	7 Other income (not including gain or loss from sale of capital assets) (attach schedule)					
	8 **Total** (add lines 1 through 7)	92,000	268,000	263,000		$623,000
	9 Gross receipts from admissions, sales of merchandise or services, or furnishing of facilities in any activity that is not an unrelated business within the meaning of section 513. Include related cost of sales on line 22					
	10 **Total** (add lines 8 and 9)	92,000	268,000	263,000		$623,000
	11 Gain or loss from sale of capital assets (attach schedule)					
	12 Unusual grants	50,000	50,000	50,000		1$50,000
	13 **Total** revenue (add lines 10 through 12)	$142,000	$318,000	$313,000		$773,000
Expenses	14 Fundraising expenses	$5,000	$10,000	$10,000		
	15 Contributions, gifts, grants, and similar amounts paid (attach schedule)	50,000	100,000	100,000		
	16 Disbursements to or for benefit of members (attach schedule)					
	17 Compensation of officers, directors, and trustees (attach schedule)	0	0	0		
	18 Other salaries and wages	21,000	67,500	67,500		
	19 Interest					
	20 Occupancy (rent, utilities, etc.)	15,000	15,000	20,000		
	21 Depreciation and depletion					
	22 Other (attach schedule)	46,900	51,300	45,800		
	23 **Total** expenses (add lines 14 through 22)	$137,900	$243,800	$243,300		
	24 Excess of revenue over expenses (line 13 minus line 23)	$4,100	$69,200	$69,700		

Part IV **Financial Data** *(Continued)*

B. Balance Sheet (at the end of the period shown)		Current tax year Date
Assets		
1 Cash	1	
2 Accounts receivable, net	2	
3 Inventories	3	
4 Bonds and notes receivable (attach schedule)	4	
5 Corporate stocks (attach schedule)	5	
6 Mortgage loans (attach schedule)	6	
7 Other investments (attach schedule)	7	
8 Depreciable and depletable assets (attach schedule)	8	
9 Land	9	
10 Other assets (attach schedule)	10	
11 **Total assets** (add lines 1 through 10)	11	
Liabilities		
12 Accounts payable	12	
13 Contributions, gifts, grants, etc., payable	13	
14 Mortgages and notes payable (attach schedule)	14	
15 Other liabilities (attach schedule)	15	
16 **Total liabilities** (add lines 12 through 15)	16	
Fund Balances or Net Assets		
17 Total fund balances or net assets	17	
18 **Total liabilities and fund balances or net assets** (add line 16 and line 17)	18	

If there has been any substantial change in any aspect of the organization's financial activities since the end of the period shown above, check the box and attach a detailed explanation ▶ ☐

The date of this application is less than 60 days after the first day of the establishment of the corporation (i.e. first day of the current accounting period); according to 1023 Form instructions for Part IV (page 6 of instructions), no financial information for this period is required for Part IV.-B.

Community Foundation of Tompkins County, Inc.
16-1587553

Part IV –A

Line 15 Contributions, gifts, grants

These are anticipated contributions to 501(c)(3) organizations to be determined by the Board of Directors of the Community Foundation.

Line 22 Other Expenses

	Current	Year 1	Year 2
EXPENSES	$ 46,900	$ 51,300	$ 45,800
Printing	15,000	20,000	17,000
Postage & Mailing Service	3,000	4,500	3,500
Office Supplies	2,500	2,000	1,000
Conference/Training	4,000	3,500	2,800
Equipment & Computers	7,000	2,500	3,500
Professional Fees	14,600	18,000	17,000
Membership	800	800	1,000

Schedule H. Organizations Providing Scholarship Benefits, Student Aid, etc., to Individuals

1a Describe the nature and the amount of the scholarship benefit, student aid, etc., including the terms and conditions governing its use, whether a gift or a loan, and how the availability of the scholarship is publicized. If the organization has established or will establish several categories of scholarship benefits, identify each kind of benefit and explain how the organization determines the recipients for each category. Attach a sample copy of any application the organization requires individuals to complete to be considered for scholarship grants, loans, or similar benefits. (Private foundations that make grants for travel, study, or other similar purposes are required to obtain advance approval of scholarship procedures. See Regulations sections 53.4945-4(c) and (d).)

The Community Foundation is newly established and has not yet set all the guidelines for the scholarship program. Some scholarships may be outright gifts and some may be loans depending on the desire of the Community Foundation board and the initial donor agreements. The Foundation expects that the scholarship program will be collectively marketing to the community and to qualified individuals (based on academic performance, academic interest, community service and/or financial need). The scholarship selection committee will determine which scholarships each applicant is eligible for and make grant decisions to maximize the benefit to the greatest number of applicants.

b If you want this application considered as a request for approval of grant procedures in the event we determine that the organization is a private foundation, check here . . . . ▶ ☐

c If you checked the box in **1b** above, check the box(es) for which you wish the organization to be considered.

☐ 4945(g)(1) ☐ 4945(g)(2) ☐ 4945(g)(3)

2 What limitations or restrictions are there on the class of individuals who are eligible recipients? Specifically explain whether there are, or will be, any restrictions or limitations in the selection procedures based upon race or the employment status of the prospective recipient or any relative of the prospective recipient. Also indicate the approximate number of eligible individuals.

The Community Foundation will attempt to structure all sholarship criteria to benefit the greatest number of individuals in the community and place the fewest restrictions based on employment status (or that of a relative), race, or other criteria. We expect no scholarships will be granted based on gender, but, instead make grants to a broad population representing the diverse demographics of the community. Since the program is just being developed it is not possible to give a number of eligible individuals though there are approximately 400 high school graduates annually (though some scholarships may be granted to older students, graduate students, and those returning to complete college or university degrees.

3 Indicate the number of grants the organization anticipates making annually . . . . ▶ **Between 15-25**

4 If the organization bases its selections in any way on the employment status of the applicant or any relative of the applicant, indicate whether there is or has been any direct or indirect relationship between the members of the selection committee and the employer. Also indicate whether relatives of the members of the selection committee are possible recipients or have been recipients.

Section criteria may include the employment status of the applicant or any relative of the applicant. However, there is no anticipated relationship between the members of the selection committee and the employer. The selection committee will be nominated and elected by the Board of Directors of the Community Foundation and not by the employer. Relatives of selection committee members are not eligible to receive scholarships.

5 Describe any procedures the organization has for supervising grants (such as obtaining reports or transcripts) that it awards and any procedures it has for taking action if the terms of the grant are violated.

Final guidelines are not yet anticipated, but the Community Foundation will require verification of educational status, academic record which may include school reports and transcripts. The completion of a specific academic program may be criteria or conditions for receiving a scholarship award.