Donation Guidelines

At Omaha Children’s Museum, we strive to support local nonprofit organizations and children’s causes. Due to the significant amount of requests received each year, we are unfortunately unable to fulfill all requests. Omaha Children’s Museum reserves the right to deny any donation request at any time for any reason.

We evaluate applications based on the following guidelines:

1. The recipient must either be a 501c3 nonprofit organization or children’s cause. If your organization is a 501c3, a copy of the 501c3 letter from the IRS must accompany the application in order for your request to be considered. This letter comes from the U.S. Treasury Department and is different from a state tax-exempt form.

2. The application must be received at least six weeks before the event date in order to be considered.

3. The organization or cause must serve an organization or cause in the Midwest.

4. The donation request application should be accompanied by any relevant literature or marketing materials related to the organization, cause, or event.

Please note-

- Submission of an application does not guarantee approval of a donation.
- Past approval of a donation request is not a guarantee of future support.
- Requests by phone or email are not accepted.
- Each approved organization is restricted to one donation per year.

Please contact Omaha Children’s Museum with any questions regarding donations at donationrequest@ocm.org.
Donation Request Form

*Please read all guidelines on the first page of this application before submission.*

Today’s Date: _____/_____/______  Event Date: _____/_____/______

Name of Organization or Cause: ____________________________________________

Does your Organization/ Cause/ Event have a 501c3 tax status?  YES  NO
*If YES, please attach a copy of the letter from the IRS indicating the 501c3 status.*

Address: ___________________________________________________________________

City, State, Zip: ____________________________________________________________

Applicant First and Last Name: _____________________________________________

Title (if applicable): _______________________________________________________

Daytime Phone: (_______) ___________  Alternate Phone: (_______) ___________

Email: ___________________________________________________________________

1. Mission statement of organization or cause:

2. Description of event:

3. How will Omaha Children’s Museum be acknowledged for this event (i.e. signage, marketing materials)?

4. Describe how the donation will be used (ex. raffle, giveaway, etc.):

5. Has your organization or cause received a donation in the past from Omaha Children’s Museum?  YES  NO
   *If YES, what was the date you received your donation?  _______/_____/_______*

Complete and return with a **self-addressed stamped envelope** to:

Omaha Children’s Museum
Attn: Donation Request
500 S. 20th Street
Omaha, NE 68102

*Revised September 2017*