



2026 Membership Application

Date: _____

Organization Information *(Philanthropic Individual applicants should provide personal information.)*

Organization (Name): _____

Street Address: _____

City/State/Zip: _____

Primary Phone: _____

Primary Email: _____

Website (if available): _____

For Organizations Only

(financial information should reflect the end of the last full fiscal year)

Number of board members: _____ Total assets: _____

Number of paid staff members: _____ Total annual giving*: _____

Year established: _____ Total number of grants paid: _____

**For new foundations that have not begun making grants, please tell us where your grantmaking process stands.*

Membership Category *(Please choose one.)*

- Community Foundation
- Corporate Foundation/Giving Program
- Donor-Advised Fund
- Family Foundation
- Federated Fund (including United Way orgs.)
- Giving Circle
- Grantmaking Public Charity
- Health Legacy/Conversion Foundation
- Independent Foundation
- Operating Foundation
- Philanthropic Individual
- State/Local Philanthropic Association
- Supporting Organization

Program Areas of Support *(Choose all that apply.)*

- Aging
- Agriculture, Fishing & Forestry
- Animal Welfare
- Arts & Culture
- Civil & Human Rights
- Communications/Media
- Community/Economic Development
- Disaster Relief/Preparedness
- Education – General
- Education – Pre-K
- Education – K-12
- Education – Higher
- Environment
- Health – General
- Health – Medical Research
- Health – Mental Health
- Health – Public Health
- Human Services
- International Relations
- Philanthropy/Voluntarism
- Public Affairs/Civic Engagement
- Public Safety/Legal Aid
- Religion
- Science
- Social Sciences
- Sports & Recreation
- Youth Development
- Other (specify): _____

Geographic Areas of Support *(Choose all that apply.)*

- Local
- State
- Regional (multi-state)
- National
- International
- Other (specify): _____

Contact Information

To ensure that we send materials to the appropriate people at your organization, please provide us with current contact information in the section below. Unless you specify otherwise, every person included in this section will receive *Connect*, our weekly email newsletter, and other email communications appropriate to your organization. The primary contact will receive a print copy of *Inspiration*, our quarterly magazine. If you specify a separate billing contact, letters and notices related to membership renewal will be sent to that person in addition to the primary contact.

Primary Contact

Name: _____

Title: _____

Street Address: _____

City/State/Zip: _____

Phone: _____

Email: _____

Dues Contact *(if different from primary contact)*

Name: _____

Title: _____

Street Address: _____

City/State/Zip: _____

Phone: _____

Email: _____

Other Contacts *(trustees and staff who should receive Philanthropy Southeast communications; attach additional pages if necessary)*

Name: _____

Title: _____

Street Address: _____

City/State/Zip: _____

Phone: _____

Email: _____

Name: _____

Title: _____

Street Address: _____

City/State/Zip: _____

Phone: _____

Email: _____

Name: _____

Title: _____

Street Address: _____

City/State/Zip: _____

Phone: _____

Email: _____

Support Level Worksheet

Your annual support for Philanthropy Southeast is based on your organization's giving or assets. Renewals are billed annually in December for the coming year. New members may pro-rate their support based on the number of months remaining in the calendar year (unless paying the minimum amount). Since Philanthropy Southeast is a 501(c)(3) organization, support may be made as a grant. Our federal tax ID is 56-0995114.

For private foundations (family, corporate, independent, health legacy), corporate giving programs, giving circles or individuals:

Support levels for these groups are based on the average of grants or contributions paid over the past three years for which information is available. National and international corporations and foundations may base their support on grants made in or to benefit the Southeast (the 11 states and U.S. territories we serve).

Calculate your three-year giving average

Total grants/giving (fiscal year 1): \$ _____
 Total grants/giving (fiscal year 2): \$ _____
 Total grants/giving (fiscal year 3): \$ _____
 TOTAL: \$ _____
 Divide by 3 for your average: \$ _____

If your average is: Your support level is:

Up to \$250,000	\$720
\$250,000 - \$500,000	\$1,440
\$500,001 - \$750,000	\$2,180
\$750,001 - \$1,000,000	\$2,900
\$1,000,001 - \$1,250,000	\$3,620
\$1,250,001 - \$1,500,000	\$4,340
\$1,500,001 - \$1,750,000	\$5,070
\$1,750,001 - \$2,000,000	\$5,790
\$2,000,001 - \$2,250,000	\$6,510
\$2,250,001 - \$2,500,000	\$7,230
\$2,500,001 - \$2,750,000	\$7,960
\$2,750,001 - \$3,000,000	\$8,680
\$3,000,001 - \$3,250,000	\$9,410
\$3,250,001 - \$3,500,000	\$10,140
\$3,500,001 - \$3,750,000	\$10,860
More than \$3,750,000	\$11,590

For community foundations, operating foundations, grantmaking public charities and supporting organizations:

Support levels for community foundations, operating foundations, grantmaking public charities and supporting organizations are based on all component fund assets as computed at the end of the most recent fiscal year, excluding so-called pass-through funds and the assets of certain supporting organizations whose assets do not appear on the balance sheet.

If your assets are: Your support level is:

Up to \$15,000,000	\$720
\$15,000,001 - \$30,000,000	\$1,440
\$30,000,001 - \$45,000,000	\$2,180
\$45,000,001 - \$60,000,000	\$2,900
\$60,000,001 - \$75,000,000	\$3,620
\$75,000,001 - \$100,000,000	\$4,340
\$100,000,001 - \$125,000,000	\$5,070
\$125,000,001 - \$150,000,000	\$5,790
\$150,000,001 - \$175,000,000	\$6,510
\$175,000,001 - \$200,000,000	\$7,230
\$200,000,001 - \$250,000,000	\$7,960
\$250,000,001 - \$300,000,000	\$8,680
\$300,000,001 - \$350,000,000	\$9,410
\$350,000,001 - \$400,000,000	\$10,140
\$400,000,001 - \$450,000,000	\$10,860
More than \$450,000,000	\$11,590

PLEASE ENTER YOUR DUES HERE: \$ _____

Payment Information

Please make your check payable to Philanthropy Southeast and note "Membership" on the check. If you would like to pay by credit card, please call (404) 524-0911.

Required Documentation

For all types of organizations:

- A copy of your most recent IRS Form 990PF or 990 for established foundations
- A description of your grantmaking program (for private operating foundations, provide a description of your philanthropic activities)
- A list of recent grants
- An annual report with audited financial statements, if available

For state and local grantmaker organizations:

- A current 501(c)(3) determination letter
- A list of board and staff members

For giving circles, corporate giving programs and philanthropic individuals:

- A description of your giving
- A list of recent grants or contributions

Code of Conduct, Statement of Purpose & Validation

By signing below, you agree that, if approved for membership, you and all others affiliated with your organization will comply with Philanthropy Southeast's Code of Conduct and understand our Statement of Purpose, as follows:

Code of Conduct

Philanthropy Southeast is composed of a broad and diverse membership of grantmakers. At our core, we are a community of grantmakers connecting with each other to improve the practice of grantmaking in the Southeast. At our meetings and events, we also welcome visitors from other organizations – which are not members – that participate as presenters or participants. Philanthropy Southeast strives to create a comfortable place for all Members, visitors, and others engaged in philanthropy to exchange experiences and ideas and engage in conversations that are welcoming and of benefit to all participants. As such, Philanthropy Southeast is not a venue for grant seekers, fundraisers, or other types of charitable solicitations during any of its meetings, events or through its publications nor is it an appropriate venue to conduct political activities. We ask that our Members and visitors not solicit at Philanthropy Southeast-sponsored events or programs and that Members and visitors not use information obtained through their Philanthropy Southeast membership or participation in Philanthropy Southeast events for charitable, business or other solicitations outside of those events.

Statement of Purpose

Philanthropy Southeast strives to connect the region's philanthropic leaders with a diverse and inclusive range of information, resources, experts, innovations and best practices while promoting peer-to-peer learning and leadership development. While we may not necessarily endorse the opinions and views of those we work with, we engage with them to promote vibrant and open discussion. We believe it is necessary to have these conversations for the sake of increasing philanthropy's impact throughout the region.

Signature: _____

Date: _____

Send this completed application, dues payment and requested documents to:

Philanthropy Southeast
931 Monroe Drive NE
Suite A102-303
Atlanta, GA 30308

How did you hear about us?

- Referred by a Philanthropy Southeast member (Name/Foundation: _____)
- A colleague from another organization (Name/Organization: _____)
- A Philanthropy Southeast publication
- A Philanthropy Southeast email
- Attended a Philanthropy Southeast program
- Heard a Philanthropy Southeast member or staff speak at a conference or meeting

A professional advisor:

- Legal
- Financial
- Accounting
- (Name/Firm: _____)

Membership Eligibility & Application Process Review

Eligibility

Philanthropy Southeast membership is open to grantmaking philanthropic organizations, or philanthropic individuals, headquartered or with giving programs in the Southeast and U.S. Caribbean territories. The 11 states in our region are Alabama, Arkansas, Florida, Georgia, Kentucky, Louisiana, Mississippi, North Carolina, South Carolina, Tennessee and Virginia. Philanthropy Southeast represents a wide range of organizational grantmaking members. Constituencies within Philanthropy Southeast membership include:

- Bar association foundations
- Community foundations
- Corporate foundations and giving programs
- Donor-advised funds
- Giving circles
- Grantmaking public charities
- Federated funds (including United Way organizations and arts funds)
- Health legacy (or health conversion) foundations
- Operating foundations
- Philanthropic individuals
- Private and family foundations
- State and local associations of grantmakers
- Supporting organizations

The following criteria also apply:

1. *A prospective member's core interest in joining Philanthropy Southeast is a desire to improve the quality of its own grantmaking, to improve the field of grantmaking, and to support the people, communities and nonprofits in the South.*
 - a. As such, the organization will not use its membership to solicit donations, market itself, or otherwise seek benefits other than those stated in Philanthropy Southeast's mission.
 - b. The organization agrees to abide by and be held accountable to the Philanthropy Southeast's Statement of Principles and Code of Conduct.
2. *A significant portion of the prospective member's mission is to make charitable grants and/or awards to unaffiliated entities in its service area.*
 - a. The organization accepts solicited and/or unsolicited applications, within its funding priorities.
 - b. The organization does not restrict its giving solely to subsidiary chapters, member organizations, or affiliates.
 - c. The organization makes at least two grants annually to organizations with which it is not affiliated.
3. *The organization is not directly governed by a governmental entity.*
 - a. The organization is governed by an independent board not controlled by a unit of government or by a governmental agency.
 - b. The organization's grantmaking and other decisions are made by the board (or by a group designated by the board) and not directed by a unit of government or by a governmental agency.

- c. Funding for the organization may come from a governmental entity, but the organization's decision-making and leadership must be largely independent.
4. *Grants totaling at least \$25,000 are made annually to non-affiliated grantees.*

Review Process

Philanthropy Southeast's staff and Membership Committee review membership applications and make a recommendation to the Philanthropy Southeast Board for approval of membership. Philanthropy Southeast's Board of Trustees meets up to four times per year. After an initial review, eligible potential members will be allowed provisional status in the months before the Board's final approval. No organization that meets the eligibility criteria will be denied membership. The applicant will receive an email message confirming receipt of the application as soon as it reaches our offices.

Thank you for completing this application and for your interest in Philanthropy Southeast!

If you have questions, please contact Jaci Bertrand at jaci@philanthropysoutheast.org or (404) 524-0911.