

CHARITABLE ORGANIZATION

- REGISTRATION STATEMENT -

PLEASE TYPE OR PRINT IN INK. This registration statement is required by the Illinois Charitable Trust Act and the Illinois Solicitation for Charity Act. Please answer all items which are applicable to your organization. If you are unable to answer any question fully in the space provided, please attach a sheet containing the remainder of your answer. 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. One copy of this Registration Statement and attachments are to be filed with the Office of the Attorney General, Charitable Trust Bureau, 100 West Randolph Street, 11th Floor, Chicago, Illinois 60601

1. This is a registration under: Illinois Charitable Trust Act;
 Illinois Solicitation for Charity Act;
 Both Acts

2. Name of Organization _____ Telephone Number _____ Federal Employer ID# _____

Street and Number	City	County	State	Zip Code
_____	_____	_____	_____	_____

3. Type of legal entity (Corporation, Trust, Unincorporated Association or other) and date, method and place organization legally established. _____
 If a foreign corporation, when was it authorized to do business in Illinois? _____
 If a corporation, Illinois Secretary of State's File No. _____
***A copy of the Articles of Incorporation or Certificate of Authority issued by the Secretary of State must be attached.**

4. Name, address and telephone number of Illinois registered agent _____

5. Address of all offices in the State of Illinois. _____

6. Date on which the annual accounting period of the organization ends. Month _____ Day _____

7. State the purposes of the organization and purposes for which contributions are to be used. (Be specific)

8. If the name under which the organization intends to solicit funds differs from the name listed in No.2 provide name(s) under which contributions will be solicited, and the reason for the use of such other name(s). _____

9. If the organization has previously been registered with the Attorney General under either Act, give the name under which registered (if different than shown in No. 2), last registration number, and date registered. _____

10. Has the organization been registered with any other governmental authority to solicit contributions? Yes No
 Name of authority and date of authorization. _____
 Is such registration current? Yes No

11. Has the organization or any of its officers, directors or trustees ever been enjoined or prohibited by any court or other governmental agency from soliciting contributions, or is such action pending? Yes No
If "Yes", attach an explanation.

12. Do you intend to use the services of a professional fund raiser as defined by "An Act to Regulate Solicitation and Collection of Funds for Charitable Purposes"? Yes No

If "Yes", answer a, b, and comply with c below.

a. Name and address of professional fund raiser(s): _____

b. Has the professional fund raiser registered and filed a bond with the Office of the Attorney General as required? Yes No

c. Attach copies of all contracts with professional fund raiser(s).

13. Have any of organization's officers, directors, executive personnel, or have any of the organization's employees who have access to funds, ever been charged with or convicted of a misdemeanor involving misapplication or misuse of money of another, or any felony? Yes No If "Yes", give the following information: (IRS 1981 ch.. 23, sec. 5109)

NAME AND ADDRESS OF COURT	NATURE OF OFFENSE	DATE OF CONVICTION(Mo./Yr.)
_____	_____	_____
_____	_____	_____

14. State the board, group or individual having final discretion as to the distribution and use of contributions received.

15. Will you use any of the following methods of solicitation? Unordered Merchandise Distribution or Sale of Seals
 Telephone Appeals Coin Collection Containers Special Events Ad Books Direct Mail
 Other --- If other, attach an explanation.

16. List name, mailing address and title of the **chief executive** or **staff officer** of the organization. _____

17. **Attach** a list of names, mailing addresses, and daytime phone numbers of all officers and directors, or trustees of the organization.

18. Has the United States Internal Revenue Service determined that this organization is tax exempt? Yes No
If "Yes", attach a copy of the determination letter. Is application pending? Yes No

***All organizations with tax exempt status or an application pending must attach a copy of Federal Form 1023 "Application for Recognition of Exemption" or an exemption letter.**

19. Has organization's tax exempt status ever been questioned, audited, denied or cancelled at any time by any governmental agency? Yes No **If "Yes", attach the facts.**

20. **Organizations which have been in operation for over one (1) year must attach a copy of the form AG990-IL and Federal return, or AG990IL if no Federal return was filed for each year the organization was in existence, completed in detail. Organizations which have been in operation less than one (1) year must attach a completed Financial Information Form CO-2. Please note charitable organization's are required to maintain accurate and detailed accounting records.**

21. Approximate amount of contributions solicited or income received from persons in this State during the organization's last annual accounting period \$ _____

22. **EVERY REGISTERING ORGANIZATION MUST ATTACH THE FOLLOWING APPLICABLE DOCUMENTS:**
 Corporation.....The Articles of Incorporation and/or Certificate of Authority, Amendments and By-Laws
 Unincorporated Association.....Constitution and By-Laws
 Testamentary Trust.....Will, Probate number and Decree of Distribution
 Inter Vivos Trust.....Instrument Creating Trust

Note: The President and the Chief Financial Officer or other authorized officer are both required to sign. This must be two different individuals. If entity is a Trust, all Trustees must sign.

UNDER PENALTY OF PERJURY, THE UNDERSIGNED DECLARE AND CERTIFY THAT THE INFORMATION CONTAINED IN THIS STATEMENT AND ALL ATTACHED SHEETS IS TRUE AND CORRECT TO THE BEST OF OUR KNOWLEDGE.		
Signature _____	Title _____	Date _____
Signature _____	Title _____	Date _____