

INSTRUCTIONS FOR COMPLETING EXEMPT ORGANIZATION FUND-RAISING NOTICE FORM

This form is required if you are soliciting charitable contributions in Maryland and received less than \$25,000 in charitable contributions in your most recently completed fiscal year. This form is also required for when you are soliciting charitable contributions for a named individual and the gross amount is delivered to the individual (*example: Jane Doe is sick and in the hospital, she cannot afford her medical bills, a fundraiser is held to raise money to give to Jane Doe to pay her medical bills*). You cannot use the services of a Professional Solicitor and file this form.

This form should be filed prior to any solicitation occurring and then annually thereafter. This form must be completed annually as long as you are soliciting charitable contributions in Maryland. You will receive a letter from our office after we have processed this form. If the form is complete, the letter will indicate the next date on which you must file this form again. If the form is not complete or we need to clarify an item on the form, we will send a letter indicating what is needed (we may try to call or email you as well).

Print this form; complete it; and mail it to:

Charitable Organization Division, Secretary of State, State House, Annapolis, MD 21401.

For questions about the form, please call us at 410-974-5534 or email us.

Directions for completing this form are as follows:

If you have never filed with the Secretary of State prior to completing this form, you should check ‘New.’ If you have filed this form with the Secretary of State in the past, you should check ‘Renewal.’

1. Check one: If you are exempt because you have received less than \$25,000 in your most recently completed fiscal year, you should check the first box. If you solicit for a named individual, you should check the second box. If you cannot check either one of these statements, this is the incorrect form. You will most likely need to file the documentation found on the Registration Instructions and Checklist page found at this link:
<http://www.sos.state.md.us/Charity/Instructions.aspx>.
2. Enter the most recently completed fiscal year. Provide the month and year in which the filer’s most recent fiscal year ended. For example, if your fiscal year ends on December 31st, you should write “December” into the month field. If completing this form in 2015, your most recently completed fiscal year would have ended in December 2014. If the organization has not yet completed its first fiscal year, leave that first part blank and complete the italicized line on the form, indicating the month and year when your first fiscal year will end.
3. Enter the name of the charitable organization. This name should match the name on the current version of your Articles of Incorporation. If not incorporated, use the name under which you are or plan to solicit charitable contributions. If you are filing this form because you are soliciting contributions for a named individual, you should enter the name of the person for whom the fundraising is being conducted.
4. Enter the organization’s Federal Employer Identification Number (EIN), also known as Federal Tax Identification Number. If you do not have one, enter the Social Security Number of the person for whom the fundraising is being conducted. If you do not wish to provide a Social Security Number, you should obtain an EIN from the IRS. There is no cost to obtain an EIN. You can apply online, at the IRS’ website, www.irs.gov. Please indicate if the number is a Social Security Number by checking “yes”. If the number provided is an EIN, not a Social Security Number, check “no.”
5. Please provide the mailing address for the charity. If the street address is different than the mailing address, please provide that as well.

6. Provide city/state/zip code for the mailing address. If the street address is in a different city, state, or zip, please provide that information for the street address as well.
7. Enter the County in which the organization is located.
8. Enter the organization's phone number.
9. Enter the organization's fax number.
10. Enter the organization's email address.
11. Enter the purpose or purposes for which contributions are to be used. If the purpose is very long, please attach a separate page and write "see attached." Please note that we have limited space to enter the purpose of the organization into our system. If the purpose is too long, we will use as many sentences as possible until space runs out.
12. If your organization has received a letter of determination from the IRS, giving 501(c)(3) status, please check 'yes' and attach a copy of the IRS Tax Determination Letter to the form. If the organization has applied for 501(c)(3) status from the IRS but has not yet received its letter of determination, please check 'pending.' If the organization was denied 501(c)(3) status, has not yet applied for it, or has no intention of applying for it, please check 'no.' You can file this form even if you are not a 501(c)(3). There is no penalty for checking 'no.'
13. Identify your methods of fundraising. You can identify multiple methods. Please select all that apply to your organization. "Canisters" are can or collection jars left in the public view, often times at a place of business, and often times asking people to place their change in them. If you solicit from a method other than the 5 listed, please list them in the space provided after "Other." These methods can include fundraising events, email, raffles, etc. You should describe any method listed in other.
14. Enter the name and address of the individual with custody of financial records for the organization. This is often times the Treasurer
15. Enter the names and addresses of persons who have final responsibility for the custody and final distribution of the contributions received by this organization.
16. Provide the name of the bank at which your contributions are deposited and the bank account number into which contributions are deposited. This information will remain confidential.
17. If the filer is an organization and has completed any of the listed IRS forms, please check the one it has it completed. For organizations that have filed a 990 or 990-EZ, please attach a copy of that to this form. There is no need to complete parts A and B if a 990 or 990-EZ was submitted.

If the organization has a completed the 990-N or none of the listed forms, it will need to complete parts A and B of this section. Part A should provide the amount of contributions received in the most recently completed fiscal year; it should be the amount received in the fiscal year noted on the first page. Part B should provide the amount of contributions received to date in the current fiscal year; the fiscal year that is occurring at the time this form is being completed.

If the filer is not an organization, complete parts A and B of this section. Part A should provide the amount of contributions received in the most recently completed fiscal year; it should be the amount received in the fiscal year noted on the first page. Part B should provide the amount of contributions received to date in the current fiscal year; the fiscal year that is occurring at the time this form is being completed.

18. Check the correct answer for whether or not your organization is affiliated with a Maryland State agency.
“Organization affiliated with a State agency” means a charitable organization which engages in activities for the benefit of the State agency or to further the purposes of the State agency, or both, through the use of contributions solicited from the public. If the organization circles ‘yes’ it must list the names of the agencies with which it is affiliated. If it answers ‘yes’ and it has raised more than \$100,000 in charitable contributions, it must also submit an Agreed Upon Procedures Report along with the organization’s annual registration. See what is required in an Agreed Upon Procedures Report at this link: <http://www.dsd.state.md.us/comar/getfile.aspx?file=01.02.04.20-1.htm>.

Affidavit section: Remember to sign the form and print the name of the person signing the document along the date this form was signed.



Exempt Organization Fund-Raising Notice

Office of the Secretary of State, State House, Annapolis MD 21401 Telephone: 410-974-5534

____ NEW ____ RENEWAL

If you cannot check one of the following statements, this is the wrong form. You will most likely need to file the Initial Registration Statement (COR-92). Please view the initial registration statement and instructions found on our Forms page.

1. Check One:

____ This organization is exempt from registering as a charitable organization because it did not receive more than \$25,000 in charitable contributions during the most recently completed fiscal year and does not have a professional solicitor. (Business Regulation Section 6-102(c)(1)(ii)(4))

--or--

____ The person or entity completing this form is exempt from registering as a charitable organization because solicitations are being made for a named individual and the gross amount is delivered to the individual. (Business Regulation Section 6-102(c)(1)(ii)(1))

2. Most recently completed fiscal year end is: _____ (month) _____ (year)

If first fiscal year not completed yet, when will first fiscal year end: _____ (month) _____ (year)

3. Name of Charitable Organization or Name of Individual for whom the fund-raising campaign is being conducted.

4. Employer I.D. Number of Charitable Organization or Social Security Number of Individual

_____ (Is this number a SSN? ____ Yes ____ No)

5. Street Address _____

6. City, State & Zip _____

7. County _____

8. Telephone Number _____

9. FAX Number _____

10. Email address _____

11. Purpose of Charitable Organization or Charitable Fund-raising

12. Have you received 501(c)(3) status from IRS? Check one (you can still complete this filing if you check "no"):
____ Yes ____ No ____ Pending

If you checked "yes", please submit a copy of your organization's tax determination letter issued by the Internal Revenue Service.

13. Methods of Fund-raising (check all that apply).

Mail Telephone Canisters Door-to-Door
 Website Email Social Media Other (please describe):

14. Name and address of individual with custody of financial records

15. Names and addresses of persons with final responsibility for custody and final distribution of contributions

16. Bank name and account number where contributions are deposited

17. If the filer is an organization, has it filed any of the following forms with the IRS? If so, please check the space.

990 990-EZ 990-N

If the organization has filed the 990 or 990-EZ with the IRS, please attach a copy of that to this form.
If the organization has filed the 990-N or none of the above with the IRS, please complete parts A and B.
If the filer is not an organization, please complete parts A and B.

A. Amount of contributions received in most recently completed fiscal year (*this should be the amount received in the most recently completed fiscal year noted on the first page of this form*) _____

B. Amount of contributions received to date in current fiscal year (*this should be the amount received to date, in the current fiscal year that is occurring at the time this form is being completed*) _____

18. Is your organization affiliated with any Maryland State agency (as defined in COMAR 01.02.04.01L)?

Yes No (If yes, and raised more than \$100,000 you must submit an Audit and Agreed upon Procedures Report with application)

If yes, list the name(s) of the Maryland State agencies with which you are affiliated (use a separate sheet of paper, if needed): _____

I do solemnly affirm under the penalties of perjury that the contents of this document are true to the best of my knowledge, information, or belief.
(Type or Print) Name of Individual or Chief Executive Officer of Organization

Name

Signature

Date