**PENDING OMB APPROVAL**

**No. 3206-0131**



Combined Federal Campaign

**2017 Application Instructions for**

**Federations**

##### Background

Enclosed is the application for use by local, national/international, and international federations to participate in the Combined Federal Campaign (CFC). A federation is a group of voluntary charitable human health and welfare organizations created to supply common fundraising, administrative, and management services to its constituent members. A federation must have at least 15 member organizations, in addition to itself, that individually meet all of the CFC eligibility criteria. If your organization does not have 15 member organizations that meet the CFC eligibility criteria, it must apply as an independent organization using the independent organization application.

The following instructions and form are intended to assist charitable federations in applying for participation in the CFC. All aspects of the CFC, including eligibility for participation, are strictly governed by Federal regulation. The current CFC regulations can be viewed on our website at [ww](http://www.opm.gov/cfc)[w.](http://www.opm.gov/cfc)[opm.gov/cfc](http://www.opm.gov/cfc). Additional copies of the application can also be downloaded from the website. The Office of Personnel Management (OPM) encourages federations to apply early.

The application deadline for local, national/international, and international federations seeking eligibility is [TBD], 2017

All applications must be submitted electronically through the application module of the CFC Charity System (CFC-CS). Applications sent through any other means will not be processed.

***OPM will not accept late applications. It is the applicant’s responsibility that its application and all required supplemental information and fees are received by the scheduled deadline. Requests for consideration after the deadline will not be considered.***

All required documents and attachments must be complete and submitted before the application deadline. ***Documents that did not exist at the time of the application deadline will not be accepted during the appeals process*.** Federations and/or member organizations that are found ineligible have***only one*** opportunity to appeal to the Director of OPM. The Director's decision is final for administrative purposes. Therefore, appellants should ensure that their appeals are complete and responsive to the actual reasons for the original denial decision.

In order to determine whether a federation may participate in the campaign, OPM may request evidence of corrective action regarding any prior violation of regulation or directive, sanction, or penalty, as appropriate. OPM will decide whether the federation has demonstrated, to OPM’s satisfaction, that the federation has taken appropriate corrective action. Failure to demon-strate satisfactory corrective action or to respond to OPM’s request for information within 10 business days of the date of the request may result in a determination that the federation will not be included in the Charity List.

Fees

A fee schedule is posted at [www.opm.gov/cfc](http://www.opm.gov/cfc). All charities applying for participation in the CFC must pay a non-refundable Application Fee which is due at the time the application is submitted. Applications that do not include payment at the time of submission will not be processed. Charities that are denied or withdraw will not have their fees refunded.

Charities that are approved for participation must pay a Listing Fee, which is due no later than June 1, 2017. Approved organizations that have not paid the fee by that date will not be listed in the 2017 CFC Charity List. There are no waivers of the fee and requests for reconsideration will not be considered.

**Taxonomy Codes** Each federation can identify up to three categories, in priority order which most closely identify the type of mission, services, and activities provided. The corresponding letters will be printed with the federation’s listing in the CFC charity list to assist donors in identifying charities by type of services provided. Categories were derived from the National Taxonomy of Exempt Entities classification system developed by the National Center for Charitable Statistics. The 26 categories are:

A Arts, Culture, and Humanities

B Education

C Environment

D Animal Related

E Health Care

F Mental Health & Crisis Intervention

G Voluntary Health Associations & Medical Disciplines

H Medical Research

I Crime & Legal Related

J Employment

K Food, Agriculture & Nutrition

L Housing & Shelter

M Public Safety, Disaster Preparedness & Relief

N Recreation & Sports

O Youth Development

P Human Services

Q International, Foreign Affairs & National Security

R Civil Rights, Social Action, &Advocacy

S Community Improvement & Capacity Building

T Philanthropy, Voluntarism & Grantmaking Foundations

U Science & Technology

V Social Science

W Public & Societal Benefit

X Religion Related

Y Mutual & Membership Benefit

Z Unknown

## DEFINITIONS

**Federation** Name of the applicant federation, as it appears in the IRS Business Master File (BMF). If the name of the federation is different from the name which appears in the IRS BMF, documentation from the IRS or state government authorizing this use of the name must accompany the application. The EIN must be included.

**Employer Identification Number (EIN)** The nine-digit EIN assigned to the organization by the IRS and appearing on the IRS Form 990 submitted with the application.

**CFC Code** The five-digit number assigned to the federation by the CFC. Federations that did not previously participate in the CFC should leave this field blank.

**Federation Website Address** List the complete Internet address of the applicant federation (no email addresses). This information is required, if the federation has an Internet address. Links to social media pages are not accepted.

**Federation Address** The physical street address of the federation. Post Office Boxes or other mail service addresses may not be used.

**Contact Person** The contact person is the indi­vidual to whom OPM will direct communications regarding the federation application. This may be any individual in the organization.

**Contact Title** Self-explanatory

**Contact Address** Contact Person’s mailing address. Post Office Boxes may be used.

**Contact Telephone** Contact Person’s telephone number, if different than the organization’s number.

**Fax**  Contact Person’s fax number.

**Contact Email Address(es)** Contact person’s electronic mail address. Applicants are en-couraged to provide more than one email address. Participation decision letters and other CFC communications will be sent to this address.

***INSTRUCTIONS***

For details regarding CFC eligibility requirements for federations, refer to CFC Guidance Memoranda on the CFC website at [www.opm.gov/cfc](http://www.opm.gov/cfc).

Applicants must check the box next to each certification statement to demonstrate agreement to comply with the statement and to certify that it meets the requirement. Failure to provide a check mark for each of the statements will be considered as a refusal to certify and will result in the denial of the application.

###### Item 1

**Check the one appropriate box. Include as *Attachment A* a list of all eligible member organizations that meet all National/Inter-national List eligibility criteria in 5 CFR §950.202 and §950.203. Include their five-digit CFC codes (if applicable), names as they appear in the IRS Business Master File, “Doing Business As” names (if applicable), EINs, and administrative and fundraising rates. The physical address of each member must also be included in Attachment A.**

A national/international federation must demonstrate that it has 15 or more member organizations that individually meet the eligibility criteria for participation as national/international organizations (real services, benefits, assistance, or program activities in 15 or more different states or one foreign country over the three year period immediately preceding the start of the campaign application year).

An international federation must demonstrate that it has 15 or more member organizations that individually meet the eligibility criteria for international organizations (real services, benefits, assistance, or program activities in a foreign country over the three-year period immediately preceding the start of the application year).

A local federation must demonstrate that it has 15 or more member organizations that individually meet the eligibility criteria for participation as local organizations (real services, benefits, assistance, or program activities in the previous calendar year within the geographic area of the zone to which it is applying).

###### Item 2

**Certification that it is an organization recognized by the Internal Revenue Service as tax exempt under** [**26 U.S.C. 501**](http://api.fdsys.gov/link?collection=uscode&title=26&year=mostrecent&section=501&type=usc&link-type=html)**(c)(3) to which contributions are deductible under** [**26 U.S.C. 170**](http://api.fdsys.gov/link?collection=uscode&title=26&year=mostrecent&section=170&type=usc&link-type=html)**(c)(2).** If the name of the applicant differs from the IRS BMF, documentation from the IRS or state government authorizing the use of the name must accompany the application.

If the organization does not appear in the BMF, one of the following must accompany the application:

(i) An affirmation letter from the IRS, dated on or after January 1 of the campaign year to which the organization is applying, that verifies the organization's current 501(c)(3) tax-exempt status.

(ii) Listing of a national organization, as well as its local affiliate organization, is permitted. Each national or local organization must individually meet all of the eligibility criteria and submit independent documentation as required in § 950.202 and § 950.203 to be included in the Charity List. A local affiliate of a national organization that is not separately incorporated must submit a certification from the Chief Executive Officer (CEO) or CEO equivalent of the national organization stating that it operates as a bonafide chapter or affiliate in good standing of the national organization and is covered by the national organization's [26 U.S.C. 501](http://api.fdsys.gov/link?collection=uscode&title=26&year=mostrecent&section=501&type=usc&link-type=html)(c)(3) tax exemption, IRS Form 990 and audited financial statements. The letter must be signed and dated on or after October 1 of the calendar year preceding the campaign year for which the organization is applying.

Listing of a local organization, as well as its satellite offices, is permitted, as long as there is no more than one location within a county or parish. Each office must individually meet all of the eligibility criteria and submit independent documentation as required in § 950.202 and § 950.203 to be included in the Charity List. However, a satellite office that is not separately incorporated, in lieu of its own [26 U.S.C. 501](http://api.fdsys.gov/link?collection=uscode&title=26&year=mostrecent&section=501&type=usc&link-type=html)(c)(3) tax exemption letter and, to the extent required by § 950.203(a)(2), audited financial statements, may submit the local organization's [26 U.S.C. 501](http://api.fdsys.gov/link?collection=uscode&title=26&year=mostrecent&section=501&type=usc&link-type=html)(c)(3) tax exemption letter and audited financial statements, but must provide its own pro forma IRS Form 990, as defined in § 950.203(a)(3), for CFC purposes. The satellite office must submit a certification from the Chief Executive Officer (CEO) or CEO equivalent of the local organization stating that it operates as a bonafide office in good standing and is covered by the local organization's [26 U.S.C. 501](http://api.fdsys.gov/link?collection=uscode&title=26&year=mostrecent&section=501&type=usc&link-type=html)(c)(3) tax exemption, IRS Form 990 and audited financial statements.

(iii) For central organizations that are churches, the CFC will accept a copy of its most recently published listing (such as a church directory) of section 501(c)(3) organizations that are included in the group exemption held by the central organization. A subordinate may alternatively obtain a letter from the central organization affirming the subordinate's status as an organization exempt under section 501(c)(3) of the Internal Revenue Code that is included in the group exemption held by the central organization.

Each applicant’s 501(c)(3) status will be verified with the IRS. Applicants whose current 501(c)(3) status cannot be confirmed by the IRS will be denied participation. OPM encourages organi-zations to verify their current tax-exempt status prior to submitting a CFC application. This can be done by contacting the IRS at (877) 829-5500.

Item 3

Self-explanatory

**Item 4**

**Check the appropriate box. The certifying official must certify that the federa­tion accounts for its funds on an accrual basis in accordance with Generally Accepted Accounting Principles (GAAP) and has an audit of its fiscal operations completed annually by an independent certified public accountant in accordance with Generally Accepted Auditing Standards (GAAS).** No other basis of accounting is acceptable under GAAP.The cash basis, modified cash basis, modified accrual basis, and any other methods are not acceptable under GAAP.

**Include as *Attachment B* a copy of auditor’s report and the federation's complete audited annual financial statements.** The audited financial statements must cover the fiscal period ending not more than 18 months prior to January 2017 (i.e., ending on or after June 30, 2015).

The audited financial statements must include all statements and audit notes as required by GAAP. The Independent Auditor’s Report must include the signature of the auditor or the auditing firm.

**The audited financial statements must verify the federation is honoring designations made to each member organization by distributing a proportionate share of receipts based on donor designations to each member**. The IRS Form 990 and audited financial statements must cover the same fiscal period and be prepared using the accrual basis of accounting.

The audit requirement is waived for newly created federations operating for less than a year as determined from the date of its IRS tax-exemption letter to the closing date of the CFC application period.

**Item 5**

Check the appropriate box. **Include as *Attach-ment C* a copy of the complete, signed IRS Form 990 for a period ended not more than 18 months prior to January 2017.** The IRS Form 990 must include a signature in the block marked “Signature of officer”; the preparer’s signature alone is not sufficient. Organizations that file the IRS Form 990 electronically may submit a signed copy of the IRS Form 8879-EO or IRS Form 8453-EO in lieu of a signature on the IRS Form 990.

The CFC will compare the number of voting members disclosed in Part I, Line 3 with the number of individuals that have the ‘individual trustee or director’ position selected in Part VII, Column C. (The IRS Form 990 instructions define a ‘director or trustee’ as a member of the organization’s governing body but only if the member has voting rights.) If the number in Part I is more than the number in Part VII, the organization must provide an explanation for the difference. Failure to clarify the difference or to timely file an amended IRS Form 990 with the IRS may result in the denial of the application. Please review CFC Memoranda for additional information on the IRS Form 990 requirements, including the presentation of the governing body and expenses.

A complete IRS Form 990 is required including all supplemental statements and Schedule A, if applicable, with the exception of Schedule B, for the applicant federation to be eligible for the CFC. If the IRS does not require the federation to file the Form 990 (long form), it must complete and submit a pro forma IRS Form 990 (see instructions below). IRS Forms 990EZ, 990PF, and comparable forms will not be accepted. Organizations that use these forms must submit a pro forma IRS Form 990.

**Pro forma IRS Form 990 Instructions** – The IRS Form 990 can be downloaded from the IRS website ([www.irs.gov](http://www.irs.gov)). The following sections must be completed: Page 1, Items A-M; Part I (Summary), Lines 1-4 only; Part II (Signature Block); Part VII (Compensation section A only); Part VIII (Statement of Revenues), Part IX (Statement of Functional Expenses) and; Part XII (Financial Statements and Reporting).

The IRS Form 990 and audited financial statements must be prepared using the accrual method of accounting and cover the same fiscal period ended not more than 18 months prior to January 2017 (i.e. ending on or after June 30, 2015).

**Item 6**

**Calculate and enter the federation’s annual percentage for administrative and fundraising expenses based the formula below.**

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).

No other methods may be used to calculate this percentage.  All percentages must be listed to the tenth of a percent (e.g. 15.7%).

Charities which do not reflect administrative and fundraising expenses in the Statement of Functional Expenses of the IRS Form 990, resulting in a 0% rate, but show such expenses on the audited financial statement will be denied unless the audited financial statements specifically state that these services were donated.

**Item 7**

**Each federation must include as *Attachment D*  a complete listing of the federation’s board of directors and the beginning and end dates of each board member’s current term of office (e.g. John Smith, 2013-2017). *Attachment E* must also list the board’s meeting dates and locations for the previous calendar year (2016).**

The CFCuses Part VII of the IRS Form 990 to verify that a majority of the governing body served without compensation. The IRS Form 990 instructions define a director/trustee as member of the governing body with voting rights. These are the individuals that will be reviewed. Cases where 50% of the board received compensation and 50% of the board was not compensated will be denied, regardless of the amount of the compensation.

**Item 8**

Self-explanatory

**Item 9**

Self-explanatory

**Item 10**

Self-explanatory

**Item 11**

Self-explanatory

**Item 12**

Each federation and independent organization applying to participate in the CFC must, as a condition of participation, certify that it is in compliance with all statutes, Executive Orders, and regulations restricting or prohibiting U.S. persons from engaging in transactions and dealings with countries, entities, and individuals subject to economic sanctions administered by the U.S. Department of the Treasury’s Office of Foreign Assets Control (OFAC). The programs administered by OFAC restrict or prohibit U.S. persons from engaging in transactions and dealings with targeted countries, entities, and individuals. OFAC publishes a list of Specially Designated Nationals and Blocked Persons (SDN List).  The persons on the SDN List are subject to economic sanctions. The SDN List and additional information relating to the economic sanctions programs that OFAC administers are available at <http://www.treas.gov/ofac>. A link to the SDN List is available on the CFC website ([www.opm.gov/cfc](http://www.opm.gov/cfc)). For further information, please see CFC Memo 2005-13.

**Certifying Official** The certifying official is the individual who has the authority to affirm that all statements in the application are accurate.

***IF THE FEDERATION IS DENIED***

If the federation’s application is denied, it will receive an email stating the reason(s) for the denial. If the federation wishes to appeal the decision to the Director of OPM, the appeal must be received by OPM within ten business days of the receipt of the email. The appeal should be complete and respond to the reason(s) for the original denial decision.

Additional information or a revision to a submitted document will only be accepted if it existed prior to the application deadline. The CFC will not accept documents that did not exist or were not set forth in final form prior to the application deadline.

**APPLICANTS SHOULD BE AWARE THAT A FALSE RESPONSE TO ANY CERTIFICATION IN THIS APPLICATION MAY BE GROUNDS FOR DENIAL OF THE APPLICATION AND MAY BE PUNISHABLE BY FINE OR IMPRISONMENT (18 U.S.C. 1001).  ALL STATEMENTS AND INFORMATION PROVIDED ARE SUBJECT TO INVESTIGATION, INCLUDING CONFIRMATION THROUGH THIRD PARTIES AND OTHER GOVERNMENT AGENCIES.**

Any information in your application may be subject to public disclosure under the Freedom of Information Act (FOIA). If your application is the subject of a FOIA request, you will be notified and given the opportunity to identify each item in the application that you believe is exempt from disclosure under the FOIA, specify which exemption you believe applies to that item, in accord with 5 U.S.C. Section 552, and give full justification for your belief that the justification(s) applies.  In making our decision on the disclosure, we will consider your justification for nondisclosure.  If we decide that an item of information that you believe is exempt is not exempt from disclosure, we will so inform you before it is disclosed.

**REQUIRED ATTACHMENTS (failure to provide any of these may result in a denial)**

* **Attachment A – List of eligible member organizations (include each organization’s IRS Business Master File name (if applying under a DBA), EIN, and administrative and fundraising rate) (See Item 1)**
* **Attachment B – Audited Financial Statements (See Item 4)**
* **Attachment C – IRS Form 990 (See Item 5)**
* **Attachment D – Board of Directors’ Current Terms of Office and Meeting Dates and Locations (See Item 7)**

**THE APPLICATION AND SUPPORTING DOCUMENTATION MUST BE *SUBMITTED* BY THE OFFICE OF PERSONNEL MANAGEMENT BY 11:59:59PM (EST), [TBD], 2017. LATE APPLICATIONS WILL NOT BE ACCEPTED.**

**PENDING OMB APPROVAL**

**No. 3205-0131**

****

Combined Federal Campaign

**2017 Application for**

**Federations**

**CFC Application System Account Registration**:

Name:

Email Address:

**CFC Charity Application**:

Federation:

Employer Identification Number (EIN): **\_\_\_ \_\_\_ - \_\_\_ \_\_\_ \_\_\_ \_\_\_ \_\_\_ \_\_\_ \_\_\_**

CFC Code (If a previous participant in the CFC): **\_\_\_ \_\_\_ \_\_\_ \_\_\_ \_\_\_**

Telephone: ( )\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Website Address:

Federation Address:

*(PO Box addresses are not accepted and may result in automatic disqualification.)*

Contact Person:

Contact Title:

Contact Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(If different from the above address – Post Office Boxes are acceptable for the Contact Address. All OPM correspondence will be sent to this address.)*

Contact Telephone: ( )\_\_\_\_\_\_\_\_\_\_\_\_ Fax: ( )\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Email Address(es):

Disbursement Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(This is the address where paper checks will be sent.)*

**Electronic Fund Transfer (EFT)**:

Financial Institution:

Routing Number (nine digits): **\_\_\_ \_\_\_ - \_\_\_ \_\_\_ \_\_\_ \_\_\_ \_\_\_ \_\_\_ \_\_\_**

Account Number:

**CFC Auto-Response Element (CARE) Statement**:

The CFC Pledge System will immediately acknowledge donors’ gifts with a statement expressing thanks and an organization-specific explanation of what the donors’ gift will be used to fund. You may enter that statement here (optional; limited to 1,000 characters, including spaces, carriage returns, and line breaks.)

1) Place a check in the ***one*** appropriate box:

**Local Part**

I certify that the federation named in this application has \_\_\_\_\_ (enter number) member organizations that individually meet the eligibility criteria for local organizations in 5 CFR § 950.202 and §950.203. **Include as *ATTACHMENT A,* a list of all member organizations that meet this requirement.** The list must include each organization with its five-digit CFC code (if applicable), legal name in parentheses(if using a “dba”), Employer Identification Number (EIN), administrative and fundraising rate, and physical address.

**– OR –**

**National/International Part**

I certify that the federation named in this application has \_\_\_\_\_ (enter number) member organizations that individually meet the eligibility criteria for national/international organizations in 5 CFR §950.202 and §950.203. **Include as *ATTACHMENT A,* a list of all member organizations that meet this requirement.** The list must include each organization with its five digit CFC code (if applicable), legal name in parentheses(if using a “dba”), Employer Identification Number (EIN), administrative and fundraising rate, and physical address.

**– OR –**

**International Part**

I certify that the federation named in this application has \_\_\_\_\_ (enter number) member organizations that individually meet the eligibility criteria for international organizations in 5 CFR § 950.202 and §950.203 by providing real services, benefits, assistance, or program activities in at least one foreign country over the previous three years. **Include as *ATTACHMENT A,* a list of all member organizations that meet this requirement.** The list must include each organization (with its legal name in parentheses if using a “dba”), Employer Identification Number (EIN), administrative and fundraising rate, and physical address.

2)  I certify that the Internal Revenue Service (IRS) recognizes the federation named in this application as tax-exempt under 26 U.S.C. 501(c)(3) to which contributions are tax deducti­ble pursuant to 26 U.S.C. 170(c)(2)**.** *See instructions for additional information.*

3)  I certify that the federation named in this application is a human health and welfare federation and either it or its member organizations provide services, benefits, or assistance to, or conduct activities affecting, human health and welfare. Services, benefits, assistance, or program activities affecting human health and welfare were provided in calendar year 2016.

4) Place a check in the ***one*** appropriate box:

I certify that the federation named in the application accounts for its funds on an accrual basis in accordance with generally accepted accounting principles (GAAP) and has an audit of its fiscal operations completed annually by an independent certified public accountant in accordance with generally accepted auditing standards (GAAS). (**Include as *ATTACH-MENT B* a copy of the auditor’s report and the complete audited financial statements for a fiscal period ending not more than 18 months prior to January 2017** which verifies that the federation is honoring designations made to each member organization by distributing a proportionate share of receipts based on donor designations to each member.)

**– OR –**

I certify that the federation named in this application accounts for its funds on an accrual basis in accordance with generally accepted accounting principles (GAAP), but has been operating for less than two years from the date of the IRS tax exemption letter to the closing date of the CFC application period and therefore is not required to submit audited financial statements.

5) Place a check in the ***one*** appropriate box:

I certify that the federation named in this application prepares and submits to the IRS a complete copy of the federation’s IRS Form 990. (**Include as *ATTACHMENT C* a copy of the complete IRS Form 990 for a period ending not more than 18 months prior to January 2017**, including signatures in the box marked “Signature of Officer” or in either IRS Form 8879-EO or IRS Form 8453-EO. The preparer’s signature alone is not sufficient. IRS Forms 990EZ, 990PF, and comparable forms are not acceptable substitutes.)

**- OR -**

I certify that the federation named in this application is not required to prepare and submit an IRS Form 990 to the IRS. (**Include as *ATTACHMENT C* a pro forma IRS Form 990 for a period ending not more than 18 months prior to January 2017**. See application instructions for pro forma IRS Form 990 requirements. IRS Forms 990 EZ, 990PF, and comparable forms are not acceptable substitutes.)

6)  I certify that the administrative and fundraising rate (AFR) for the federation named in this application is \_\_ \_\_ . \_\_%.This percentage is computed only from information on the IRS Form 990 submitted with this application. See the instructions for more information on how to calculate the AFR.

7)  I certify that an active and responsible governing body, whose members have no material conflict of interest and a majority of whom serves without compensation, directs the federation named in this application. **Include as *ATTACHMENT D* a complete list of the federation’s board of directors** with the beginning and end date of each board member’s current term of office and the board’s meeting dates and locations for calendar year 2016.

8)  I certify that the federation named in this application prohibits the sale or lease of CFC contributor lists.

9)  I certify that the federation named in this application conducts publicity and promotional activities based upon its actual program and operations, and that these activities are truthful and non-deceptive, include all material facts, and make no exaggerated or misleading claims.

10) I certify that the federation named in this application effectively uses the funds contributed for its announced purposes.

11) I certify that the federation named in this application does not employ, in its CFC operations, the services of private consultants, consulting firms, advertising agencies or similar business organizations to perform its policy-making or decision-making functions in the CFC.

12) I certify that the federation named in this application is in compliance with all statutes, Executive orders, and regulations restricting or prohibiting U.S. persons from engaging in transactions and dealings with countries, entities, or individuals subject to economic sanctions administered by the U.S. Department of the Treasury’s Office of Foreign Assets Control. The organization named in this application is aware that a list of countries subject to such sanctions, a list of Specially Designated Nationals and Blocked Persons subject to such sanctions, and overviews and guidelines for each such sanctions program can be found at <http://www.treas.gov/ofac>. Should any change in circumstances pertaining to this certification occur at any time, the organization will immediately notify OPM's Office of CFC.

**Certifying Official**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, am the duly appointed representative

*(Print Name)*

of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ authorized to certify and affirm all statements

*(Print Federation Name)*

included in this application. I certify that I have read all the certifications set forth in this document and affirm their accuracy. In addition, by checking the boxes next to the certification statements above, the federation named in this application acknowledges and agrees to comply with that certification, Federal regulations pertaining to the CFC, and the directions of the Director of the Office of Personnel Management.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(Typed or Printed Name)*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(Title)*

Date Completed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The application must be *submitted through the online CFC application module* by 11:59:59PM (EST) [TBD], 2017. Applications submitted after that date, or sent via any means other than the online application module, will not be accepted.

**APPLICANTS SHOULD BE AWARE THAT A FALSE RESPONSE TO ANY CERTIFICATION IN THIS APPLICATION MAY BE GROUNDS FOR DENIAL OF THE APPLICATION AND MAY BE PUNISHABLE BY FINE OR IMPRISONMENT (18 U.S.C. 1001).  ALL STATEMENTS AND INFORMATION PROVIDED ARE SUBJECT TO INVESTIGATION, INCLUDING CONFIRMATION THROUGH THIRD PARTIES AND OTHER GOVERNMENT AGENCIES.**

**Any information in your application may be subject to public disclosure under the Freedom of Information Act (FOIA). If your application is the subject of a FOIA request, you will be notified and given the opportunity to identify each item in the application that you believe is exempt from disclosure under the FOIA, specify which exemption you believe applies to that item, in accord with 5 U.S.C. Section 552, and give full justification for your belief that the justification(s) applies.  In making our decision on the disclosure, we will consider your justification for nondisclosure.  If we decide that an item of information that you believe is exempt is not exempt from disclosure, we will so inform you before it is disclosed.**

|  |
| --- |
| **Public Burden Statement**  We think this form takes an average of 3 hours to complete, including the time for getting the needed data and reviewing both the instructions and completing the form. Send comments regarding our estimate or any other aspects of this form, including suggestions for reducing completion time to Office of Personnel Management (OPM), Office of CFC (3206-0131), Washington, DC 20415-7900. The OMB number 3206-0131 is currently valid. OPM may not collect this information, and you are not required to respond, unless this number is displayed. |