

CHARITABLE ORGANIZATION REGISTRATION STATEMENT

RETURN TO:

Office of the Attorney General
Consumer Protection Section
500 Dexter Avenue
Montgomery, Alabama 36130-0152
(334) 242-7335

<input type="radio"/> Initial Registration <input type="radio"/> Statement Update Original registration date _____
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Provide the information below. A fee of twenty-five dollars (\$25) payable to the Office of the Attorney General must be paid at the time of registration (and upon annual renewal). No further registration statement is required, provided that every registered organization shall notify the Attorney General within 10 days of any change in the information submitted herein.

1. Legal Name of Charitable Organization _____

1A. All other names under which solicitations will be made _____

2. Street Address _____

City _____ State _____

Zip _____ County _____

2A. Mailing Address (if different) _____

City _____ State _____

Zip _____ County _____

3. Telephone Number(s) _____

Fax Number(s) _____

E-mail _____ Website _____

4. List the names, addresses, and telephone numbers of the officers, directors, trustees, and executive personnel of the organization (**attach list**).

5. List the addresses of the organization and the addresses of any offices in this state. If the organization does not maintain an office, list the name and address of the person having custody of its financial records.

Street Address _____

City _____ Zip _____

Financial Custodian (if necessary) _____

6. Is the organization a corporation? Yes No

6A. If Yes:

Date incorporated _____ State of Incorporation _____

6B. If No:

Type of organization _____

State where established _____

Date established _____

7. Fiscal year end (day/month) _____

8. Has the organization applied for or been granted IRS tax exempt status? Yes No

If yes, date of application _____ or date of determination letter _____

If granted, exempt under 501(c) _____

Are contributions to the organization tax deductible? Yes No

8A. Has the organization's tax exempt status ever been denied, revoked, or modified? Yes No

9. Purposes for which the organization is organized: Yes No

- | | |
|---|--|
| <input type="radio"/> School, college or other training | <input type="radio"/> Cultural or historical |
| <input type="radio"/> Health or other services to individuals | <input type="radio"/> Youth activities |
| <input type="radio"/> Business, professional, employee or fraternal | <input type="radio"/> Sports, athletic, recreational or social |
| <input type="radio"/> Conservation or environmental | <input type="radio"/> Public opinion advocacy or legal aid |
| <input type="radio"/> Other(s) _____ | |

10. State purpose(s) for which the contributions to be solicited will be used _____

11. Has the organization or any of its officers, directors, employees, or fundraisers:

A. Been enjoined by any court from soliciting contributions? Yes No

B. Been the subject of a proceeding regarding any solicitation or registration? Yes No

C. Entered into a voluntary agreement of compliance with any government agency or in a case before a court or administrative agency? Yes No

D. Registered with or obtained exemption from any state or agency? Yes No

E. Solicited funds in any state? Yes No

If YES to 11A, B or C, attach explanation.

If YES to 11D or E, **attach list** of states where registered, exempted or where solicited.

12. List the names and addresses of any professional fund raisers and commercial co-venturers who are acting or have agreed to act on behalf of the organization

- A. _____
- B. _____
- C. _____
- D. _____

13. Checklist of items to attach with Initial Registration:

- Copy of the charitable organizational charter
- Articles of organization or incorporation
- Agreement of association, instrument of trust, constitution or other organizational instrument and bylaws Statement setting forth the place where and the date when the organization was legally established, the form of the organization, and its tax exemption status attaching federal or state tax exemption
- determination letters

OPTIONAL - Items 14-19 are not required by law, but are requested to inform the public about your organization.

14. Please give a description of your organization to be included on the Attorney General’s website

15. Indicate all methods of solicitation:

- Mail
- Telephone
- Personal Contact
- Radio/TV Appeals
- Special Events
- Newspaper/Magazine Ads
- Other(s) _____

16. If known, please list the NTEE codes that best describe your organization _____

17. Will contributions be used to benefit citizens in the state of Alabama? Yes No

18. Financial Report:

- A. Contributions in previous year: \$ Yes No
- B. Fundraising cost in previous year: \$ Yes No
- C. Management & general costs in previous year: \$ Yes No
- D. Fundraising costs as a percentage of funds raised: %
- E. Fundraising costs plus management & general costs as a percentage of funds raised: %

19. Does your organization give grants? Yes No

19A. If YES, May citizens of Alabama apply for grants from your organization? Yes No

If YES, how? _____

Annual Renewal Information

The charitable organization must within ninety (90) days of the close of its fiscal year ending after the date on which it files its initial registration, file an annual written report, which shall include a financial statement covering the fiscal year, clearly setting forth the gross income, expenses, and net income inuring to the benefit of the charitable organization, a balance sheet as of the close of the fiscal year, and a schedule of the activities carried on by the charitable organization in the performance of its purposes and the amounts expended thereon during the fiscal year.

An organization may also meet this requirement by submitting a copy of the Form 990 submitted to the Internal Revenue Service as required by federal law.

A fee of twenty-five dollars (\$25) payable to the Office of the Attorney General must accompany the report at the time of filing.

Public Disclosure Notice

Information in this statement is public record and all or portions of this information may appear on the Attorney General's website.

THANK YOU FOR YOUR COOPERATION

CERTIFICATION

President or Other Authorized Officer

I, (NAME) _____, (TITLE) _____ hereby certify under penalty of perjury, that the information contained in this statement is true and correct. I further certify that I am authorized to submit this statement on behalf of the company named in line 1 above. I also understand that I am under a continuing obligation to notify the Office of the Attorney General within ten (10) days of any change in the information provided.

SIGNATURE _____ DATE _____

Subscribed and sworn before me this ____ day of _____, 200__

NOTARY PUBLIC _____ My Commission Expires _____

Chief Fiscal Officer

I, (NAME) _____, (TITLE) _____ hereby certify under penalty of perjury, that the information contained in this statement is true and correct. I further certify that I am authorized to submit this statement on behalf of the company named in line 1 above. I also understand that I am under a continuing obligation to notify the Office of the Attorney General within ten (10) days of any change in the information provided.

SIGNATURE _____ DATE _____

Subscribed and sworn before me this ____ day of _____, 200__

NOTARY PUBLIC _____ My Commission Expires _____