

**THE CITY FUND**  
**SAFER, STRONGER DC COMMUNITY OPPORTUNITY GRANT**



**ADMINISTERED BY:**



**CONTACT:**

**THE CITY FUND TEAM**

**Manon P. Matchett**

**[MMATCHETT@CFNCR.ORG](mailto:MMATCHETT@CFNCR.ORG)**

# THE CITY FUND

## SAFER, STRONGER DC COMMUNITY OPPORTUNITY GRANTS

Funding Objective	<p>The City Fund Safer, Stronger DC Community Opportunity Grant seeks to provide funding to nonprofits that help improve the lives of individuals and families living in District neighborhoods disproportionately impacted by inequities related to social determinants of health including: access to educational, economic and job opportunities, access to health care services, quality of education and job training and recurring exposure to violent crime.</p> <p>General operating grants are available for organizations who serve the Safer, Stronger DC Community Partnerships priority police service areas. Priority consideration will be given to organizations who demonstrate work related to violence prevention.</p>
Geographical Areas Funded	Police Service Areas (PSAs): 506, 507, 602, 603, 604, 702, 704, 705 & 706
Available Funding	\$1.5 million
Application Requirements	Applicants must submit a proposal via The Community Foundation's online application system no later than <b>4:00 pm, Friday, June 2, 2017.</b>
Applicant Informational Webinars	<p>Two informational webinars will convene on <b>Wednesday, May 10<sup>th</sup> from 2:00 pm to 4:00 pm and Tuesday, May 16<sup>th</sup> from 10:00 am to noon.</b></p> <p>To register, please copy and paste one of the following links in your preferred web browser:</p> <p><b>Wednesday, May 10<sup>th</sup></b>      <a href="https://cc.readytalk.com/r/wj6hxxqia0eh&amp;eom">https://cc.readytalk.com/r/wj6hxxqia0eh&amp;eom</a>  <b>Tuesday, May 16<sup>th</sup></b>      <a href="https://cc.readytalk.com/r/cvtml6g7gztn&amp;eom">https://cc.readytalk.com/r/cvtml6g7gztn&amp;eom</a></p>
Eligibility Information	<p>Applicant organizations and fiscal sponsors must meet the following criteria to be eligible for grant consideration:</p> <ul style="list-style-type: none"> <li>• 501(c)(3) designation.</li> <li>• For fiscal sponsor applications, a 501(c)(3) non-profit organization must serve as the lead applicant.</li> <li>• Applicant organization and fiscal sponsor must be compliant with all District business and tax requirements, including: <ul style="list-style-type: none"> <li>○ Registration as a non-profit with the District of Columbia Department of Consumer and Regulatory Affairs (DCRA) and be in good standing.</li> <li>○ Possession of a valid Charitable Solicitation or Charitable Exempt license.</li> <li>○ Arrearages less than \$100 to the District government. Applicants must complete and sign a Tax Waiver form.</li> </ul> </li> <li>• Only one application per organization and/or Federal Tax Identification Number, except if applying as a fiscal sponsor on behalf of another entity.</li> <li>• Applicant has existing programming or has served in one or more of the priority police service areas for a minimum of two-years. The Safer, Stronger DC Community Partnership Team will confirm years of service during the due diligence process.</li> </ul>
Grants Available	Applicants may request between \$25,000 to \$100,000 to support organizational mission. This includes day-to-day operations, infrastructure needs and innovative new initiatives that are not directly aligned with programmatic activity.
Questions and Contact:	Please direct all questions to Manon Matchett <a href="mailto:mmatchett@cfncr.org">mmatchett@cfncr.org</a> .

## BACKGROUND

Safer, Stronger DC (SSDC) Community Partnerships is part of the District's overall public safety and violence prevention agenda. This broad-based violence prevention strategy is rooted in public health with the recognition that reducing community violence cannot be accomplished through law enforcement alone. The approach fosters a community-oriented model to crime prevention and public safety.

SSDC will support the work of organizations whose missions and programs provide targeted interventions and strategies that:

- Reduce incidences of violent crime,
- Improve the health, well-being and quality of life of residents in the priority communities,
- Increase community and civic participation, and
- Engage residents in meaningful and productive activities.

For this round of City Fund grantmaking, organizations may request between \$25,000 to \$100,000 for general operating support. Priority consideration will be given to organizations who demonstrate work related to violence prevention. The organization must have served for a minimum of two years in one or more of the selected priority Police Service Areas (PSA): 506, 507, 602, 603, 604, 702, 704, 705 and 706. The grant period is one-year.

## ELIGIBILITY INFORMATION FOR CITY FUND APPLICANTS

Applicant organizations must meet the following criteria to be eligible for grant consideration:

- 501(c)(3) designation.
- For fiscal sponsorships, a 501(c)(3) non-profit organization must serve as the lead applicant.
  - The lead applicant for all proposals must have a physical location in the District of Columbia.
  - The organization must have an existing presence in one or more of the priority Police Service Areas.
- Applicant organization and fiscal sponsor must be compliant with all District business and tax requirements, including:
  - Registration as a non-profit with the District of Columbia Department of Consumer and Regulatory Affairs (DCRA) and be in good standing.
  - Possession of a valid Charitable Solicitation or Charitable Exempt license.
  - Arrearages less than \$100 to the District government.
  - Applicants must complete and sign a Tax Waiver form.
- Only one application per organization and/or Federal Tax Identification Number, except for fiscal sponsorships.
- Applicant has existing programming or has served in one or more of the priority PSAs for a minimum of two-years. The Safer, Stronger DC Community Partnership Team will confirm years of service during the due diligence process.

## GRANTS AVAILABLE

Applicants may request between \$25,000 to \$100,000 to support organizational mission. This includes day-to-day operations, infrastructure needs and innovative new initiatives that are not directly aligned with programmatic activity. For instance:

- Administrative
  - Accounting and legal
  - Human Resources
  - Salaries and benefits
  - Office management
    - Postage
    - Rent
    - Supplies
    - Technology maintenance
    - Utilities
- Capital
  - Technology upgrades
  - Furniture
- Human Resource Management
  - Leadership training
  - Professional development
- Programmatic

Priority consideration will be given to organizations who demonstrate a successful organizational history in violence prevention work.

. Grant awards will not be made for:

- Expenses incurred or obligated prior to or after the grant period,
- Re-granting, or
- Advocacy efforts.

## REVIEW PROCESS

Applications will be reviewed by an independent review committee comprised of The Community Foundation's staff and donors, issue experts, thought leaders and other colleagues. The review committee will use the key criteria below to evaluate and score each application:

- Documented history of organization's success in mission attainment,
- Consistent program results, and
- Strong executive and board leadership.

Priority consideration will be given to organizations who demonstrate:

- A successful organizational history related to violence prevention,
- Need based on successful violence prevention efforts,
- Ability to address community needs and concerns,
- Active community involvement, and
- Sound fiscal health, including diverse funding sources.

## APPLICATION INSTRUCTIONS FOR CITY FUND APPLICANTS

The Request for Proposals (RFP) must be submitted via The Community Foundation's online system by **4:00 pm, Friday, June 2, 2017**. The online system will be available beginning **Thursday, May 11, 2017 at 3:00 pm**.

***Faxed or hard copies will not be accepted. Incomplete or illegible Request for Proposals will not be reviewed.***

Please note that all items uploaded as part of your application package must be submitted in PDF format. Please see Appendix B for a list of PDF creation resources. If you must use a document scanner to create a PDF, please ensure that the resulting file is easy to read and is not password protected.

***Failure to comply with any of the guidelines or proposals that deviate from the required format will cause your application to be disqualified for review and grant award consideration. No extensions will be granted and the online system will automatically reject all late applications.***

### I. Organizational Information (Completed Online – No attachment required)

#### 1. Organization Information (Required for all applications)

Please provide the following information for your organization, including fiscal sponsors.

- a. Organization name and mailing address
- b. Organization phone and fax numbers
- c. Organization's email and website addresses [Do not include http/https prefix]
- d. Federal Tax Identification Number
- e. Tax Status
  - i. 501(c)(3)
  - ii. Public Charity
  - iii. Public Foundation
  - iv. Private Foundation
- f. Organization's mission [75 word maximum]
- g. Annual budget for current fiscal year
- h. Fiscal year period [MM/YYYY – MM/YYYY]
- i. Ward where organization is located
- j. Estimated number of people served by organization
- k. Population served (Primary)
  - i. Infant and Toddlers (0 to 4 years)
  - ii. Children (5 to 12 years)
  - iii. Youth (13 to 18 years)
  - iv. Young Adult (19 to 24 years)
  - v. Adult (25 to 54 years)
  - vi. Seniors (55 years and older)
  - vii. Family (Combination of all of above)

#### 2. Points of Contact (Required for all applications)

- a. Name of Chief Executive (Authorizing/Certifying Official)
  - i. (Prefix, First Name, Middle Initial, Last Name, Suffix)
  - ii. Title
  - iii. Email
  - iv. Phone
- b. Name of main contact for this proposal, if other than Chief Executive
  - i. Title
  - ii. Email
  - iii. Phone

3. **Proposal Request (Required for all applications)**

- a. Are you applying as a Fiscal Sponsor?
  - i. Yes
  - ii. No
- b. Amount requested [Between \$25,000 to \$100,000]
- c. Purpose of request [75 word maximum]
- d. Police Service Area to be served by Grant [Select one]
  - i. PSA 506
  - ii. PSA 507
  - iii. PSA 602
  - iv. PSA 603
  - v. PSA 604
  - vi. PSA 702
  - vii. PSA 704
  - viii. PSA 705
  - ix. PSA 706
- e. Does your organization have any violence prevention programs or activities?
  - i. Yes
  - ii. No
- f. Estimated number of people served by the organization
- g. Grant start date [MM/YYYY – MM/YYYY] (May start as early as July and as late as September)
- h. Grant end date [MM/YYYY – MM/YYYY] (All grant activity must be completed by August 31, 2018)

4. **District of Columbia Due Diligence (Required for all applications)**

- a. Certificate of Good Standing File Number
- b. Basic Business License Number

## II. Narrative (Maximum of 10 Pages Double-Spaced, 11 point or higher font, 1” Margins)

### Organizational Background

The background section should introduce the review committee to the applicant(s). Please:

1. Describe your organization’s mission, history and key programs.
2. Describe the leadership and governance of the organization and their respective roles.
3. Describe the organization’s most significant challenge(s) within the last year.
4. Describe the organization’s most important accomplishments within the last year.
5. How will this grant impact your short-term and long-term operational goals?

### Purpose of Request

Describe the activities you propose to carry out if selected as a grantee of the City Fund:

1. How will the general operating grant be used?
2. Describe the priority community and population.
  - a. What are the neighborhood challenges?
  - b. What are the neighborhood assets?
3. How does your organization meet the needs or address the issues of the priority community?
  - a. Describe your organization’s outreach and programmatic activity designed to meet this need.
  - b. How will the quality of life be improved in the priority community?
  - c. How does your organization assist with violence prevention?
4. Make the case that your organization has the capacity to carry out this work.

### Anticipated Outcomes

1. Describe the results you expect to be realized for the priority population(s) you serve.
2. What data/performance measures will you use?

### Project Management

1. Who will be directly involved in overseeing the administration of the grant?
2. Provide a timeline of expenditure activities.

### Need

- How will your organization be impacted if the Safer, Stronger DC Opportunity grant was not available? Provide detail on programmatic activity, services, staffing and how the priority population will be affected.

**All attachments must be uploaded as a PDF. Please make sure that documents are not password protected. Applications that do not include all required information will be disqualified. In addition, illegible or incomplete applications will not be considered. Applicants will not be contacted to provide missing or illegible information.**

### **III. Attachments**

**(Required for all applications)** All applicants must submit:

1. Organizational/Fiscal Sponsor Information
  - a. A one-page organizational chart.
    - i. Include staff titles.
    - ii. Indicate number of full-time and part-time employees.
  - b. Board member list
    - i. Titles
    - ii. Terms
    - iii. Occupations
    - iv. Places of Employment
    - v. Ethnicity **(Required - May provide aggregate information)**
  - c. Commitment to diversity of board and staff statement.
2. Organizational/Fiscal Sponsor Financial Documentation
  - a. Current fiscal year's organizational budget (include all revenue, expenses, actuals and variance for the reporting period specified).
  - b. List of major funders for current fiscal year. Please include funding amounts and indicate whether the funding was received, is committed or is projected.
  - c. Comparative organizational balance sheet for most recent closed month from current and previous fiscal year. E.g. Month 2017 versus Month 2016.
  - d. Most recent audited financial statements (including auditor's management letter). If no audit, then provide pages 1 thru 6 of most recent IRS Form-990. Information should not be older than two years.
3. Organizational/Fiscal Sponsor Grant Budget
  - a. A detailed budget that summarizes revenue and expenses for the grant period.
    - i. If applicable, please include information on other resources (cash or in-kind) that will be leveraged to support your organization's work.
    - ii. Provide specifics on how the City Fund grant will be allocated within the budget. Create a separate column and provide the dollar amount for the applicable line items.
  - b. A one-page budget narrative.
4. District of Columbia Business and Tax Requirements
  - a. Certificate of Good Standing issued after August 1, 2016.
  - b. District of Columbia Basic Business (Charitable Solicitation/Charitable Exempt) License.
  - c. Tax Waiver Form (Signed and dated by certifying official).
5. Memorandum of Understanding **(Required only for fiscal sponsorships)**

If you are submitting an application on behalf of a non 501(c)(3) organization, please include a Memorandum of Understanding (MOU), outlining the roles, responsibilities, fees and deliverables of each partner that will receive funding and/or provide services under this grant. Please make sure that the MOU is signed by the Chief Executive Officer or an authorized officer for each organization.



## Appendix A: How to Use the Community Foundation's Online Grant Application System

### System Requirements

Applicants must have a functioning Internet connection and one of the following browsers, with cookies enabled:

Internet Explorer v7 or higher

Firefox v3 or higher

**Safari and Google Chrome are not compatible**

To submit a full proposal, cut and paste the link below into your preferred web browser:

[https://www.GrantRequest.com/SID\\_5491?SA=SNA&FID=35039](https://www.GrantRequest.com/SID_5491?SA=SNA&FID=35039)

### Online Application Process

1. **Access the application form.** Use the link listed above.
2. **Enter data.** As needed, update any organizational information in the fields provided.
3. **Upload proposal attachments.** The next page of the online application system allows you to upload the required proposal attachments.
  - a. Each required attachment must be individually uploaded into the system and properly labeled. Only one document may be uploaded for each required attachment.
  - b. Documents will only be accepted in PDF file format. Please reference Appendix B for a list of PDF software resources.
4. **Save and finish later.** At the bottom of any page of the application, you can click Save & Finish Later to save the data entered thus far and return later to complete the application prior to the submission deadline. To access your account and finish your partially completed application click here:  
[https://www.GrantRequest.com/SID\\_5491?SA=AM](https://www.GrantRequest.com/SID_5491?SA=AM)
5. **Submit your application.** Carefully review your application for completeness. Please refer to Appendix E. Click the submit button to send your application to The Community Foundation. You will receive an email confirming receipt of your application. **If you do not receive a confirmation, please check your spam filter/folder.**

***The online system will be available beginning Thursday, May 11<sup>th</sup> at 3:00 pm.***

***Proposals that do not include all the elements as stated will not be considered for funding.***

***Proposals that are incomplete or illegible will not be reviewed or considered for funding.***

***If you have any questions, contact Manon Matchett at [mmatchett@cfncr.org](mailto:mmatchett@cfncr.org).***

## Appendix B: PDF Conversion Programs

**Please note that all application attachments must be submitted as PDF documents.**

When naming your file, please do not use special characters (such as /, \*,% , etc.) or spaces in the file names. Such files are unrecognizable as PDFs to some systems.

If you must use a document scanner to create a PDF, please ensure that the resulting file is easy-to-read.

Please remove any password protections or coding prior to uploading your documents.

The list below contains some of the PDF generators available, many of which are free or very inexpensive. The Community Foundation does not endorse any particular software.

- Adobe  
<http://www.adobe.com/products/acrobatstd/main.html>
- Bullzip PDF Printer  
<http://www.bullzip.com/products/pdf/download.php>
- FreePDF  
[http://freepdfxp.de/index\\_en.html](http://freepdfxp.de/index_en.html)
- novaPDF  
<http://www.novapdf.com/>
- PDF24 Creator  
<https://en.pdf24.org/>
- PDFcreator  
<http://www.pdfforge.org/pdfcreator>

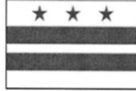
***Illegible or incomplete applications will not be considered. Please DO NOT use special characters (such as /, \*,% , etc.) or spaces in the file names.***

## Appendix C: District of Columbia Business and Tax Requirements

Initial File #: [REDACTED]

**GOVERNMENT OF THE DISTRICT OF COLUMBIA**  
 DEPARTMENT OF CONSUMER AND REGULATORY AFFAIRS  
 CORPORATIONS DIVISION

Certificate of Good Standing



**CERTIFICATE**

**THIS IS TO CERTIFY** that all applicable provisions of the District of Columbia Business Organizations Code (Title 29) have been complied with and accordingly, this **CERTIFICATE OF GOOD STANDING** is hereby issued to

COMMUNITY FOUNDATION FOR THE NATIONAL CAPITAL REGION (THE)

**WE FURTHER CERTIFY** that the domestic filing entity is formed under the law of the District on 12/4/1973; that all fees, and penalties owed to the District for entity filings collected through the Mayor have been paid and Payment is reflected in the records of the Mayor; The entity's most recent biennial report required by § 29-102.11 has been delivered for filing to the Mayor; and the entity has not been dissolved. This office does not have any information about the entity's business practices and financial standing and this certificate shall not be construed as the entity's endorsement.

**IN TESTIMONY WHEREOF I** have hereunto set my hand and caused the seal of this office to be affixed as of 10/26/2012 10:15 AM

Business and Professional Licensing Administration



*Patricia E. Grays*  
 \_\_\_\_\_  
 PATRICIA E. GRAYS  
 Superintendent of Corporations  
 Corporations Division

Vincent C. Gray  
 Mayor

Tracking #: AnGwXAbZ

Basic Business License

	GOVERNMENT OF THE DISTRICT OF COLUMBIA Vincent C. Gray,	Department of Consumer and Regulatory Affairs Business License Division 1100 4th Street S.W. Washington DC 20024	Date Issued: 11/21/2012 Category: 4002 License#: <span style="background-color: black; color: black;">[REDACTED]</span> License Period: 11/1/2012 - 10/31/2014		
BASIC BUSINESS LICENSE					
Billing Name and Address: COMMUNITY FOUNDATION FOR THE NATIONAL CAPITAL REGION (THE) 1201 15th Street N.W., Suite 420 Washington, DC 20005	Premise/Application's Name and Address: COMMUNITY FOUNDATION FOR THE NATIONAL CAPITAL REGION (THE) 1201 15TH ST NW, STE 420 WASHINGTON, DC 20005	Registered Agent's Name and Address ANDRIENNE BROWN 1201 15th Street N.W., Suite 420 Washington DC20005			
Owner's Name Corp. Name COMMUNITY FOUNDATION FOR THE NATIONAL CAPITAL REGION (THE) Trade Name					
CoO/HOP#:	SSL: 0213 0017	Zone:	Ward: 2	ANC:	PERM NO.
		UNITS: 1			
General Business - Charitable Solicitation					
Charitable Solicitation Designation					
-- THE LAW REQUIRES THIS LICENSE TO BE POSTED IN A CONSPICUOUS PLACE ON THE PREMISES --					
				Director: Nicholas A. Majett	

**Appendix D: Tax Waiver Form**  
**TAX WAIVER FORM**

This form is a Waiver Form for the Release of District Tax Information from the Office of Tax & Revenue, Office of the District of Columbia Chief Financial Officer.

<i>Business Name</i>		
<i>Trade Name if Different from Business Name</i>		
<i>Federal Employee Identification Number</i>		
<i>Property Address</i>		<i>Square</i>
		<i>Lot</i>
<i>City</i>	<i>State</i>	<i>Zip</i>
<i>Mailing Address if Different from Property Address</i>		
<i>City</i>	<i>State</i>	<i>Zip</i>

I hereby give the District of Columbia Office of Tax and Revenue ("OTR"), Office of the Chief Financial Officer, consent to release \_\_\_\_\_ tax information, to include real property tax information if applicable, to the Community Foundation for the National Capital Region ("Community Foundation"). I understand that the information released under this consent is limited to whether or not I am in compliance with the District of Columbia's tax laws and regulations as of **January 1, 2017**.

If \_\_\_\_\_ is not in compliance, I further consent that the OTR may inform the Community Foundation whether or not is maintaining a payment agreement. I understand that this information is merely for the purpose of determining whether or not \_\_\_\_\_ is in compliance with the revenue laws of the **District of Columbia** and for verifying \_\_\_\_\_ business address; but does not include disclosure of \_\_\_\_\_ actual tax returns. I further understand that the information that is received from the OTR pursuant to this release will be placed in my file that is maintained by the Community Foundation and is not subject to dissemination to any individual outside of the Community Foundation.

I hereby authorize the Office of the Chief Financial Officer, Office of Tax and Revenue, access to review and research my taxes for the past three years – **tax years 2014, 2015 and 2016**.

<i>Signature of Authorized Representative</i>	<i>Date</i>
<i>Print Name of Authorized Representative</i>	<i>Title</i>

c/o The Community Foundation for the National Capital Region  
 1201 15<sup>th</sup> Street NW, Suite 420  
 Washington, DC 20005  
 202.955.5890 Main 202.955.8084 Fax

## Appendix E: Application Checklist

**Prior to the submission of your application, please make sure that all the required information and documentation is included. Once the application is submitted, it cannot be altered. Documents with password protections will not be reviewed. Illegible or incomplete applications will not be considered. Applicants will not be contacted to provide missing or illegible information.**

<input type="checkbox"/>	<b>Organizational Summary</b> (Completed Online - Required for all applications)
<input type="checkbox"/>	<b>Narrative</b> (Required for all applications – 10-page maximum; double-space 11 point font or higher)
<input type="checkbox"/>	<b>Attachments</b> (Required for all applications – PDF; Free of passwords/passcodes and special characters in file name)
<input type="checkbox"/>	<b>Organizational/Lead Applicant Supporting Documents</b> (All of the following information is required for all applications) <ul style="list-style-type: none"> <li><input type="checkbox"/> • Organizational Chart <ul style="list-style-type: none"> <li><input type="checkbox"/> ○ Include staff titles</li> <li><input type="checkbox"/> ○ Include the number of full and part-time employees</li> </ul> </li> <li><input type="checkbox"/> • Board List <ul style="list-style-type: none"> <li><input type="checkbox"/> ○ Board Demographic Information <ul style="list-style-type: none"> <li><input type="checkbox"/> ▪ Titles</li> <li><input type="checkbox"/> ▪ Terms</li> <li><input type="checkbox"/> ▪ Occupations</li> <li><input type="checkbox"/> ▪ Places of Employment</li> <li><input type="checkbox"/> ▪ Ethnicity (Required - May provide aggregate information or by individual)</li> </ul> </li> <li><input type="checkbox"/> ○ Statement of commitment to diversity of staff and board</li> </ul> </li> </ul>
<input type="checkbox"/>	<b>Organizational/Lead Applicant Financial Documentation</b> (All of the following information is required for all applications) <ul style="list-style-type: none"> <li><input type="checkbox"/> • For current fiscal year provide: <ul style="list-style-type: none"> <li><input type="checkbox"/> ○ Organization’s fiscal year budget (included reporting period, all revenue, expenses, actuals and variance)</li> <li><input type="checkbox"/> ○ List of current fiscal year’s major funders. <ul style="list-style-type: none"> <li><input type="checkbox"/> ▪ Funding amounts</li> <li><input type="checkbox"/> ▪ Funding status: received, committed or projected.</li> </ul> </li> </ul> </li> <li><input type="checkbox"/> • Comparative organizational balance sheet for most recent closed month from current and previous fiscal year. E.g. Month 2017 versus Month 2016.</li> <li><input type="checkbox"/> • Most recent audited financial statements (including auditor’s management letter). If no audit, then provided pages 1 thru 6 of most recent IRS Form-990.</li> </ul>
<input type="checkbox"/>	<b>Organizational/Lead Applicant Grant Budget</b> (Required for all applications) <ul style="list-style-type: none"> <li><input type="checkbox"/> • A detailed budget that summarizes revenue and expenses for the grant period.</li> <li><input type="checkbox"/> • If applicable, please include information on other resources (cash or in-kind) that will be leveraged to support your organization’s work.</li> <li><input type="checkbox"/> • Provide specifics on how the City Fund grant will be allocated within the budget. Create a separate column and provide the dollar amount for the applicable line items.</li> <li><input type="checkbox"/> • A one-page budget narrative.</li> </ul>
<input type="checkbox"/>	<b>Memorandum of Understanding</b> (Required only for fiscal sponsorships; Signed and dated by Chief Executive or certifying official for each organization)
<input type="checkbox"/>	<b>District of Columbia Business and Tax Requirements</b> <ul style="list-style-type: none"> <li><input type="checkbox"/> • Certificate of Good Standing issued after August 1, 2016.</li> <li><input type="checkbox"/> • District of Columbia Basic Business (Charitable Solicitation/Charitable Exempt) License</li> <li><input type="checkbox"/> • Tax Waiver Form (Signed and dated by certifying official)</li> </ul>