

**Application by a Tohono O’odham Charitable Organization  
for a Charitable Contribution from  
the Tohono O’odham Gaming Enterprise**

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**Instructions for Submission:** Please complete for your organization, have an authorized representative of your organization sign the application, and submit it to: Ms. Deena Mattias, Tohono O’odham Gaming Enterprise, Post Office Box 22230, Tucson, Arizona 85734-2230 [dmattias@ddcaz.com](mailto:dmattias@ddcaz.com).

*Federal law does not permit the Gaming Enterprise to distribute funds to individuals, families, or groups of individuals, so the Gaming Enterprise can only consider requests for charitable contributions from charitable organizations. The Gaming Enterprise also has a limited budget for charitable contributions, so not all requests from Tohono O’odham charitable organizations can be funded. The Gaming Enterprise is collecting this information to confirm that your organization is a charitable organization and the responses to individual questions typically will not disqualify an organization from consideration.*

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**Part I. Identification of Applicant.**

a. Full Name and Mailing Address of Organization:

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b. Primary Contact Person:

Name:

Telephone:

E-mail:

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c. Date Organization Created:

Federal Employer Identification Number (if your organization has one):

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d. Has your organization been recognized by the Internal Revenue Service as an exempt organization under 26 U.S.C. § 501(c)(3)? YES  NO  *If “Yes”, attach a copy of your determination letter and please skip Parts II, III(c), (d) & (e), IV, and V.*

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**Part II. Organizational Structure.**

a. Is your organization a Corporation? YES  NO  If “Yes”, please attach a copy of the articles of incorporation and any amendments, along with certification of filing with the appropriate governmental agency, and a copy of your bylaws.

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b. Is your organization a Limited Liability Company (LLC)? YES  NO  If “Yes”, attach a copy of the articles of organization and any amendments, along with certification of filing with the appropriate governmental agency. Also, if the LLC has an operating agreement, please attach a copy.

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c. If your organization is not a Corporation or LLC, please describe the nature of your organization and attach a copy of any organizational documents and any related governance documents.

**Part III. Nature of Your Organization's Charitable Activities and Your Donation Request.**

- a. Please describe your organization's activities, including your organization's past, present, and planned activities. You may attach copies of newsletters, brochures, or similar documents that describe your organization's activities.
- b. Please state the amount of the contribution your organization is seeking from the Gaming Enterprise and the purpose(s) for which the contribution will be used. Please use an attachment if additional space is needed.
- c. Please explain how the persons or organizations that receive goods, services, or funds from your organization are selected to receive benefits.
- d. Do any of your organization's programs limit the provision of goods, services, or funds to a specific individual or group of individuals or to a specific organization? YES  NO  If "Yes", please explain the limitation(s). If your organization provides goods, services, or funds only for members of your organization, please explain how your organization selects its members.
- e. Do any recipients of goods, services, or funds from your organization's programs have a family or business relationship with any of your organization's Principals or with any of the vendors or consultants listed in Part V(g)? YES  NO  If "Yes", explain how these recipients are determined to be eligible for goods, services, or funds.

**Part IV. Financial Data.** Please provide (a) a Statement of Income and Expenses for the current year and each of the past 2 years and (b) a Balance Sheet as of the end of your most recent organizational year. You may, but are not required to, use the attached forms.

**PART V. Compensation and Other Financial Arrangements with Management and Vendors.**

a. Does your organization use its assets exclusively for charitable purposes? YES  NO  If “No”, explain the other uses your organization makes of its assets.

b. Has your organization entered into agreements to pay any individuals or organizations who raise funds for your organization a percentage of the funds raised? YES  NO  If “Yes” and if the percentage exceeds 10% of the funds raised, state who the agreements are with, describe the agreements and the compensation to be provided under the agreements, and attach a copy of any written agreements.

c. Does your organization compensate any employees, directors, officers, trustees, or other persons involved with the management or oversight of the organization (“Principals”) for their time or services? YES  NO  If “No”, please do not complete the following table and skip the next question (Part V(d)). If “Yes”, please provide the following information for the five most highly compensated Principals of your organization:

Name	Title	Mailing Address	Compensation

d. Are any of your organization’s Principals related to each other through family or business relationships? YES  NO  If “Yes”, identify the individuals and explain the relationship below or in an attachment.

e. Does or will your organization purchase any goods, services, or assets from any of your organization’s Principals? YES  NO  If “Yes”, describe any such purchase that you made or intend to make, from whom you make or will make such purchases, and how the organization will assure that the purchase prices do not exceed fair market value. Attach copies of any written contracts or other agreements relating to such purchases.

f. Does or will your organization have any leases, contracts, loans or other agreements with any of your organization’s Principals? YES  NO  If “Yes”, please describe such arrangements below or in an attachment and attach copies of any leases, contracts, loans, or other agreements.

g. Vendors & Consultants. Please identify the five vendors and consultants who receive the most compensation from your organization.

Name	Mailing Address	Compensation

h. Do any of your organization’s Principals have a relationship with any of the vendors or consultants listed in (g) (such as through family, by having an ownership interest in the vendor or consultant, by working for or providing services to the vendor or consultant)? YES  NO  If “Yes”, identify the individuals and explain the relationship below or in an attachment.

**PART VI. Additional Information:** You may use the following space to provide additional information requested by a previous question or to provide information you believe the Gaming Enterprise should consider when evaluating your request.

I declare under the penalties of perjury that I am authorized to sign this application on behalf of the applicant organization and that I have examined this application, including any accompanying attachments, and to the best of my knowledge they are true, correct, and complete.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Name of Person Signing: \_\_\_\_\_

Title of Person Signing: \_\_\_\_\_