

Membership Application

Membership in Exponent Philanthropy is open to all philanthropic individuals and organizations that award gifts to more than one recipient annually. To join, please complete this form, or apply online using a credit card for payment at www.exponentphilanthropy.org.

**Denotes a required field.*

Name of organization* _____

Contact name* _____ Title _____

Address* _____

Phone* _____ Email* _____

Website _____ EIN _____

Asset base of organization* _____ Year established _____

Legal structure* (check only one):

<input type="radio"/> Private foundation	<input type="radio"/> Community foundation
<input type="radio"/> Private operating foundation	<input type="radio"/> Donor advised fund
<input type="radio"/> Public charity	<input type="radio"/> Other: _____

Governance structure* (check only one): Family Independent Corporate

How did you hear about Exponent Philanthropy? _____

Why are you choosing to join at this time? (Check all that apply)

- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> To meet others | <input type="checkbox"/> To get started | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> For resources/best practices | <input type="checkbox"/> To prepare for transition | _____ |
| <input type="checkbox"/> To save money | <input type="checkbox"/> To increase impact | _____ |
| <input type="checkbox"/> Access to legal services | <input type="checkbox"/> For programs/trainings | _____ |

For foundations and public charities

Number of board members _____
 Number of full-time staff _____
 Number of part-time staff _____

For donor advised funds

Number of donor advisors _____

For giving circles

Number of members _____

Funding areas

(check all that apply)

- Arts and culture
- Education
- Environment and animals
- Health
- Human services
- International
- Public affairs/society benefit
- Religion
- Science and technology
- Social sciences

Population funding focus

(check all that apply)

- Aging/Senior
- Economically disadvantaged
- Immigrants, migrants, and refugees
- Indigenous people outside the U.S.
- Men and boys
- People with disabilities
- Religious groups
- Children and youth
- Ethnic/racial minority
- Incarcerated people
- LGBTQ
- Military personnel and veterans
- People with HIV/AIDS
- Substance abusers
- Women and girls

Please choose your membership level:

- Signature (\$815) SignaturePLUS (\$1,900)

Send your check and application to: Exponent Philanthropy
 P.O. Box 65607
 Washington, DC 20035-5607

Phone: 202-580-6560 Email: info@exponentphilanthropy.org