

**990 Questionnaire**  
**Information Required from Your Organization**

**Date:**

**Tax Year:**

**Organization Name:**

**Organization Address:**

**Contact Name:**

**Contact Email:**

**Contact Phone Number:**

1. Principle officer of the organization: \_\_\_\_\_
2. Organization representative signing the return: \_\_\_\_\_
3. What year was the organization formed? \_\_\_\_\_
4. State of legal domicile? \_\_\_\_\_
5. Total number of volunteers (estimate if necessary): \_\_\_\_\_
6. Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? Yes  No
7. Did the organization attempt to influence legislation or attempt to influence public opinion on legislation? If "Yes," additional information will be required. Yes  No
8. Did the organization maintain any donor advised funds? If "Yes," additional information will be required. Yes  No 
  - a. If "Yes" to Question 8., did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? Yes  No
  - b. Did the organization make any taxable distributions under section 4966? Yes  No
  - c. Did the organization make a distribution to a donor, donor advisor, or related person? Yes  No
10. Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," additional information will be required. Yes  No
11. Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," additional information will be required. Yes  No
12. Did the organization have a permanent or quasi-endowment? If "Yes," additional information will be required. Yes  No
13. Did the organization award grants to organizations or individuals in the U.S.? If "Yes," additional information will be required. Yes  No

- |     |  |                                 |                                |
|-----|--|---------------------------------|--------------------------------|
| 14. | Did the organization maintain an office, employees, or agents outside of the U.S.? If "Yes," additional information will be required.  | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |
| 15. | Did the organization have aggregate revenues or expenses of more than \$10,000 from grant making, fundraising, business, and program service activities <u>outside the U.S.</u> ? If "Yes," additional information will be required.               | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |
| 16. | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year that was issued after December 31, 2002? If "Yes," additional information will be required.           | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |
| 17. | Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," additional information will be required.  | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |
| 18. | Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," additional information will be required.  | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |
| 19. | Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," additional information will be required. | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |
| 20. | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," additional information will be required.              | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |
| 21. | During the tax year, did any person who is a current or former officer, director, trustee, or key employee:  |                                 |                                |
| a   | Have a direct or indirect business relationship with the organization (other than as an officer, director, trustee, or employee)?  | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |
| b   | Have a family member who had a direct or indirect business relationship with the organization?   | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |
| c   | Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization?   | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |
| 22. | Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," additional information will be required.  | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |
| 23. | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," additional information will be required.  | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |
| 24. | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," additional information will be required.   | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |
| 25. | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," additional information will be required.  | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |
| 26. | Was the organization related to any tax-exempt or taxable entity? If "Yes," additional information will be required.   | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |
| 27. | Is any related organization a controlled entity within the meaning of section 512(b)(13)? (Majority of board members of entity from organization's board.)   | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |

28. Did the organization make any transfers to a related organization? If "Yes," additional information will be required. Yes  No
29. Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," additional information will be required. Yes  No
30. Did the organization have unrelated business income of over \$1,000? If "Yes," additional information will be required. Yes  No
31. Did the organization have an interest in a financial account outside the U.S.? If "Yes," additional information will be required. Yes  No
32. Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?
- a Yes  No
- b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? Yes  No
- c If "Yes," to question 32.a or 32.b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? Yes  No
33. Did the organization solicit any contributions that were not tax deductible? Yes  No
- If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? Yes  No
34. Is this an organization that may receive deductible contributions under section 170(c)? If "Yes," additional information will be required. Yes  No

35. List Board of Directors:

Name	Title	Hours served/wk	Compensation*	Officer	
				Yes <input type="checkbox"/>	No <input type="checkbox"/>
				Yes <input type="checkbox"/>	No <input type="checkbox"/>
				Yes <input type="checkbox"/>	No <input type="checkbox"/>
				Yes <input type="checkbox"/>	No <input type="checkbox"/>
				Yes <input type="checkbox"/>	No <input type="checkbox"/>
				Yes <input type="checkbox"/>	No <input type="checkbox"/>

Continue on separate page if required.

\* Compensation is for calendar year (Box 5 of W-2 or Box 7 of 1099 Misc. Includes compensation, pension contributions and expense allowance.

If board member is also an employee, approximately what percent of their time is spent on program, management and fundraising activities?

36. Number of voting members on the board that are independent: \* \_\_\_\_\_  
\* An individual is not independent if they are an employee or have a financial relationship with the organization.
37. Did any officer, director, trustee, or key employee have a family relationship or business relationship with any other director, trustee, or key employee? Yes  No

38. Did any former board member receive any compensation for having been a board member or because they now provide consulting services to organization? Yes No
39. Did the organization become aware during the year of a material diversion of the organization's assets? Yes No
40. Did the organization make any significant changes to its organizational documents? Yes No
41. Did any former board members receive more than \$10,000 in compensation in the current year from the organization or related organization? If "Yes," additional information will be required. Yes No
42. Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:
- a The governing body? Yes No
- b Each committee with authority to act on behalf of the governing body? Yes No
43. Was a copy of the Form 990 provided to the organization's governing body before it was filed? *(It is acceptable to email or provide a paper copy to the board. It is not required that the entire board reviews the 990, but they all should receive a copy.)* Yes No
44. Describe the process the organization uses to review Form 990:  
*(i.e. staff reviews, finance committee reviews, etc.)*
- 
45. Does the organization have a written conflict of interest policy?
- a *If "No," go to 46.* Yes No
- b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Yes No
- c Does the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe how this is done:* Yes No
- 
46. Does the organization have a written whistleblower policy? Yes No
47. Does the organization have a written document retention and destruction policy? Yes No
48. Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision:
- a The organization's CEO, Executive Director, or top management official? Yes No
- b Other officers or key employees of the organization? Yes No
- Describe the process:
-

49. Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," additional information will be required. Yes  No

50. Indicate how you make Form 990 available for public inspection. Check all that apply.

Another Website  
*(i.e. Guidestar)*

Own website             Upon Request

51. How many employees did the organization report on its W-3 for the calendar year? \_\_\_\_\_

52. How many employees made more than \$100,000 in the current year? \_\_\_\_\_

53. Were all the federal employment tax returns filed? Yes  No

54. List 5 highest paid employees over \$100,000 (for calendar year not fiscal year (if different) – Box 5 of the W-2). For fiscal year organizations this amount does not equal compensation per financials.

Name	Title	Salary	Pension

55. Did any former employees receive more than \$100,000 in compensation in the current year from the organization or related organizations? If "Yes," additional information will be required. Yes  No

56. List donors who donated more than \$ \_\_\_\_\_ (2% of contributed income):

Name	Address	Amount	Cash	Non-Cash
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>

Continue on separate page if required

57. Non-Cash Contributions: Yes  No   
Did the organization receive any non-cash contributions? Yes  No

Any contributions required by donor to be held for 3 years before it can be used? Yes  No   
If "Yes," additional information will be required.

Does the organization hire/use third parties or any related organizations to solicit, process or sell non-cash contributions? If "Yes," additional information will be required. Yes  No

58. How many 1099's were issued for the year (Box 3 of the Form 1096): \_\_\_\_\_

59. Were there any Form W-2G (gambling winnings) included in the Form 1096 total? Yes  No

b Did the organization comply with backup withholding on payments to above people? Yes  No

60. What is the total number of independent contractors that received over \$100,000? \_\_\_\_\_

61. List the five highest compensated independent contractors that received more than \$100,000:

<i>Name</i>	<i>Address</i>	<i>Type of Service</i>	<i>Amount</i>

62. Did the organization pay more than \$15,000 for the services of an outside professional fundraiser? Yes  No

If "Yes", select the method(s) of donation solicitation:

Mail    
 E-mail    
 In Person    
 Phone    
 Special Events    
 Non-Gov't Grants    
 Gov't Grants