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We contribute to the best interests of patients, the medical and research profession, our employees and communities.



# How to apply for Philanthropic Charitable Support Tip Sheet

## *i* Philanthropic Charitable Support

Philanthropic Charitable Support is focused on humanitarian, social, scientific & educational programs. These requests are not healthcare-related

Genentech provides Philanthropic Charitable Support in locations where we have a site. Funding priorities include:

- *K-12 Education*
- *Humanitarian and Social Services (e.g. hunger, homelessness)*
- *Community Programs (e.g. afterschool programs)*

## ✓ Checklist

You need to submit the funding request at least 60 days prior to the start of the activity. Requests submitted with less lead time will be not accepted by the system or denied. Prior to submitting the funding request, make sure that you have prepared the following information:

W-9 form

*New applicants: Visit the IRS website for a blank W-9 if you don't have a current, signed W-9*

*Returning applicants: The W-9 must be signed and dated within the last 3 years*

Tax ID #

Tax status

Organization's annual budget

Address

*This is the location to which an approved payment will be sent*

Number of employees in the organization

Itemized budget for the program for which funding is requested



# How to apply for Philanthropic Charitable Support

## Tip Sheet

### I Login

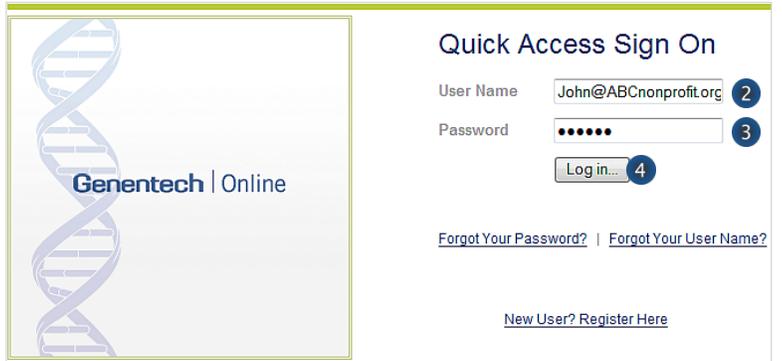
#### > Go to [funding.gene.com](http://funding.gene.com)

1. Click the “Apply for Funding / Login” link

#### > Enter your Account information

2. User name  
*This is the email address used when you registered as a user*
3. Password  
*This is the password you created when you registered as a user*
4. Click “Log in...”

5. Click on the “Create a New Funding Request” link



### II Organization Registration

#### > Complete the Tax information

*The following information will be pre-populated if you have previously used the Genentech Funding Request System*

1. Select where the organization is located
2. If the organization is located in the United States, enter Tax ID  
*Format: 12-1234567. Must match Tax-ID on W-9*
- 2a. If the organization is not located in the United States, enter the unique non-US Tax-ID
- 2b. If the organization is not located in the United States, confirm if you have W-8BEN status
3. Provide the organization’s tax status  
*If the organization is located in the United States, tax status must match tax status on W-9*
4. Click “Continue”



>>> Or >>>





# How to apply for Philanthropic Charitable Support

## Tip Sheet

### II Organization Registration (continued)

#### Complete the Organization Detail section

You will not be able to make any Organization Detail information changes if your Organization has been previously registered. Please contact our customer support at 877.313.5778 to make updates.

1. Enter the Organization name
2. Select the Organization type  
Please select carefully. Once saved, only a system administrator can edit your selection.  
Select "Other" only if no listed option applies.  
For organization type "Charitable Foundation", answer the following additional questions:
- 2a. Is it a Charitable Foundation of a group practice? If yes, please answer question 2b
- 2b. How many physicians are in the group practice that sponsors this foundation?
3. Enter the organization's annual budget  
Annual budget includes all programs and events, in addition to the operating budget
4. Enter the Organization's website address
5. Enter the Organization's mission
6. Enter the Number of employees
7. Confirm if organization purchases Genentech / Roche products
8. Confirm if organization prescribes Genentech / Roche products
9. Confirm if organization develops Medicare recognized compendia or nationally recognized treatment guidelines
10. Is your organization a Sole Proprietorship?  
This question is applicable if your organization is For-Profit and US based
11. Confirm if organization is owned wholly or in part by a physician or a group of physicians  
The answer defaults to "No" if the tax status is 501 (c) (3) or 501 (c)(6), or if Governmental Organization
12. Enter the Parent organization name and Parent organization tax ID, if applicable (optional)
13. Click "Save and Continue"

#### >>> If Organization Type is "Charitable Foundation" >>>

#### Upload the W-9 (or W-8BEN) form

W-9 or W-8BEN form must be signed and dated within the last 3 years

1. Click on "Choose File" to select and upload the W-9 or W-8BEN form  
To replace the uploaded copy, click on "Choose File" and select the new copy
2. Click "Save and Continue"



# How to apply for Philanthropic Charitable Support

## Tip Sheet

### II Organization Registration (continued)

#### Provide the Location information

*This is the location to which an approved payment will be sent*

1. If the location was previously registered, select the location  
*Make sure the record displays the most current information. If not, please edit*
2. If the location is not pre-populated, select “New Location”
3. Enter the Payee name  
*Must be the organization’s name and not a person’s name*
4. Enter the Address
5. Enter the City
6. Select the State
7. Enter the Province / region / territory
8. Enter the Zip code
9. Select the Country
10. Click “Save and Continue”

### III Funding Type Selection

#### Complete the Funding Type selection

1. Indicate what you are seeking funding for  
*Option 4 will apply to most philanthropic charitable programs: “A fundraiser, health screening, K-12 education program, community event, or other charitable cause”*
2. Indicate if the nature of your support is healthcare-related  
*If yes, please refer to the Healthcare-Related Charitable Support Tip Sheet*
3. Validate your selection  
*Your selection can not be changed once you proceed from this point*
4. Click “Continue”



# How to apply for Philanthropic Charitable Support

## Tip Sheet

### IV Application

#### Complete the Application information

*A unique Request ID is automatically assigned to the funding request. Please reference the Request ID in all communications related to this request*

1. Enter the Requested amount
2. Enter the Non-charitable amount  
*This is the portion of the requested amount that will not be used for charitable purposes (e.g., non tax-deductible expense to Genentech)*
3. Enter the Total Overall Budget  
*Include all expenses for the event / activity, including expenses that will not be covered by the requested amount*
4. Select the Event / program type
5. Enter the Event / program title
6. Enter the Purpose of the support / program description  
*Provide a short description of the program including format, scope, and number of programs covered. You will be provided an opportunity to upload additional documentation later, if needed*
7. Indicate if this program provides scholarships to undergraduate students of color  
*Provide information relative to this program only, not the organization as a whole*
8. Indicate if this program addresses hunger, homelessness, access to healthcare, job training / placement or after-school programs for children of working parents  
*Provide information relative to this program only, not the organization as a whole*
9. Describe the Intended audience  
*Provide a brief description of the target audience of the program you are planning*
10. Enter the Method for measuring program success  
*Describe the approach you will use to determine whether the program was successful in achieving its stated goals*

**Application - Philanthropic Charitable Support**

Request ID: G-11707

\* Requested amount:  1

\* Non-charitable amount (If applicable, please enter the portion of the requested cash amount that will not be used for charitable purposes e.g. inclusion of a charge or expense to Genentech):  2

\* Total Overall Budget (Please include all expenses for the event/activity, including expenses that will not be covered by the requested amount.):  3

\* Event / program type:  4

\* Event / program title:  5

\* Purpose of the support/program description (Provide a description of the program including format, scope, number of programs covered; given limited space in this section, you'll be given an opportunity to upload additional documentation, later if needed.)  
Description of the program goes here. 6

\* Does this program provide scholarships to undergraduate students of color?  7

\* Does this program address hunger, homelessness, access to healthcare, job training/ placement or after-school programs for children of working parents?  8

\* Intended audience (Please provide a brief description of the target audience of the program you are planning)  
Brief description goes here. 9

\* Method for measuring program success (Please describe the approach you will use to determine whether your program was successful in its stated goals)  
Enter your methods here. 10

Examples:  
How will you measure metrics?  
How will you measure success?



# How to apply for Philanthropic Charitable Support

## Tip Sheet

### IV Application (continued)

11. Indicate if there will be other supporters of this program

If you are seeking funding from other supporters, please select “Yes”

If you are sure the program is not going to have any other supporters, please select “No”

12. If known, please list the other potential supporters

13. Indicate if this event has a volunteering opportunity

*Events are not required to have volunteering opportunities. Please do not create a volunteering opportunity specifically for Genentech / Roche*

14. Confirm if the volunteering opportunity is open to individuals other than the event sponsors

15. Indicate if the funding from this request will be used specifically to develop clinical practice guidelines or algorithms

*Example of clinical practice guidelines: Statements that include recommendations intended to help practitioners to make appropriate healthcare decisions for specific clinical conditions*

16. Enter the Tracking code (optional)

*If you know the program specific tracking code, please enter it here*

17. Indicate which benefits will be provided in exchange for funding

*Select all that apply from the “Available” list and click the right arrow to move the selection into the “Chosen” list*

18. Click “Save and Continue”

The screenshot shows a web application form with the following elements:

- 11:** A dropdown menu with "Yes" selected, corresponding to the question: "\* Will there be other supporters of this program?".
- 12:** A text input field labeled "List other supporters here".
- 13:** A dropdown menu with "Yes" selected, corresponding to the question: "\* Does this event have a volunteering opportunity? (Please note: events are not required to have volunteering opportunities. Please do not create a volunteering opportunity specifically for Genentech/Roche)".
- 14:** A dropdown menu with "Yes" selected, corresponding to the question: "\* Can you confirm the volunteering opportunity is open to individuals other than the event sponsors?".
- 15:** A dropdown menu with "No" selected, corresponding to the question: "\* Will the funding from this request be used specifically to develop clinical practice guidelines or algorithms?".
- 16:** A text input field for "Tracking code (if you received a tracking code, please input it here)".
- 17:** A selection interface with two columns: "Available" (containing "Entry into the event" and "Non-promotional Exhibit Space") and "Chosen" (containing "Corporate recognition"). Arrows indicate the direction of selection.
- 18:** Two buttons at the bottom: "Back" and "Save and Continue".



# How to apply for Philanthropic Charitable Support

## Tip Sheet

### V Program Details

#### Complete the Program details

*The request needs to be submitted at least 60 days prior to the start of the event / program*

1. Enter the Start date
2. Enter the End date  
*Last date of the program*
3. Enter the Expected # of attendees / estimated number served by program
4. Enter the Venue name
5. Enter the Venue city
6. Enter the Venue state (optional)
7. Enter the Venue province / region / territory (optional)
8. Enter the Venue zip code
9. Enter the Venue country
10. Click "Save and Continue"

*You may be required to provide additional information depending on the information you submitted with your request*

**Program Details**

Please note: funding requests must be started at least 60 days prior to the start of the activity.

* Start date	<input type="text" value="4/7/2014"/>	1
	<small>[ 10/31/2013 ]</small>	
* End date	<input type="text" value="12/19/2014"/>	2
	<small>[ 10/31/2013 ]</small>	
* Expected # of attendees / estimated number served by program	<input type="text" value="200"/>	3
* Venue name	<input type="text" value="ABC Venue"/>	4
* Venue city	<input type="text" value="ABC City"/>	5
Venue state	<input type="text" value="CA"/>	6
Venue province/region/territory	<input type="text"/>	7
* Venue zip code	<input type="text" value="99999"/>	8
* Venue country	<input type="text" value="United States"/>	9

10



# How to apply for Philanthropic Charitable Support

## Tip Sheet

### VI Budget

#### › Complete the Budget for the program

1. Total Overall Budget

*The Total Overall Budget is pre-populated with the amount specified earlier in the application. You can edit it here if needed*

*The Total Overall Budget includes all expenses for the event / activity, including expenses that will not be covered by the requested amount*

2. Entered so far

*This amount is automatically calculated as you enter the budget items in the table below*

3. Select the Category

*See Appendix A for a complete list of categories*

4. Select the Subcategory

*See Appendix A for a complete list of subcategories*

5. Enter the Amount by item

6. Enter the Quantity

7. Enter an Explanation / Description of the budget line item

8. Click “Add Line Item” for the next budget item

9. Track the Budget Total

*The Budget Total is calculated automatically*  
*The Budget Total has to be equal to the Total Overall Budget entered above*

10. Click “Save and Continue”

*If you have any empty lines, you will need to delete them in order to proceed*

Requested Amount

\* Total Overall Budget (Please include all expenses for the event/activity, including expenses that will not be covered by the requested amount.)  1

Entered so far  2

▼ Budget

Actions	Category	Subcategory	Amount	Quantity	Explanation
Delete	Meals	Breakfast	\$5,000.00	1	breakfast
Delete	Marketing	Advertising	\$50,000.00	1	mailings
Delete	Accreditation	Accreditation Fees	\$15,000.00	1	fees
Delete	Travel	Faculty Airfare	\$8,000.00	1	travel
Delete	Venue	Meeting Rooms	\$20,000.00	1	meeting rooms
Delete	Infrastructure	Equipment Purchas...	\$2,000.00	1	equipment

Budget Total  9

Add Line Item 8

Back Save and Continue 10



# How to apply for Philanthropic Charitable Support Tip Sheet

## VII Attachments

1. Upload File Attachments (optional)

*Attach any additional documents to describe the program. For example: brochure, flyer, agenda. Limit 25 MB total.*

*If you would like to submit more than 5 documents, send them via email to [fundingrequests@gene.com](mailto:fundingrequests@gene.com). Make sure to reference the Funding Request ID.*

*If you would like to replace of the uploaded documents, click "Choose File" to select and upload a new document.*

2. Click "Save and Continue"

### File Attachments

Additional document 1

Choose File no file selected

1

Additional document 2

Choose File no file selected

Additional document 3

Choose File no file selected

Additional document 4

Choose File no file selected

Additional document 5

Choose File no file selected

Back

Save and Continue

2



# How to apply for Philanthropic Charitable Support

## Tip Sheet

### VIII Confirmation

#### Submit the Funding Request

1. If you are a member of the requesting organization and are legally authorized to sign the Letter of Agreement (LOA) on behalf of the organization, select "I am legally authorized"
2. Click "Print Preview" to print and review the funding request you are about to sign
3. Click "Submit"
4. You have now completed the application. Click OK to submit or Cancel to go back to make changes or print before submission.

>>> Or >>>

>>> Or >>>

If you are not legally authorized to sign the LOA on behalf of the organization, select "I am not legally authorized"

#### Enter the Organization Authorized Signer information

*The Authorized Signer cannot be a Genentech employee*

5. Enter the First name
5. Enter the Last name
6. Enter the Email address  
*The email address needs to be that of the Authorized Signer specified above*
7. Re-enter the Email address (confirmation)
8. Click "Print Preview" to print and review the funding request
9. Click "Submit"
10. 12. You have now completed the application. Click OK to submit or Cancel to go back to make changes or print before submission.



# How to apply for Philanthropic Charitable Support

## Tip Sheet

### IX Request Status

#### › Check the Status of the request

1. Click the “Home” tab

---

2. Review “My Required Tasks”  
*This section lists tasks that are required from you. Example: signing the LOA*
3. Review “My Funding Request”  
*This section lists the status of your request*

1 Home | Help | FAQs | Contact Us | My Organization | My Profile | Logout

**Funding Request Final Submission**

---

**Getting Started**

We are committed to being a strong corporate citizen by harnessing our unique resources both financial and human, to contribute to the best interests of patients, the medical profession, our employees and our communities. We provide support to a wide variety of organizations and initiatives through our corporate giving programs, including independent medical education grants, charitable contributions, and clinical research and development support.

More information about these and other types of grants is available at <http://funding.gene.com>

To get started, click the Create A New Funding Request button. This will navigate you to the new request submission page.

[Create a New Funding Request](#)

---

**My Required Tasks** 2

Action	Request Id	Information Requested	Status

---

**My Funding Requests** 3

Action	Request Id	Program Title	Date Submitted	Requested Amount	Status
<a href="#">View</a>	G-11707	ABC Non-Profit Event	12/3/2012	\$20,000.00	Submitted



# How to apply for Philanthropic Charitable Support

## Tip Sheet

### X Respond to an RFI

- › **A Request for Information (RFI) is generated by the Genentech Funding Request System when a Genentech reviewer has questions about the funding request. If an RFI is generated, you will receive an email notification describing the request sections requiring additional information. The email will be sent to the email address specified in the request**

*Important: You must respond within 10 days or the request may be canceled*

- › **To respond to an RFI, log into the Genentech Funding Request System**
  1. Go to the “My Required Tasks” section
  2. Click on the RFI link under the “Action” column highlighted in red  
*This will open the request page*
  3. Click “Continue” until you have access to the fields requiring additional information

- › **Once you have reached the section you have been asked to update, respond accordingly. Then, click “Save and Continue”**

- › **To re-submit the Funding Request**
  4. Confirm whether or not you are the legally Authorized Signer
  5. Click “Re-Submit”

**Getting Started**

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[Create a New Funding Request](#)

**My Required Tasks** 1

Action	Request Id	Information Requested	Status
RFI	G-05655	Please respond to the RFI for Funding Request: G-05655	Open

**Tax ID**

- Where is this organization located? United States
- Tax ID 98-7654321
- Tax status 501 (c)(3)

[Continue](#) 3

› Organization Detail

› W-9

› Select a Location

**Funding Request Final Submission**

Review your funding request. Click the “Print Preview” button. Click “Submit” to send your request to Genentech for review. Upon submitting, changes cannot be made to the funding request application.

All approved funding requests require a signed letter of agreement (LOA) prior to funding. Please indicate below whether you are authorized to sign a LOA on behalf of your organization.

4  I am legally authorized  I am not legally authorized

[Print Preview](#) [Back](#) [Re-Submit](#) 5



# How to apply for Philanthropic Charitable Support

## Tip Sheet

### XI Sign the LOA

- › **All grants must abide by the terms in the Genentech Letter of Agreement (LOA), which is issued to an Authorized Signer of the requesting organization once the application is approved. The Authorized Signer must agree to the terms of the LOA before any funding is issued**

*The LOA can only be signed by the legally Authorized Signer for the organization*

- › **To sign the LOA, log into the Genentech Funding Request System**

1. Go to the “My Required Tasks” section
2. Click on the Letter of Agreement link under the “Action” column highlighted in red

- › **On the LOA page**

3. Click “Print to PDF” to print a copy of the LOA before accepting the LOA (optional)

- › **Navigate to the bottom of the LOA to sign the LOA**

4. Enter your Name
5. Enter your PIN number  
*This is the PIN number you created when you registered as a new user*
6. Click “Approve”  
*Once approved, the LOA will be accessible from the Genentech Funding Request System “Home” screen for your review*

**Getting Started**

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More information about these and other types of grants is available at <http://funding.gene.com>

To get started, click the Create A New Funding Request button. This will navigate you to the new request submission page.

[Create A New Funding Request](#)

**My Required Tasks** 1

Action	Request Id	Information Requested	Status
RFI	G-05655	Please respond to the RFI for Funding Request: G-05655	Open
Letter of Agreement	G-05655	Please sign the LOA for Funding Request: G-05655	Open

**Letter of Agreement**

Please review the entire LOA below then indicate your approval at the bottom of the page. [Print to PDF](#) 3

Regarding Terms, Conditions and Purposes of an Educational Grant between Test Organization for Prod Verifications (“Recipient”) and Genentech, USA. (“Genentech”).

**Authorized Signer:** Imed Gc  
**Address:** 99 First St  
**City:** Denver  
**State:** CO  
**Zip Code:** 80002

**Program / Event Title:** Test Outcomes Test (the “Activity”)  
**Request ID:** G-05655  
**Program / Event Date:** 11/1/2012

Genentech wishes to provide support for the above-referenced independent medical education Activity by means of a grant in the amount of \$3,500.00 (hereafter, the “Request Payment”). By accepting this grant, Institution agrees to use the funds solely for the Activity and to comply with the terms and conditions of this Letter of Agreement.

**Approved:**

GENENTECH USA, INC.  
 By:  
 Name: Nancy Lutz-Paynter  
 Title: Associate Director

I hereby acknowledge and agree with the terms and conditions set forth in this Agreement and represent and warrant that I have authority to sign on behalf of Test Organization for Prod Verifications (“Recipient”).

By:  
 Name:

Your Name:  4      Your PIN:  5  
Forgot your pin?

[Approve](#) 6



# How to apply for Philanthropic Charitable Support

## Tip Sheet

### \* Appendix A – Overview | Budget Categories

Category	Subcategory	Category	Subcategory
<i>Accreditation</i>	<ul style="list-style-type: none"> <li>▪ Accreditation Fees</li> <li>▪ Certificate Fees</li> </ul>	<i>Miscellaneous (explain)</i>	<ul style="list-style-type: none"> <li>▪ Other (explain)</li> </ul>
<i>Association Fee</i>	<ul style="list-style-type: none"> <li>▪ Association Fee</li> </ul>	<i>Printing &amp; Production</i>	<ul style="list-style-type: none"> <li>▪ Brochures</li> <li>▪ Handouts</li> <li>▪ Invitations</li> <li>▪ Mailing Lists / Labels</li> <li>▪ Meeting Materials / Signage</li> <li>▪ Patient Materials</li> <li>▪ Programs</li> </ul>
<i>Honoraria</i>	<ul style="list-style-type: none"> <li>▪ Chair</li> <li>▪ Faculty</li> </ul>		
<i>Hotel / Lodging</i>	<ul style="list-style-type: none"> <li>▪ Faculty</li> <li>▪ Non-Physician Faculty</li> <li>▪ Staff</li> </ul>		
<i>Infrastructure</i>	<ul style="list-style-type: none"> <li>▪ Administrative Overhead</li> <li>▪ Dues / Subscriptions</li> <li>▪ Equipment Purchase / Lease</li> <li>▪ Facility Construction / Lease</li> <li>▪ Insurance</li> <li>▪ Lab Expense</li> <li>▪ Salaries – Contractor</li> <li>▪ Salaries – Full Time</li> <li>▪ Utilities</li> </ul>	<i>Screenings</i>	<ul style="list-style-type: none"> <li>▪ Lab Processing Fees</li> <li>▪ Test Kits</li> <li>▪ Tests</li> </ul>
<i>Management Fees</i>	<ul style="list-style-type: none"> <li>▪ Account &amp; Activity Management</li> <li>▪ Activity Marketing</li> <li>▪ Audience Generation</li> <li>▪ Content Development / Creative Development &amp; Production</li> <li>▪ Content Development / Editorial Fees</li> <li>▪ Content Development / Medical Writing &amp; Scientific Review</li> <li>▪ Educational Effectiveness Measures</li> <li>▪ Legal Fees</li> </ul>	<i>Shipping &amp; Posting</i>	<ul style="list-style-type: none"> <li>▪ Courier Expense / Mailing Expense</li> <li>▪ Office Supplies</li> </ul>
<i>Marketing</i>	<ul style="list-style-type: none"> <li>▪ Advertising</li> <li>▪ Flyers</li> <li>▪ Mailings</li> </ul>	<i>Travel</i>	<ul style="list-style-type: none"> <li>▪ Faculty Airfare</li> <li>▪ Faculty Mileage Reimbursement</li> <li>▪ Faculty Train</li> <li>▪ Ground Transportation / Parking</li> <li>▪ Per Diem</li> <li>▪ Staff Airfare</li> <li>▪ Staff Mileage Reimbursement</li> <li>▪ Staff Train</li> </ul>
<i>Meals</i>	<ul style="list-style-type: none"> <li>▪ Break / Snacks</li> <li>▪ Breakfast</li> <li>▪ Lunch</li> <li>▪ Dinner</li> </ul>	<i>Venue</i>	<ul style="list-style-type: none"> <li>▪ A/V Equipment - Rental &amp; Labor</li> <li>▪ Meetings Rooms</li> <li>▪ On site Meeting Support</li> <li>▪ Teleconference Fees</li> </ul>
		<i>Website Development</i>	<ul style="list-style-type: none"> <li>▪ Web Design / Functionality</li> <li>▪ Website Hosting</li> <li>▪ Web Maintenance</li> </ul>