



## Arkansas Alzheimer's Fundraising Policies and Guidelines

1. Alzheimer's Arkansas reserves the right to decline any event or promotion.
2. Donations/contributions of less than 50% of net proceeds will require the Alzheimer's Arkansas approval. Please allow additional time.
3. In naming your activity, Alzheimer's Arkansas should not be used in the title, but rather, "proceeds to benefit Alzheimer's Arkansas" is appropriate. For example, "Charity Auction to benefit Alzheimer's Arkansas" is used rather than "The Alzheimer's Arkansas Auction."
4. If Alzheimer's Arkansas is the beneficiary of less than 50%, the title should read, "\_\_\_\_% of proceeds to benefit Alzheimer's Arkansas." As the donor or sponsor of the activity, you are required by the IRS regulations to denote in all promotional and printed material the percentage of proceeds that will be donated to Alzheimer's Arkansas. For example, if Alzheimer's Arkansas will receive 40% of all entry fees for a particular event, the caption should read "Alzheimer's Arkansas will receive 40% of all event entry fees."
5. Please contact Alzheimer's Arkansas for approval **before soliciting support for your event**. We will be glad to work with you to coordinate efforts. This will ensure that we don't contact the same individual or business for a gift.
6. As the local contact in charge of the activity, you will be most effective in working with the local media to gain maximum coverage. Please provide Alzheimer's Arkansas with a registration list of attendees along with home and email addresses.
7. All events are required to provide Alzheimer's Arkansas with a registration list of attendees along with home and email addresses.
8. The Alzheimer's Arkansas logo a registered trademark and may not be reproduced without prior approval. The logo may not be altered in any way.
9. If approved, you will be using Alzheimer's Arkansas' name to help promote your event. Because of that affiliation, the following guidelines apply:
  - In some cases, a separate bank account in the name of the fundraising activity may be established for the sole purpose of collecting donations and paying fundraising expenses. **THIS MUST BE APPROVED IN ADVANCE BY Alzheimer's Arkansas**. If it is agreed that an account will be established, no co-mingling of funds will be permitted and authorized signatures of the account must be approved by Alzheimer's Arkansas along with a copy of the monthly bank statement as long as the account remains open.
  - All original invoices, check books, bank statements, deposit slips, voided documents and other documents related to fundraising activity must be maintained from the onset of this agreement.
  - All documents should be retained until the fundraising activity is completed and a representative of Alzheimer's Arkansas has officially accepted the proceeds.



- Alzheimer's Arkansas is authorized to have complete access to all fundraising records from the onset of the fundraising activity and is authorized to audit such records at completion of the fundraiser or at any time during the fundraising activity as deemed necessary by Alzheimer's Arkansas.
  - Collection of all donations should be in accordance with the **Instructions for Handling and Documenting Cash and Other Donations** (enclosed).
  - An Event Donation Summary Form (enclosed) must be completed and sent to Alzheimer's Arkansas along with the proceeds of the event. Funds raised should be remitted to Alzheimer's Arkansas within 30 days following the event or on terms mutually agreed upon prior to the event. Please include names and addresses of anyone who should receive a thank you letter from Alzheimer's Arkansas. Please do not mail cash. Convert all cash into a cashier's check or money order.
10. Alzheimer's Arkansas will not provide approval to individuals to privately solicit funds for the organization. We believe it is in the best interest of each individual to work within a group of volunteers in order to maintain the safest of environments.
  11. You must obtain all necessary permits, licenses and insurance. If you enter into any contracts for the activity, please send copies to Alzheimer's Arkansas. **You may not enter into any contracts on behalf of Alzheimer's Arkansas.**
  12. Attendance of an Alzheimer's Arkansas staff will be based on availability and pursuant to staff attendance policy. Each year, Alzheimer's Arkansas conducts or is the beneficiary of many events. Unfortunately, staff cannot attend each event. However, we will work directly with you to determine attendance in advance of your event.
  13. Please be aware that the IRS has issued regulations regarding the deductibility of charitable donations. For example, if you are providing your donors with something of value as part of their contribution, not all of their donation may be tax deductible. It may be necessary to deduct the value of the service gift or meal they receive before the deductible portion of the contribution is realized. If you have questions about your activity, please consult with an Alzheimer's Arkansas staff member and we will help you adhere to IRS regulations. See page 7 for current IRS policy.



### Quid Pro Quo Contributions

A payment made by a donor to a charity that is partly contribution and partly for goods or services is considered a quid pro quo contribution. If the donor's quid pro quo contribution is more than \$75, a written notice (as described in the table below) must be provided.

**Current IRS Policy:**

<u>GIFT AMOUNT</u>	<u>VALUE TO THE DONOR</u>	<u>RESPONSE</u>
Less than \$75	None or valued at less than \$9.10	Written notice that value to the Donor was insignificant and Entire gift is deductible as allowed by the law.
\$75 to \$249	None	Same as above
	\$9.10 or less	Same as above
	More than \$9.10	Written notice stating amount of donation, value of gift to donor, & amount deductible (donation amount minus value received).
\$250 or over	None	Written notice stating amount of donation, nothing of material value received, & entire gift is deductible as allowed by law.
	Less than \$9.10 or 2% of gift	Written notice stating amount Of gift, value of gift to donor That is insignificant and entire gift is deductible as allowed by law.
	Over 2%	Written notice stating amount of goods and services to donor and amount thus deductible.

- Figures accurate through December 31, 2008.



## Event Planning FAQs

Q: How do I plan an event to benefit Alzheimer's Arkansas?

A: At least 45 days prior to your event:

- Review our Event Policies and Guidelines
- Complete the Online Event Application or print the Event Application, complete and mail to: Alzheimer's Arkansas, 201 Markham Center Drive, Little Rock, AR 72205.
- Contact Alzheimer's Arkansas at 501-224-0021, or email to [www.alzark.org](http://www.alzark.org)
- Please do not solicit support for your event prior to receiving Alzheimer's Arkansas approval.

Q: Can an Alzheimer's Arkansas representative attend my event?

A: Attendance of an Alzheimer's Arkansas staff will be based on availability and pursuant to staff attendance policy. Each year, Alzheimer's Arkansas conducts or is the beneficiary of many events. Unfortunately, staff cannot attend each event. However, we will work directly with you to determine attendance in advance of your event.

Q: How should I handle event expenses:

A: Please discuss this process with your Alzheimer's Arkansas representative. In some cases, a separate bank account in the name of the fundraising activity may be established for the sole purpose of collecting donations and paying fundraising expenses.

Q: Can I use the Alzheimer's Arkansas name and logo?

A: Once your fundraiser is approved, you will be able to use the name and logo in your event materials and advertising. The logo is a registered trademark and may not be reproduced without prior approval or altered in any way. Your Alzheimer's Arkansas representative can send you the logo you need. Please do not pull logos from the website. All materials that contain the name or log should be submitted to your representative for review before printed or distributed.

Q: When will I know if my proposed fundraiser is approved?

A: The Development Committee will review your completed application to be sure that your fundraiser aligns with Alzheimer's Arkansas mission. Most of our community fundraising activities are approved within 5-7 days of receiving a completed application.



Thank you for your interest in hosting an event for Alzheimer's Arkansas. By choosing to host an event for Alzheimer's Arkansas, you are making a difference. To help guide clubs and individuals in hosting community fundraising events, we have established event guidelines and procedures. All fundraising events require prior sanction and support from Alzheimer's Arkansas.

Alzheimer's Arkansas reserves the right to approve all events. Successful events should uphold the mission and image of Alzheimer's Arkansas, and offer net proceeds or an acceptable percentage of net revenue to Alzheimer's Arkansas. The completed event proposal form must be submitted to Alzheimer's Arkansas at least 45 days prior to the event in order to be considered for approval. Your application will be reviewed and you will be notified of approval/status within 5-7 days. Events will be approved on a case by case basis.

Common reasons for delay of approval:

1. Event does not fit within the Alzheimer's Arkansas culture.  
(i.e. The event is unsafe or unclear. Examples are boating and motorcycle events combined with alcohol or events involving high risk sports.)
2. Event is not mutually or equally beneficial: The event promotes a business rather than philanthropy.  
(i.e. Net proceeds to Alzheimer's Arkansas are less than 50%.)
3. Requirements for implementation of event cannot be supported by Alzheimer's Arkansas.  
(i.e. Event does not allow enough time to adequately plan and implement a successful event.)
4. Application submitted too close to event date.  
(i.e. Event does not allow enough time to adequately plan and implement a successful event.)
5. Event requires Alzheimer's Arkansas to provide solicitation list.

**In order to be great stewards of your hard work and dedication, we ask that you update your application every 3 years or if the event changes in any way. If you would like assistance in completing the application, please contact us at 501-224-0021.**



**Alzheimer's Arkansas  
Event Application**

Please choose the description that best matches your group and event:

- Organized and recognized club that meets regularly to fundraiser for Alzheimer's Arkansas.
- Organized group of individuals hosting a community event to benefit Alzheimer's Arkansas.
- Business/Corporation – Private or public business holding an event for Alzheimer's Arkansas.
- School or organized club within school holding a fundraising event.

Individual/Organization/Business Name \_\_\_\_\_

Event Name \_\_\_\_\_

Contact Person (Person responsible for the event) \_\_\_\_\_

Email \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Brief Description of Event/Promotion \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Event Date \_\_\_\_\_ Time \_\_\_\_\_

Location \_\_\_\_\_

Promotional Period \_\_\_\_\_

How will you promote the event? \_\_\_\_\_

Please list all anticipated sources of income or revenue for event:

*(Examples include ticket sales, entry fees, bingo revenue, pancake breakfast, etc.)*

Description	_____	Amount	\$ _____
	_____	Amount	\$ _____
	_____	Amount	\$ _____



Please list anticipated expenses, if any, that will be paid from event income. (Examples include supplies, entertainment, printing, postage, etc.)

Table with 3 columns: Description, Amount, and \$. Three rows for listing expenses.

Event/Promotion Proceeds (Income minus Expenses) \$ \_\_\_\_\_

% of proceeds donated to Alzheimer's Arkansas: \_\_\_\_\_% (Please note that net donations of less than 50% must receive special approval from Alzheimer's Arkansas Development Committee.)

Total estimated donation to Alzheimer's Arkansas is: \$ \_\_\_\_\_

Please answer the following questions:

1. Will any other organization benefit from this event/promotion? [ ] Yes [ ] No If yes, please list other organizations and percentage going to each.

2. Has the activity been approved by necessary local and county officials? [ ] Yes [ ] No

3. All publicity and printed materials for this proposed activity must be approved by Alzheimer's Arkansas, and no publicity may be released, printed, etc., until Alzheimer's Arkansas has reviewed and approved it in writing. Please initial: \_\_\_\_\_

4. Please describe any support you will need from Alzheimer's Arkansas.

I, \_\_\_\_\_, agree on behalf of the organization I represent that once the project outlined above is approved by Alzheimer's Arkansas, we will abide by the Fundraising Policies and Guidelines of Alzheimer's Arkansas, a copy of which has been provided to the organization by Alzheimer's Arkansas. In addition, we agree funds raised from the activity will be remitted to Alzheimer's Arkansas within 30 days of the event. I profess that the information provided by me in the Fundraising Proposal Form is true and factual to the best of my knowledge.

Representative Signature \_\_\_\_\_ Date \_\_\_\_\_

FOR OFFICE USE ONLY

Date Received \_\_\_\_\_ Approved \_\_\_\_\_ Declined \_\_\_\_\_ AA Staff \_\_\_\_\_



## Alzheimer's Arkansas

### Instructions for Handling and Documenting Cash and Other Donations

Once your event is approved, you will be required to collect all donations in accordance with the following instructions:

#### **Cash**

- a. Please record the names and addresses of anyone who should receive a thank you/tax letter from Alzheimer's Arkansas. Please see page 9 for sample Cash/Credit Gift Acknowledgement form.
- b. Two people should count any cash received. The count should occur immediately following the event.
- c. Record the total number and amount of cash donations on the Event Donation Summary Form.
- d. Please do not mail cash. Before remitting the funds raised, please convert all cash into a cashier's check or money order.

#### **Checks**

- a. Checks should be endorsed upon receipt:

FOR DEPOSIT ONLY

Alzheimer's Arkansas

Please note that this step must be accomplished in order to make the checks non-negotiable.

- b. Two people should count all checks received. The count should occur immediately following the event.
- c. Record the total number and amount of checks on the Event Donation Summary Form.

#### **Other Donations**

- a. Please record the names and addresses of anyone who should receive a thank you letter from Alzheimer's Arkansas for in-kind donations.

#### **Event Donation Summary Form**

- a. Each person counting shall sign the Event Donation Summary Form (attached) to acknowledge verification of the number and total amount of cash, checks, and other types of donations received.
- b. Ensure all donations are summarized by the pay type and totaled on the Form.
- c. Complete all other sections of the Form and remit to Alzheimer's Arkansas along with all funds raised.





**Cash/Credit Gift Acknowledgment**

Donor Name: \_\_\_\_\_  
Company/Organization Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone Number Work: \_\_\_\_\_ Home: \_\_\_\_\_  
Email: \_\_\_\_\_  
Date: \_\_\_\_\_ Amount of Gift: \$ \_\_\_\_\_  
Event: \_\_\_\_\_

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**Cash/Credit Gift Acknowledgment**

Donor Name: \_\_\_\_\_  
Company/Organization Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone Number Work: \_\_\_\_\_ Home: \_\_\_\_\_  
Email: \_\_\_\_\_  
Date: \_\_\_\_\_ Amount of Gift: \$ \_\_\_\_\_  
Event: \_\_\_\_\_

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**Cash/Credit Gift Acknowledgment**

Donor Name: \_\_\_\_\_  
Company/Organization Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone Number Work: \_\_\_\_\_ Home: \_\_\_\_\_  
Email: \_\_\_\_\_  
Date: \_\_\_\_\_ Amount of Gift: \$ \_\_\_\_\_  
Event: \_\_\_\_\_



Alzheimer's Arkansas
Event Donation Summary Form

Name of event/promotion:
Contact Name:
Organization:
Address:
City: State: Zip:
Email:
Date(s) held:
Methods used to raise funds:

Donation Summary:

Table with 3 columns: Pay Type, Total \$ Donations, Total Donations. Rows include Cash, Check, Other, and a description line.

Totals:

Expenses: (use back of form if extra space is needed)

Table with 2 columns: Type of Expense, Amount of Expense. Includes three rows for expense entry.

Total Expenses:

Net Contribution to Alzheimer's Arkansas :

Amounts submitted by:
Signature Date

Signature Date

Signature

Donor Services Verification ( by Alzheimer's Arkansas)
Signature Date