

1. Profile Type

Instructions:

Applicant Profile Type: (required) select one type of applicant based on the application to be completed and submitted to HUD. For organizations that operate as both a CoC applicant and a project applicant, a separate profile must be completed for each role.

- Collaborative applicant - the applicant designated by the CoC lead agency that will submit the CoC application (formerly known as Exhibit 1) on behalf of the CoC.

- Project applicant - an organization submitting one or more project applications (formerly known as Exhibit 2) to request homeless assistance funding under the CoC Program.

Applicant Profile Type: Collaborative Applicant

2. Organization Information

Instructions:

Applicant Information: Enter the following related to the applicant organization/lead agency.

Legal Name: (required) enter the legal name of applicant that will submit the CoC application or project application, as appropriate.

Organizational Unit: (optional) enter the name of the primary organizational unit, department, or division for the applicant's legal entity, as applicable.

Organization Type: (required) select the appropriate organization type that identifies the applicant. Nonprofit organization (both public and private) are required to submit to HUD one of the following sources documenting the nonprofit status: (1) IRS letter or ruling showing 501(c)(3) status; (2) Documentation showing certified United Way agency status; (3) Certification from licensed CPA (see NOFA for conditions); or (4) Letter from authorized state official showing applicant as organized and in good standing as a public nonprofit organization.

Employer/Taxpayer Number (EIN/TIN): (required) enter the employer or taxpayer identification number (EIN or TIN) as assigned by the Internal Revenue Service. If the legal applicant organization is not in the US or is not legally organized, enter 44-4444444.

Organizational DUNS: (required) enter the applicant's DUNS or DUNS+4 number received from Dun and Bradstreet. Information on obtaining a DUNS number may be obtained at <http://www.dnb.com>. If the legal applicant organization is not in the US or is not legally organized, enter 444444444.

- Collaborative applicant or project applicant - the DUNS number for the applicant organization is required, in order to complete the Profile and apply for funding. HUD does not award funding to applicants unless a DUNS number has been assigned.

Address: (required) enter the collaborative or project applicant's physical street address 1, street address 2, city, state, and zip code; (optional) also enter the county, province, and country, as applicable. Enter the mailing address, if different from the physical address entered.

Legal Name of Organization: Community Planning and Advocacy Council (CPAC)

Organizational Unit

Department Name:

Division Name:

Organization Type: M. Nonprofit with 501(c)(3) IRS Status (Other than Institution of Higher Education)

If Other, please specify:

Employer or Tax Identification Number: 21-0725790

	Organization DUNS Number:	055119713	DUNS Extension:
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Address

Street 1: Kevon Office Center 1

Street 2: 2500 McClellan Avenue, Suite 110

City: Pennsauken

State: New Jersey

Zip/Postal Code: 08109

County: Camden

Country: United States

Is the organization's mailing address the same as the address above? Yes

If no, click 'Save' and enter the mailing address in the fields presented below.

Primary Contact Information

Instructions:

Primary Contact: (required) enter the prefix, first name, last name, title, telephone number, and email address of the collaborative applicant's primary contact person (authorized to act on behalf of and legally obligate the applicant organization); (required) enter the primary contact's organizational affiliation, if affiliated with an organization other than the applicant organization; and (optional) enter the middle name, suffix, alternate number, extension, and fax number of the primary contact.

Prefix: Ms.

First Name: Karen

Middle Name:

Last Name: Talarico

Suffix:

Title: Chair, Camden County Homeless Network
Planning Committee

Organizational Affiliation: Community Planning and Advocacy Council
(CPAC)

Phone Number: (856) 964-6771
Format: 123-456-7890

Extension:

Alternate Phone Number:
Format: 123-456-7890

Extension:

Fax Number: (856) 964-6722
Format: 123-456-7890

E-mail Address: karen@cathedralkitchen.org

Confirm E-mail Address: karen@cathedralkitchen.org

Alternate Contact Information

Instructions:

Alternate Contact: (required) enter the prefix, first name, last name, title, telephone number, and email address of the applicant's alternate contact person; (required) enter the alternate contact's organizational affiliation, if affiliated with an organization other than the applicant organization; and (optional) enter the middle name, suffix, alternate number, telephone number extension, and fax number of the alternate contact.

Prefix: Ms.

First Name: Hillary

Middle Name:

Last Name: Dugger Colbert

Suffix:

Title: Director of Planning

Organizational Affiliation: Community Planning and Advocacy Council (CPAC)

Phone Number: (856) 663-3998

Format: 123-456-7890

Extension: 222

Alternate Phone Number:

Format: 123-456-7890

Extension:

Fax Number: (856) 663-7182

Format: 123-456-7890

E-mail Address: hcolbert@cpachvi.org

Confirm E-mail Address: hcolbert@cpachvi.org

HMIS Contact Information

Instructions:

Is the applicant also the HMIS Lead? (required) select 'Yes' or 'No' to indicate whether or not the applicant organization also serves as the lead of the HMIS (or HMIS equivalent database). The HMIS Lead is responsible for implementing the community's HMIS.

HMIS Lead: (required) the applicant's legal name is pre-populated, and, if necessary, must be updated to reflect the correct, legal name of the HMIS lead agency/organization.

HMIS Lead contact person: (required) enter the HMIS contact person's prefix, first name, last name, title, organizational affiliation, telephone number, telephone extension, and email address; and (optional) middle name, suffix, alternate telephone number, alternate telephone extension, and fax number of HMIS contact person.

HMIS Lead address: (required) enter the physical street address 1, street address 2, city, state, and zip code; and (optional) enter the county/province, as applicable.

Is the CoC lead agency also serving as the lead of the HMIS (or HMIS equivalent database)? No

HMIS Lead: NJHMFA

Prefix: Mr.

First Name: Abram

Middle Name:

Last Name: Hillson

Suffix:

Title: Assistant Director, HMIS

Organizational Affiliation: NJHMFA

Phone Number: (609) 278-7567

Format: 123-456-7890

Extension:

Alternate Phone Number:

Format: 123-456-7890

Extension:

Fax Number: (609) 278-1754

Format: 123-456-7890

E-mail Address: AHillson@njhmfa.state.nj.us

Confirm E-mail Address: AHillson@njhmfa.state.nj.us

Street 1: 637 South Clinton Ave

Street 2: P.O. Box 18550
City: Trenton
County: Mercer
State: New Jersey
Zip Code: 08650

Homeless Referral Contact Information

Instructions:

Homeless referral contact person: (required) each community must have at least one person for stakeholders and potential program participants to contact with questions about community housing and services for the homeless. Enter the prefix, first name, last name, title, organizational affiliation, telephone number, telephone extension, and email address; and (optional) middle name, suffix, alternate telephone number, alternate telephone extension, and fax number for the contact person.

Prefix: Ms.

First Name: Paula

Middle Name:

Last Name: Long

Suffix:

Title: Director, Homeless Hotline

Organizational Affiliation: Community Planning and Advocacy Council (CPAC)

Phone Number: (856) 663-2888

Format: 123-456-7890

Extension:

Alternate Phone Number: (800) 331-7272

Format: 123-456-7890

Extension:

Fax Number: (856) 663-4879

Format: 123-456-7890

E-mail Address: plong@uoss.org

Confirm E-mail Address: plong@uoss.org

4. Additional Information

Instructions:

1. Collaborative applicant's or project applicant's congressional district(s): indicate the congressional district(s) in which the applicant organization operates:

- Collaborative applicants - (optional) identifying the congressional districts is optional; however, HUD encourages collaborative applicants to identify the congressional districts located within the CoC geography.

- Project applicants - (required) identify all congressional districts in which the applicant houses or serves homeless persons funded with McKinney-Vento dollars. The district(s) selected will populate all project applications, and will be used to send funding notification to the appropriate Congressional representatives.

2. Is the applicant a faith-based organization?: (required) select the appropriate answer that identifies the applicant organization.

3. Has the applicant ever received a federal grant?: (required) select the appropriate answers that applies to the applicant organization.

4. Is the applicant's code of conduct already on file with HUD?: (required for nonprofit applicants) select the appropriate source to document the applicant's nonprofit status. This document must be attached in e-snaps. This question does not apply to applicants who are not nonprofit organizations.

1. Indicate applicant's congressional district(s): NJ-001, NJ-002

(for multiple selections hold CTRL and key)

2. Is the applicant a faith-based organization? No

3. Has the applicant ever received a federal grant? Yes

4. Is the applicant's code of conduct already on file with HUD? Yes

Applicant Code of Conduct

Document Type	Required?	Document Description	Date Attached
Applicant Code of Conduct	No		

Applicant's Code of Conduct Attachment Detail

Document Description:

Nonprofit Documentation Attachment

Document Type	Required?	Document Description	File Name	Date Attached
Nonprofit Document	Yes	Nonprofit Document	CPAC_IRS_letter.pdf	02/01/2013

Attachment Details

Document Description: Nonprofit Document

Other Attachment

Document Type	Required?	Document Description	Date Attached
Other Attachment	No	CPAC 501c3 docume...	09/09/2011

Attachment Details

Document Description: CPAC 501c3 documentation

6. Submission Summary

Page	Last Updated
1. Profile Type	08/30/2012
2. Organization Information	08/30/2012
Primary Contact	08/30/2012
Alternate Contact	08/30/2012
HMIS Contact	02/01/2013
Homeless Referral	08/30/2012
4. Additional Information	02/01/2013
Code of Conduct	No Input Required
Nonprofit Document	02/01/2013
Other Attachment	08/30/2012

Internal Revenue Service

Date: September 30, 2003

C P A C
Comm Planning & Advocacy Council
6981 N Park Dr East Bldg 309
Pennsauken, NJ 08109

Department of the Treasury
P. O. Box 2508
Cincinnati, OH 45201

Person to Contact:
Pat Mahan 31-04019
Customer Service Representative
Toll Free Telephone Number:
8:00 a.m. to 6:30 p.m. EST
877-829-5500
Fax Number:
513-263-3756
Federal Identification Number:
21-0725790

Dear Sir or Madam:

This is in response to your request of September 30, 2003, regarding your organization's tax-exempt status.

In March 1982 we issued a determination letter that recognized your organization as exempt from federal income tax. Our records indicate that your organization is currently exempt under section 501(c)(3) of the Internal Revenue Code.

Based on information subsequently submitted, we classified your organization as one that is not a private foundation within the meaning of section 509(a) of the Code because it is an organization described in Section 509(a)(2).

This classification was based on the assumption that your organization's operations would continue as stated in the application. If your organization's sources of support, or its character, method of operations, or purposes have changed, please let us know so we can consider the effect of the change on the exempt status and foundation status of your organization.

Your organization is required to file Form 990, Return of Organization Exempt from Income Tax, only if its gross receipts each year are normally more than \$25,000. If a return is required, it must be filed by the 15th day of the fifth month after the end of the organization's annual accounting period. The law imposes a penalty of \$20 a day, up to a maximum of \$10,000, when a return is filed late, unless there is reasonable cause for the delay.

All exempt organizations (unless specifically excluded) are liable for taxes under the Federal Insurance Contributions Act (social security taxes) on remuneration of \$100 or more paid to each employee during a calendar year. Your organization is not liable for the tax imposed under the Federal Unemployment Tax Act (FUTA).

Organizations that are not private foundations are not subject to the excise taxes under Chapter 42 of the Code. However, these organizations are not automatically exempt from other federal excise taxes.

Donors may deduct contributions to your organization as provided in section 170 of the Code. Bequests, legacies, devises, transfers, or gifts to your organization or for its use are deductible for federal estate and gift tax purposes if they meet the applicable provisions of sections 2055, 2106, and 2522 of the Code.

C P A C
Comm Planning & Advocacy Council C P A C
21-0725790

Your organization is not required to file federal income tax returns unless it is subject to the tax on unrelated business income under section 511 of the Code. If your organization is subject to this tax, it must file an income tax return on the Form 990-T, Exempt Organization Business Income Tax Return. In this letter, we are not determining whether any of your organization's present or proposed activities are unrelated trade or business as defined in section 513 of the Code.

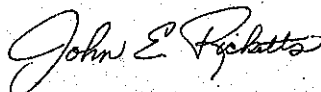
Section 6104 of the Internal Revenue Code requires you to make your organization's annual return available for public inspection without charge for three years after the due date of the return. The law also requires organizations that received recognition of exemption on July 15, 1987, or later, to make available for public inspection a copy of the exemption application, any supporting documents and the exemption letter to any individual who requests such documents in person or in writing. Organizations that received recognition of exemption before July 15, 1987, and had a copy of their exemption application on July 15, 1987, are also required to make available for public inspection a copy of the exemption application, any supporting documents and the exemption letter to any individual who requests such documents in person or in writing. For additional information on disclosure requirements, please refer to Internal Revenue Bulletin 1999 - 17.

Because this letter could help resolve any questions about your organization's exempt status and foundation status, you should keep it with the organization's permanent records.

If you have any questions, please call us at the telephone number shown in the heading of this letter.

This letter affirms your organization's exempt status.

Sincerely,



John E. Ricketts, Director, TE/GE
Customer Account Services

Internal Revenue Service

Date: September 30, 2003

C P A C
Comm Planning & Advocacy Council
6981 N Park Dr East Bldg 309
Pennsauken, NJ 08109

Department of the Treasury
P. O. Box 2508
Cincinnati, OH 45201

Person to Contact:
Pat Mahan 31-04019
Customer Service Representative
Toll Free Telephone Number:
8:00 a.m. to 6:30 p.m. EST
877-829-5500
Fax Number:
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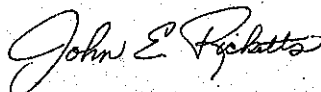
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