



**WHOLE FOODS MARKET** is committed to building community strength by partnering with local non-profits that provide direct services to our diverse neighborhood. As part of our corporate mission, Whole Foods Market has several initiatives specifically designed to support our customers, our Team Members and our community. Our flagship program is the 5% Day when on a chosen day every fiscal quarter, we donate 5% of that day's sales to a non-profit that directly services the broad needs of our community.

**TO BE CONSIDERED FOR A 5% DAY, YOUR ORGANIZATION MUST:**

- Be a registered non-profit with a valid Certificate of Exemption.
- Complete a 5% Day Application and provide a copy of your tax identification letter, annual report and a list of your Board of Directors (applications are not considered complete without these materials!)
- Be able to provide a consistent in-store presence on the 5% Day.
- Work with Whole Foods Market to develop marketing strategies and in-store events to promote the 5% Day.
- Make a short presentation to the store about your application (if necessary).
- Not have been at 5% Day Partner with ANY Whole Foods Market stores within the past three years.
- Submit a report of how 5% Day funds were used by your organization, and recognize Whole Foods Market's contribution to your organization via appropriate venues.

5% Day partners are chosen each fiscal quarter. The application deadline is rolling and applications are kept on active file, and occasionally shared with other Whole Foods Market stores in the area.

To submit your application, or for more information about the 5% Day program, or other Whole Foods Market community giving programs, please contact:

**EMICK JOURDAIN**  
**MARKETING SPECIALIST/COMMUNITY LIAISON**  
**WHOLE FOODS MARKET**  
**4530 40TH STREET, NW**  
**WASHINGTON, DC 20016**  
**EMICK.JOURDAIN@WHOLEFOODS.COM**  
**PHONE: 202/ 237-5800**  
**FAX: 202/237-1115**



## 5% DAY APPLICATION WHOLE FOODS MARKET TENLEY

You can answer these questions on this form and can provide extra pages where necessary. In addition to the required documents, please feel free to include any additional information about your organization. Deadlines are rolling and applications will be kept active and on file.

**ORGANIZATION NAME:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**TAX IDENTIFICATION NUMBER:** \_\_\_\_\_

**CONTACT PERSON AND TITLE:**

\_\_\_\_\_

\_\_\_\_\_

**PHONE:** \_\_\_\_\_ **FAX:** \_\_\_\_\_

**EMAIL:** \_\_\_\_\_

1. Briefly describe your organization's history and mission.

2. What are the primary funding sources for your organization?

3. What has been your most successful fundraising initiative?



4. What specific project(s) will the 5% Day support and how will you recognize Whole Foods Market's contribution to this project?

5. How do you plan on publicizing the 5% Day to the community and to your membership?

6. What information will you be distributing in the store on the 5% Day and how many of your organization's representatives will be in the store during the day?

7. What in-store programming will you develop to promote the 5% Day (i.e. in-store activities, music or other events)?

8. How many members/constituents does your organization have and service?

9. Please list your Board Members, their affiliations and your key officers.



**10.** Whole Foods Market requires a report on how 5% Day funds were used. How soon after you receive the funds will you file this report?

**11.** Have you applied for a 5% Day at any other Whole Foods Market?  
If yes, please indicate which store and when the application was made.

**12.** Has your organization ever been a partner with any Whole Foods Market store?  
If yes, please indicate which store and date.

Please return completed application and additional materials to:

**EMICK JOURDAIN  
MARKETING SPECIALIST/COMMUNITY LIAISON  
WHOLE FOODS MARKET  
4530 40TH STREET, NW  
WASHINGTON, DC 20016  
EMICK.JOURDAIN@WHOLEFOODS.COM  
PHONE: 202/ 237-5800  
FAX: 202/237-1115**