



Kaiser Permanente
Northern California Region
South Bay Public Affairs

SPONSORSHIP GUIDE 2018

Table of Contents

Introduction	2
Funding priorities	2
Eligibility guidelines	3
Selection criteria	4
Sponsorship requirements	4
Sponsorship selection process & timeline	5
Sponsorship request submission process	5
Required documents	6
Uploading instructions	7
Application questions	8
Questions	12

Introduction

For over 70 years, Kaiser Permanente's social mission has been the foundation of its community service programs. As a values-driven, not-for-profit integrated health care organization, Kaiser Permanente is dedicated to improving the health of its members and the communities it serves. Through partnerships with community organizations and government entities, Kaiser Permanente strives to benefit the community by addressing issues and concerns that affect overall community health. These partnerships are built on the sharing of knowledge and resources between Kaiser Permanente and health-related community service organizations. Kaiser Permanente brings a variety of resources to these partnerships: cash grants to support community activities, volunteers, and in-kind donations.

Kaiser Permanente South Bay Public Affairs coordinates funding and resources which support community partners, organizations, and agencies across Santa Clara County.

Funding Priorities

Kaiser Permanente South Bay Public Affairs will consider sponsorship requests for local community activities and civic events within Santa Clara County, under two categories - **Public Affairs** or **Community Benefit**.

To request an in-kind donation, speaker, or use of the “Kaiser Permanente in the Community” logo which would benefit the community, please use this application.

Public Affairs sponsorship requests, which include Community and Government Relations and Marketing, must be in alignment with our Total Health approach. Total Health is clinical, behavioral, environmental, and community strategies for improved health, including equitable and affordable care. This includes, but is not limited to, a focus on:

- Healthy Schools
- Healthy Workforce
- Health Policy

Types of requests that will be accepted for consideration by Public Affairs include, but are not limited to:

- Special events
- Public policy briefings
- Health forums
- Health campaigns and initiatives

Please refer to the eligibility section for a list of activities that are not eligible for funding.

Community Benefit sponsorship requests must be in alignment with one of the identified Community Benefit priority areas, which include:

- **Healthy Eating/Active Living (HEAL):** Increase access to healthy foods, and knowledge and skills about healthy eating; and increase physical activity among children, youth and adults
- **Community and Family Safety:** Provide tools and support for children, youth, families, and communities to decrease aggressive behavior and violence and improve healthy relationships between individuals; and increase availability of education, job training programs for youth

- **Access to Care and Coverage:** Increase access to health care services for low-income and uninsured individuals; and support outreach and utilization of health care coverage programs
- **Mental and Behavioral Health:** Provide tools and support for children, youth, and families to improve self-care and positive coping skills, and reduce alcohol, tobacco and drug use

Types of requests that will be accepted for consideration for Community Benefit include, but are not limited, to:

- Health Conferences and Forums
- Data and Evaluation on Community Needs
- Health Campaigns and Initiatives

This guide is for sponsorship requests only. To request a grant from the Community Benefit program, please visit our website to view the grant funding priority areas and eligibility guidelines: <https://thrive.kaiserpermanente.org/care-near-you/northern-california/santaclar/about-us/in-our-community/grants/>

Eligibility Guidelines

Kaiser Permanente will consider requests for organizations that fall within Santa Clara County, with the exception of Palo Alto, which is in the Kaiser Permanente Redwood City service area.

In an effort to better coordinate and support our external investments, applicants are being asked to bundle all of their sponsorship funding requests into one application. As part of the application, applicants will also be asked to disclose any current funding, including sponsorships and grants received. Applications will be evaluated based on the total investment being requested by Kaiser Permanente.

Sponsorship awards typically range from \$500 - \$5,000.

If your funding request exceeds \$10,000, please contact Public Affairs at southbaysponsorships@kp.org. Please include "Sponsorship Request over \$10,000" in the subject line.

Kaiser Permanente charitable contributions are limited to organizations that are exempt from taxation under section 501(c)3 of the Internal Revenue Code; or are classified as a 509(a), government agency or a public entity.

Requests from the following types of organizations or activities and purposes that are not eligible include:

- Partisan political: Political candidates, activities, or organizations
- Fraternal athletic activities
- Field trips, tours or camps
- Endowments and memorials
- International or social organizations
- Fundraising events such as door prizes, raffles, telethons, walkathons, and auctions
- Capital funding for the purchase of equipment, construction, or renovation
- Requests that benefit an individual, family, or group
- Religious activities, in whole or in part, for the purpose of furthering religious doctrine
- Health care research
- Travel expenses

- School-affiliated orchestras, bands, choirs, drama groups, yearbooks, class parties, or class or team projects
- Personal appeals for funding of individual medical care, insurance coverage for individuals, scholarships, tuition, educational expenses, conference registration, etc.
- Job training programs
- Organizations that do not comply with Kaiser Permanente's anti-discriminatory policy
- National conferences
- Pageants
- Advertising activities

Selection Criteria

All requests are reviewed and approved by a charitable contributions committee that includes Kaiser Permanente leadership. Applications will be evaluated based on the total investment being requested by Kaiser Permanente. Successful events or projects will demonstrate:

- Tangible benefits associated with the partnership
- The opportunity to create long-term value
- The ability to reach targeted audiences and build relationships
- Positive exposure and significant visibility for the Kaiser Permanente brand
- The potential for the event/project request to be leveraged with additional resource investment
- The potential for long-term, sustainable relationships
- Event/project reach or impact
- Support of at least one of the identified Community Benefit priorities and/or one Total Health Goal

Sponsorship Requirements

- Funding must be used within a year of receipt of check
- Recipients must submit a receipt-of-payment acknowledgement letter within 10 days of receiving payment
- Recipients will be required to submit a summary of the event/project outcomes which may include: numbers and population served and the impact the event/project had on the participants. The submitted summary may be used in a variety of ways including as the basis for an article in the Kaiser Permanente South Bay Community Newsletter
- Recipients must provide immediate written notice to Public Affairs if significant changes or events occur during the term of the award that could potentially impact the progress or outcome of the funded event/project, including but not limited to:
 - changes in recipient's management personnel
 - loss of funding
 - revocation or suspension of the recipient's tax-exempt status (if applicable) or license
- Funds shall be expended for the purpose(s) stated in the sponsorship in accordance with the agreement. Modifications may be made only with prior written consent of Public Affairs
- Recipients shall keep accounting records of receipts and disbursements of funds
- Recipients must work with Kaiser Permanente Public Affairs staff for any planned media attention for the funded project

- Recipients will submit for approval to Public Affairs staff copies of all fliers, educational handouts, and materials that mention Kaiser Permanente's support prior to distribution

Sponsorship Selection Process and Timeline

Applicants who wish to apply for multiple events/projects for 2018 are asked to submit only **one application which provides all of the information necessary in each required field that pertains to each event/project.** Applicants must submit their application by the first deadline below that applies to the first event/project they are requesting support for.

Applications are accepted and reviewed according to the following cycles:

- **Cycle 1 (events/activities to be held January – June 2018)**
Applications Open – October 16, 2017
Application Deadline – November 17, 2017
Notification – January 12, 2018
- **Cycle 2 (events/activities to be held July – December 2018)**
Applications Open – March 12, 2018
Application Deadline – April 13, 2018
Notification – June 11, 2018

Applications will be forwarded for review if they meet funding criteria as outlined in this application. Applications are not considered complete until all attachments are submitted and validated.

Current recipients of Kaiser Permanente South Bay Public Affairs funding must be in good standing, having submitted all required reports, in order to be considered for a sponsorship.

Sponsorship Request Submission Process

Requests are received using our online application request tool. In addition to the online application, additional documents are required and must be submitted as part of the application process. The full list of required documents can be found starting on page 6. **Incomplete applications, including those that are missing required information and/or required attachments, will not be considered for review.**

Accessing the Online Application Request Tool

Sponsorship Application Website:

https://www.GrantRequest.com/SID_946?SA=SNA&FID=35177

Create a login to access the Online Application - one contact per organization, please. This can be the same login you have used previously if you already have an account.

If saving and returning to the Application at a later date, use the following URL to return to your Online Application: https://www.GrantRequest.com/SID_946

If you forget your account password

Follow the on-screen instructions from the Account login page to retrieve your password. If this method does not work, please send an email to:

KP-Community@kp.org with **IGAM Password Reset** in the subject line to reset your password.

Preparing and saving your application

You may save your work and return to the application at a later time. For your convenience, the application questions are included in this document for your reference. We encourage you to use the application questions provided in this document and prepare your application in Word for ease in completing the online application.

In order to access the application that you have started and saved, use the following URL: https://www.GrantRequest.com/SID_946

Prior to submitting your online application

You have the ability to review your application prior to submission. Please note that once an application has been submitted, it **cannot** be edited.

Required Documents

The following documents are required for submission and must be uploaded as part of the submission.

1. Request on Organization's letterhead

- The request on organization's letterhead should include the legal name of organization, organization's address, requested amount, project title and how the funds will be used. If a fiscal agent is being used, then the request and required information must also be submitted on the fiscal agency's letterhead.

2. Tax exempt status letter - the following documents must be submitted:

- For nonprofit organizations, one of the following documents must be submitted:
 - Copy of current IRS determination letter indicating appropriate tax-exempt status with Tax ID number; OR
 - Copy of IRS Form 1023 that documents recognition of tax exemption under 501(c)(3) and that the organization is classified as a public charity (not a private foundation), under section 509(a).
- For government/public entities, one of the following documents must be submitted:
 - Copy of the IRS affirmation letter with the Federal Identification Number; OR a
 - Notarized letter from the organization's Chief Financial Officer or Certified Public Accounting Firm indicating the government/public agency has been granted tax exemption; OR
 - Copy of the statute or enabling legislation establishing the entity
- If the applying organization has a fiscal agent both of the following documents must be submitted:
 - Copy of the memorandum of understanding between the fiscal agent and the requesting organization; AND

- Copy of the IRS tax exempt status determination letter for the fiscal agent or IRS Form 1023 for both fiscal agent and requesting entity (if these exist)
- 3. A list of the organization's directors, officers, or individuals on the governing body and their affiliations, if any, to KFHP/KFH or The Permanente Medical Group and its subsidiaries.
- 4. Non-discrimination statement/policy on Organization's letterhead.
- 5. List of key project staff and volunteers by name, title and qualification.
- 6. Financial documents that are required include:
 - An itemized budget for the organization or project and
 - List of all other revenue sources (if not indicated on itemized operating budget)
- 7. For requests \$25,000 and above:
 - Copy of the most recent IRS Form 990 (required with the exception of churches and government entities)
 - Copy of the most recent independent, audited financial statements. If an independent audited financial statement is not available, the following documents would be acceptable:
 - For organizations with an operating budget less than \$750,000
 - An independent Certified Public Accountant's review of the organizations' financial statement; OR
 - A copy of the organization's A-133 audit (required by the federal government of entities that expend \$500,000 or more in federal awards in a year)
 - For government or public entities the following documents would be acceptable:
 - Copy of the A-133 audit; OR
 - The agency or department's current year budget, including all sources of revenue, copies of their financial control policies and procedures, and organizational chart.
- 8. If you are applying for an event sponsorship, attach a detailed listing of event sponsorship levels and their associated benefits.

Required Documents files must be labeled as follows:

"Organization Name_Document Title"

Example: **Valley Clinic_Board of Directors**

Uploading Instructions

Please note that these instructions are specific to Internet Explorer. Depending on the browser you are using, you may see slight differences in upload tools.

- Select from the pull down list the type of document that you are ready to attach
- Click 'Browse' button and select your file
- The file you selected will then be displayed

- Click the 'Upload' button and your file will be attached
- The maximum size for all attachments combined is 25 MB
- Files that contain extensions such as ".exe", ".com", ".vbs", or ".bat" cannot be uploaded

Application Questions

The list of questions below is to serve as a guide in preparing your information for the online application (see page 5 for online application access instructions). Do not submit the form below as part of your application.

The online application will include the following questions:

1. Organization name
2. Street address
3. City
4. State
5. Postal code, 9-digit postal code if known (xxxxx-xxxx)
6. Phone (xxx) xxx-xxxx
7. Fax (xxx) xxx-xxxx
8. Organization's e-mail address
9. Organization's website address
10. Organization's Chief Executive first and last name and title
11. Organization's Chief Executive phone number and extension
12. Organization's Chief Executive e-mail address
13. Organization's Chief Executive mailing address (if different from organization address)
14. Event or Project Contact person's first and last name and title
15. Event or Project Contact person's phone number and extension
16. Event or Project Contact person's fax number
17. Event or Project Contact person's e-mail
18. Organization's legal name
 - a. The name that appears on your IRS determination letter or other legal documentation, or Form 990

19. Organization's Tax ID# (EIN or TIN) xx-xxxxxxx

20. Tax status: check off appropriate status

21. Do any Kaiser Permanente executives, managers, directors, physicians or other employees or their family members serve as a board member, director, officer, manager, employee or fiduciary agent of your organization; or have a compensation arrangement or financial interest with your organization? Yes or No

If yes, please provide the person(s) name and describe the nature of the relationship.

22. Non Discrimination Policy: By selecting YES below, the organization attests that it does NOT discriminate on the basis of race, color, national origin, sex/gender, sexual orientation, age, physical or mental disability, in their programs, services, policies, hiring practices and administration.

23. Non-Proselytizing (for religious or faith-based organizations): Will any portion of your contribution request be used to further religious doctrine or for programs for the congregation, members or students or in the support of general operations? Yes or No

24. Fiscal Agent – Complete this section ONLY if your organization will be using a fiscal agent.

- a. Fiscal agent's legal organization name (as it appears on the IRS determination letter or Form 990)
- b. Fiscal agent's Tax ID# (EIN or TIN)
- c. Fiscal agent's mailing address: street address, city, state, and postal code (9-digit code if known).
- d. Fiscal agent's contact: prefix, first name, last name
- e. Fiscal agent contact title
- f. Fiscal agent's contact phone number, (xxx) xxx-xxxx
- g. Fiscal agent's contact e-mail address

25. Organization's history (150 words maximum)

26. Organization's year founded

27. Organization's mission statement (100 words maximum)

28. Current programs and activities

Describe the organization's current programs and activities and the population served (100 words maximum)

29. Annual total organization budget

30. Discrimination policy

Answer Yes or No: Does your organization discriminate on the basis of race, color, religious creed, national origin, age, sex, marital status, sexual orientation, gender identity,

handicap, disability, medical condition, or veteran status either in their employment or their service policies and practices.

31. Event/project information

- a. Event/project title *(Input titles for all events/projects you are applying for)*
- b. Event/project type: Select from Health Fair, Community Event, Conference, Other *(If you are applying for multiple events, please select "Other" and input the types in the field)*
- c. Event/project summary *(Please describe all of the events or projects you are seeking sponsorship for)*
- d. Event/project dates and times *(Please list all event/project dates along with specific start/end times)*
- e. Event/project location and address *(Please list each location where each event is taking place)*

32. Event agenda/program

If you are applying for an event, please provide an overview of each event schedule, including details such as program start time, meal start, networking or reception times, and any other details available regarding the event agenda. You may also include this information as an attachment on the "Attachments" page. If you are not applying for an event, but are applying for a project, please provide details on your project.

33. Partners

Describe community partners involved in the coordination and/or provision of each event/project (please list and describe briefly).

34. Total Event/project budget

Please list separately the total cost of each event/project you are seeking sponsorship for

35. Amount requested

Please list separately the amount of funding you are requesting for each event/project. If you are applying for an event, on the "Attachments" page, please upload a detailed listing of all financial sponsorship levels and their associated benefits.

36. How will dollars be spent?

Please indicate the total amount of funding requested for each event/project and then detail how sponsorship dollars will be spent for each event/project – i.e. forum cost is \$2,000: \$1,000 for media and promotion and \$1,000 for production of forum materials.

37. In-kind support requested

Kaiser Permanente provides the following types of in-kind support: 1) Promotional Items; 2) Use of the "Kaiser Permanente in the Community" logo if the event/project meets the eligibility criteria; 3) Speakers for the event/project.

If you are looking for in-kind support, please describe the types of support you are requesting for each event or project you are applying for and be as detailed as possible (i.e. number of items needed, where logo would be used, what type of speaker you would like and for what topic.)

38. Event/project goals and objectives

Please list the goals and objectives of each project/event you are applying for.

39. Success measurement

For each event/project, please describe how the success of the event/project will be measured. Please include intended results or outcomes for each objective mentioned under the “Event/Project Goals and Objectives” section.

40. Number of people expected to reach or serve

Please list separately for each project/event

41. Tangible benefit

Fair market value of tangible benefit items, if applicable. For example, provide the fair market value of each meal, conference ticket, and/or booth. Enter the dollar amount and the value of the description. Enter “not applicable” if no goods or services will be provided to our organization as part of the sponsorship.

42. Commitment date

Please list each date by which your organization must be notified of sponsorship decisions for each event/project you are applying for.

43. Kaiser Permanente involvement

List Kaiser Permanente physicians and/or employees affiliated with your organization, the event/project, and if applicable, your fiscal agent. Include name and title at Kaiser Permanente, role in your organization and/or event/project; and when (current or past). For example: Johanna Smith, Director of Technology; Role: Volunteer Coordinator; Current.

44. Other Kaiser Permanente funding

If you are a current grantee or you have already received a sponsorship from Kaiser Permanente for an activity, please explain how this investment aligns and/or enhances existing investments. Please include a list of both local and regional funding.

45. Visibility

Briefly describe any plans to communicate each event or project to an external audience and/or how you will acknowledge Kaiser Permanente for its support for each separate event or project (i.e. newsletters, media coverage, presentations).

46. Conflict of Interest

List any conflict or potential conflict of interest with your organization or any persons affiliated with Kaiser Permanente.

47. Target Audience

Briefly describe the target audience for each project/event you are applying for.

48. Population Served – Note: these will be from a drop down menu / list of options

49. Areas Served

Please indicate what neighborhoods or geographic communities are being reached by your event(s) or project(s).

50. Age Group Population Served – Note: these will be from a drop down menu / list of options

51. Gender of the Population Served – Note: these will be from a drop down menu / list of options

52. Ethnicity of Population Served – Note: these will be from a drop down menu / list of options

53. Community Building – Note: these will be from a drop down menu / list of options

Questions

Please submit all questions related to the 2018 Sponsorship process to southbaysponsorships@kp.org.

Questions, requests, and application materials submitted to individual staff **will not** be reviewed or considered.

**Thank you for your interest in the
Kaiser Permanente South Bay Sponsorship process!**