



2020-2021 PLUS Membership and Donation Form

GENERAL INFORMATION

Foundation Name: _____

Address: _____ City, State, ZIP: _____

Phone: _____ Email: _____ Website: _____

Executive Director Information (if applicable)

Name: _____ Mobile Number: _____

Email Address: _____

If you have an executive director, is it a: part-time position? full-time position?

Board President Information

Name: _____ Mobile Number: _____

Email Address: _____

Fiscal Year: Beginning date (MM/DD): _____ Ending date (MM/DD): _____

FOUNDATION OUTCOMES: Please use your most recent fiscal year data

Total Students Served: _____ Average % of Students Eligible for Free/Reduced Lunch: _____

Total 990 Income in FY __: _____ Total Net Assets or Fund Balance: _____

Total Amount Awarded in FY __: \$ _____ Total Amount Awarded Since Inception: \$ _____

Dollar amount given in the form of grants in FY __: _____

Dollar amount given in the form of scholarships in FY __: _____

Dollar amount given in other areas in FY __: _____

Fundraising Activities of Your Foundation (check all that apply):

- | | |
|--|---|
| <input type="checkbox"/> Alumni Banquet | <input type="checkbox"/> Golf Outing |
| <input type="checkbox"/> Award Banquet | <input type="checkbox"/> Silent Auction |
| <input type="checkbox"/> Formal Dinner | <input type="checkbox"/> Thank an Educator |
| <input type="checkbox"/> Adult Social Event | <input type="checkbox"/> Teacher Payroll Giving |
| <input type="checkbox"/> Family Social Event | <input type="checkbox"/> Walk/Run |
| <input type="checkbox"/> None yet; still working on forming the foundation | |
| <input type="checkbox"/> Other: _____ | |

Form continues on back side.

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Priorities for the Next Year: _____

Board Training Areas of Interest: _____

PLUS MEMBERSHIP FEE STRUCTURE

Membership in the Oklahoma School Foundations Network PLUS program is a great deal – HALF of the standard National School Foundation Association membership, which is based on your organization's revenue reported on the most recent IRS 990 form, or the most recent fiscal year income if your organization does not file a 990 or 990EZ.

NSFA Membership	PLUS Membership Levels
\$150 for income of \$100,000 or less	\$75
\$300 for income of \$100,001-\$250,000	\$150
\$400 for income of \$250,001-\$500,000	\$200
\$500 for income of \$500,001-\$999,999	\$250
\$600 for income of \$1,000,000-\$2,000,000	\$300
\$700 for income of \$2,000,001 or more	\$350

JOIN/DONATE TODAY

\$ _____ Oklahoma School Foundations Network PLUS Membership for 2020-2021.

\$ _____ Donation to support the year-round training and networking services of the Oklahoma Foundation for Excellence's Oklahoma School Foundations Network.

\$ _____ Total for PLUS Membership and/or donation to Oklahoma School Foundations Network.

Please return this form with payment. Checks should be made payable to the **Oklahoma Foundation for Excellence**.

Billing Information:

A check is enclosed Bill now Bill quarterly Bill other: _____

Bill MasterCard / Visa (circle one)

Card Number: _____

Name on card: _____

Signature: _____ Expiration Date: _____

Please return this form in the enclosed reply envelope by Tuesday, October 6, 2020.

Questions? Contact Katy Leffel,
Director of Oklahoma School Foundations Network
kleffel@ofe.org or 405-922-5420

