DO NOT STAPLE

STATE of WASHINGTON SECRETARY of STATE

Charities Program • 801 Capitol Way South • PO Box 40234 • Olympia, WA 98504-0234
Phone: 360-753-0863 • Fax: 360-664-4250 • E-mail: charities@secstate.wa.gov

SUPPLEMENTAL SOLICITATION REPORT (CHARITABLE ORGANIZATION)

FEE: $10.00

Make fees payable to "State of Washington"

☐ Check here to request **EXPEDITED MAIL SERVICE** *(optional)*. If checked, please enclose an additional **$20** fee.

PLEASE USE THIS FORM TO (check one):

☐ Report financial information that is not included in the organization's registration documents (e.g. multiple years)
☐ Correct the financial information reported on registration documents or to amend a previous submission
☐ Report financial information reflecting a change in fiscal or accounting year
☐ Submit a FINAL REPORT upon termination of fundraising activities in Washington State

Please complete entire form or write "n/a" if not applicable. Incomplete forms will not be accepted.
All documents must be typewritten or printed legibly in ink. **DO NOT staple or bind form or attachments.**

Organization's Full Legal Name:	**Registration Number:**

SECTION 1 - FINANCIAL INFORMATION

FEDERAL TAX RETURN INFORMATION

Did/will the organization submit a Federal tax return to the Internal Revenue Service for the fiscal/accounting year reported below? (check one) ☐ Yes ☐ No
If yes, check type of return: ☐ Form 990 ☐ Form 990 EZ ☐ Form 990PF ☐ 990-T ☐ 1120 ☐ Other: _____ (describe)
If no, check reason: ☐ Church/church-affiliated ☐ Government-affiliated ☐ Covered by group return ☐ Annual gross receipts less than $25,000 ☐ Organization not tax-exempt ☐ Other (describe): _____

REQUIRED ATTACHMENT

If the organization has/will file an IRS Form 990, 990EZ or 990PF with the Internal Revenue Service for the fiscal/accounting year reported below…a complete copy of the tax return **MUST** be provided with this report. Be sure to include Schedule A and all attachments except contributor lists/Schedule B. Do not attach the organization's bank statements or annual report. **DO NOT staple** or bind Form 990, 990EZ or 990PF, Schedule A, or their attachments.

NOTE: If the organization's tax return for the fiscal/accounting year reported below has not yet been completed, please contact our office for instructions. **DO NOT** submit the Supplemental Solicitation Report or filing fee without a copy of the Form 990, 990EZ or 990PF.

SOLICITATION REPORT

Please supply fiscal/accounting beginning/ending dates and complete line items 1 - 8 *(REQUIRED)*

Suggested guidelines for completing the Solicitation Report using the organization's federal tax return can be obtained at http://www.secstate.wa.gov/charities/charities_forms.aspx or by contacting the Charities Program directly.

Fiscal/accounting year begin date: (Mo/Day/Year)	**Fiscal/accounting year end date:** (Mo/Day/Year)
1. The total gross dollar value of all contributions received from solicitations: "Solicitations" include, but are not limited to, special events, sale of inventory, and amounts collected on behalf of the charitable organization by a commercial fundraiser or commercial coventurer.	$
2. The total gross dollar value of revenue from all other sources (not the result of a solicitation):	+ $

3. The total dollar value of gross receipts: "Gross receipts" include, but are not limited to, contributions, gross revenue from special events, sales of inventory, goods or services (including tickets to events), and all other revenue from solicitations, regardless of custody of funds. Amounts collected on behalf of the charitable organization by a commercial fundraiser or commercial coventurer must be included on line 3.	= $ ***(line 1 + line 2 = line 3)***
4. The total gross dollar value of expenditures used directly for charitable program services: *Payments to affiliates may be included if costs involved are not connected with the administrative or fundraising functions of the reporting organization.*	$
5. The total gross dollar value of expenditures used for administrative and fundraising: "Administrative and fund-raising costs" include, but are not limited to, the following expenses if not directly related to program services: salaries, wages, compensation, legal, accounting, occupancy, equipment costs, printing and publications, telephone, postage, supplies, travel, meetings, fees for services, and cost of goods or inventory sold that are not directly related to program services. Amounts paid to or retained by a commercial fundraiser or fundraising counsel must be included on line 5.	+ $
6. The total dollar value of program service, administrative and fundraising expenditures: Enter on line 6 the sum of the expenditures reported on lines 4 and 5. This includes, but is not limited to, amounts paid to or retained by a commercial fundraiser or fundraising counsel, amounts expended for charitable program services, administrative expenses, fees for services, and fundraising costs incurred by the charitable organization.	= $ ***(line 4 + line 5 = line 6)***
7. Beginning assets (gross):	$
8. Ending assets (gross):	$

CHARITY'S COMMENTS REGARDING SOLICITATION REPORT *(OPTIONAL)*

Attach additional information or provide an explanation, if any, which the organization believes would be of assistance in understanding the financial information provided in Solicitation Report or IRS tax return, or to provide context for reported information. Be sure to clearly label attachment as "Solicitation Comments".

SECTION 2 - SIGNATURE *(Required)*

By signing this report, the applicant: (a) certifies that the information contained in the application and in the attachments is accurate and true to the best of the applicant's knowledge; (b) irrevocably appoints the Secretary of State to receive process (notice of lawsuits) in non-criminal cases against the applicant, and under the conditions set out in RCW 19.09.305; and (c) certifies that neither the organization nor any of its officers, directors, and principals has been convicted of a crime involving charitable solicitations, nor been subject to permanent injunction or administrative order under the Washington Consumer Protection Act (Chapter 19.86 RCW) in the past ten years.

Signature of applicant	Printed name	Title	Date

This form may be signed by the President, Treasurer or a comparable officer or, in the absence of officers, person responsible for the organization.

NOTE: Expedited Mail Service is available for registration documents requiring 48-hour turnaround. To utilize Expedited Mail Service, please enclose **$20** per registration document (in addition to regular fees), check (√) the box on page one of this document, and write the word **"EXPEDITE"** in bold letters on the outside of the envelope. Your request will be processed and mailed within **TWO** business days of receipt by the Charities Program.

Print Form