



**City of Oklahoma City  
Heart of the City Campaign**

**Application for Participation  
2025**

**Background Information**

The Heart of the City is the charitable contribution campaign for the more than 4,500 City of Oklahoma City (City) employees. It is the City's only authorized workplace solicitation on behalf of local charitable organizations. Currently, four charity federations participate in the campaign. A Charitable Contributions Committee (CCC) governs the campaign and a Principal Combined Fund Raising Organization (PCFRO) contractually manages it.

**Campaign Period**

The annual campaign runs within the period September 1 through November 30.

**Eligibility Requirements**

To participate in the Heart of the City campaign:

**Federations** must be comprised of a legally constituted grouping of at least five health and social service or fine arts agencies that are bound together to raise and distribute charitable contributions.

**Charitable agencies** must be a member of a federation and should submit their completed applications to their federation.

All agencies within a federation must have an office and provide direct services in Oklahoma City, be recognized by the Internal Revenue Service as tax-exempt, be incorporated or authorized to do business in the state of Oklahoma as a private, nonprofit organization, and complete this application form.

**Application Process**

Federations may apply to participate in the Heart of the City campaign. Federations must submit one application certifying each member agency including a listing of each of their agencies with a 25-word description and a physical address within the Oklahoma City limits. Federations must maintain a file of member agency applications for at least three years.

**Applications are due by May 16, 2025, by 5:00 pm.**

They may be hand-delivered or mailed to:

Heart of the City Campaign  
Attention: Alan Foss  
United Way of Central Oklahoma  
1444 NW 28<sup>th</sup> Street  
Oklahoma City, OK 73106



**City of Oklahoma City  
Heart of the City Campaign**

**Organizational Contact Information**

Federation \_\_\_\_\_

Organization \_\_\_\_\_

4 Digit HOTCC Number (if a participant in last year’s HOTCC) \_ \_ \_ \_

Mailing Address \_\_\_\_\_

\_\_\_\_\_

Local Telephone \_\_\_\_\_

Contact Person \_\_\_\_\_

E-mail Address \_\_\_\_\_

**Certifying Official**

I, \_\_\_\_\_ am the duly appointed representative of \_\_\_\_\_

\_\_\_\_\_ authorized to certify and affirm all statements enclosed in this

application.

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Typed or Printed Name)

\_\_\_\_\_  
(Title)

Date Completed \_\_\_\_\_

**Part I Local Eligibility Requirements**

1. I certify that the organization named in this application is recognized by the Internal Revenue Service as tax-exempt under 26 USC 501 (c)(3) and to which contributions are tax deductible pursuant to 25 USC 170.

(Include a copy of the IRS determination letter as **Attachment A.**)

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Certifying Official's Signature

2. I certify that the organization is incorporated or authorized to do business in the state of Oklahoma as a private, nonprofit organization.

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Certifying Official's Signature

3. I certify that the organization has a current certificate of registration of a charitable organization from the Oklahoma Secretary of State's Office.

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Certifying Official's Signature

4. I certify that this organization
  - actually provides services to citizens within Oklahoma City and within the greater metropolitan area;
  - has a local presence as indicated by having local community representation on policy issues related to the allocation of locally collected funds;
  - a local physical office;
  - local staffing; and
  - local telephone servicewithin the greater metropolitan area as more fully explained in the Municipal Employees' Charitable Contribution Policy.

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Certifying Official's Signature

**Part II Public Accountability Standards**

1. I certify that the organization named in this application was audited in accordance with generally accepted accounting principles by an independent certified public accountant in the immediate preceding year<sup>1</sup>. *[Note: If the annual budget of a voluntary charitable agency is less than fifty thousand dollars, no annual audit shall be required.]*

<sup>1</sup> For the 2025 application, provide a copy of the audit performed during calendar year 2024 of financials for the 2023 calendar year-end or 2024 fiscal year-end.

(Include a copy of the organization's audit as **Attachment B.**)

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Certifying Official's Signature

2. I certify that the organization named in this application is directed by an active and responsible governing body whose members serve without compensation.

(Include a list containing names of the organization's governing body as **Attachment C.**)

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Certifying Official's Signature

3. I Certify **one** of the following:

- a.) I certify that the organization named in this application is a human health and/or social service agency which provides services, benefits or assistance to, or conducts activities affecting human health and/or social welfare within the greater Oklahoma City metropolitan area.

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Certifying Official's Signature

**OR**

- b.) I certify that the organization in this application is a community based fine arts group, which provides services, benefits or assistance to or conducts activities attracting the fine arts within the greater Oklahoma City metropolitan area.

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Certifying Official's Signature

**Part III Municipal Employees Charitable Contribution Policy**

- 1. I certify that the organization in this application will comply with the Municipal Employee Charitable Contribution Policy. The organization in this application will not, on its own, solicit employees at their workplace beyond the Municipal Employee Charitable Contribution Campaign.

\_\_\_\_\_  
Certifying Official's Signature

**Part IV 25-Word Description, & Physical Address, and Charity Guide Name**

This information will describe your organization in the 2025 Charity Guide. **Descriptions may not exceed 25 words.** Do not use an attachment for this item; please use the boxes provided below. Please use descriptive language so that donors will have a clear understanding of your mission, programs and services. You do not need to include your organization's name as part of the 25-word description. Your organization's name will be listed with your description.


Please provide how you would prefer your organization's name to be listed in the Charity Guide:

\_\_\_\_\_

Please provide your agency's physical office address within the Oklahoma City limits:

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

