## **Questionnaire for Soliciting Nonprofit Organizations**

## **BBB Institute for Marketplace Trust Serving Northern Colorado and Wyoming**

Organization Name:			
Address:			
Phone: ()	Fax : ()_		
Website:	Email:		
Use of Information To assist the BBB Institute for inquiries about your organiz materials. Attach separate si made available upon reques from voluntary disclosure of	ation, please complete the heets as necessary. All item t to inquirers. BBB believes	following questionnaire and as provided will be considere both the public and soliciting	I submit requested ed public information and ag organizations benefit
If your organization is a char to determine if your organiz note: It is important to subm charity evaluation is comple BBB. Omission of any reques meeting some of the mention provided with a draft copy for	ation meets the 20 voluntaint all requested information ted, it will be based on the sted information or item(s) and voluntary charity standard	ry BBB Standards for Charity n and the questionnaire as of information received with the could affect this evaluation adards. If a report is written,	Accountability. Please one complete package. If a nis package or on file with and may result in not
If your organization is in the IRS Form 990, please submit forward the more current re	the latest available copy of	· · · · · · · · · · · · · · · · · · ·	
Use of the Better Business B	ureau Name		
The name "Better Business B Council of Better Business B Bureau service marks.			
Completion of this form and of endorsement, approval or contribution decisions.			
Signing this form indicates y submitted information. In ac name, evaluation conclusion for Charity Accountability.	ldition, by signing below yo	ur organization agrees that i	it will not use the BBB
Signature		Date	

Organization	
	ny questions, please contact BBB at <a href="mailto:charity@wynco.bbb.org">charity@wynco.bbb.org</a> or <a href="mailto:888-253-3385">888-253-3385</a> .  Provide a copy of the following items.
Enclosed? Yes No	
1. summarizes	Annual Report (Annually produced fact sheet, brochure or other publication that
3411111411263	your mission, programs, finances and governance for the past year.) If not available, please clarify
2.	Latest audited Financial Statements (If not audited, send unaudited/statements) If not available, please clarify
3.	Complete IRS Form 990 (with Schedule A, if applicable) If not available, please clarify
4.	Budget for the current fiscal year in progress If not available, please clarify
5.	Fundraising Contracts/Agreements Please enclose a copy of the complete written fundraising agreement with each fundraising firm(s) or consultant(s) used in the past year.
6.	Board Roster, specifying officers (i.e., who serves as chairman, secretary, treasurer) and professional affiliations of each board member (i.e., John Jones, marketing director, XYZ Bank)
7.	Fundraising Requests (check all fundraising methods used in the past year and include a copy of all versions of appeals used for each applicable item.)  a)direct mail appeals b)telephone appeal scripts c)invitations to fundraising events d)print advertisements (newspapers, magazines, etc.) e)scripts of television or radio appeals f)grant proposal (only one recent sample needed for this) g)planned giving h)Internet appeals i)other, please specify

it catalogs, etc.).

a) If applicable, enclose copies of such promotions from the past year.

b) Did your organization have any written agreements/contracts with these companies? Yes \_\_\_\_ No

If yes, provide copies of these arrangements. If there are any privacy restrictions regarding these marketing arrangements, please contact the BBB.

\_\_ 9.Board-Approved Conflict of Interest Policy.
If not available, please clarify\_\_\_\_\_\_

Yes No	1?
:	10. Informational brochures and other materials that describe your organization's activities.
	11. IRS Determination Letter (Two-page letter that confirms your tax-exempt status.)
	If not available, please clarify
	12. Bylaws
	13. Articles of Incorporation
	14. If applicable, Agreements with Affiliate(s) and/or a National Office
15. Year and	d State Incorporated
. State your	organization's purpose(s).
	arate sheet, summarize your organization's principal program service activities in 250 words or ective language and include appropriate statistics.
ess. Use obj 8. Have theo ast year? (F	
ess. Use obj 8. Have theo ast year? (F	ective language and include appropriate statistics.  re been any significant changes in your organization's purpose(s) and/or program activities in to or example, amending the official stated mission, adding or terminating a major program, etc.)
ess. Use obj 8. Have theo ast year? (F	ective language and include appropriate statistics.  re been any significant changes in your organization's purpose(s) and/or program activities in the organization or example, amending the official stated mission, adding or terminating a major program, etc.)
ess. Use obj 8. Have the ast year? (F Yes	ective language and include appropriate statistics.  re been any significant changes in your organization's purpose(s) and/or program activities in to or example, amending the official stated mission, adding or terminating a major program, etc.)
8. Have the 8. Have the ast year? (F Yes	re been any significant changes in your organization's purpose(s) and/or program activities in too example, amending the official stated mission, adding or terminating a major program, etc.)  No If yes, explain  organization use any outside Fundraising firm(s) and/or consultant(s) in the past year?  No
ess. Use obj  8. Have there ast year? (F Yes  9. Did your Yes If yes, a	re been any significant changes in your organization's purpose(s) and/or program activities in too example, amending the official stated mission, adding or terminating a major program, etc.)  No If yes, explain  organization use any outside Fundraising firm(s) and/or consultant(s) in the past year?

	C.	Was the board of directors informed of the financial terms of these agreements Yes No	?
20.		at is the scope of your organization's fundraising activities? ional, Regional, or Local?	

21.	Does your organization have affiliates, chapters, subsidiaries and/or other related entities?  Yes No  If yes, (a) provide a list of the names and addresses of these organizations and/or businesses, and (b) briefly describe the nature of the relationship with the affiliates and/or other entities listed. In answering this question, describe any program, financial, fundraising and/or governing board relationship.
22.	In regard to your organization's fundraising activities, does any city, county or state either (a) have any currently pending legal action against your organization and/or (b) have any concluded legal action within the past three years?  Yes No  If yes, name the places and briefly describe the nature and status/resolution of the action(s).
23.	If applicable, provide the following information based on your most recent financial statements:  a) total amount of donated goods and/or services included as part of income, b) total amount of donated goods and/or services that were recognized as part of expenses. Also, identify the portion of this amount that was allocated to fundraising, administration and each major program service expense category, c) breakdown that shows the nature of recognized in-kind expenses (e.g., how much of this total consisted of food, clothing, medical equipment, pharmaceuticals, legal services, accounting services, etc.) and d) briefly describe how your organization determined the value of these in-kind contributions.
	d) briefly describe flow your organization determined the value of these in-kind contributions.
24.	Do any compensated staff members serve as voting members of the board?  Yes No
	If yes, provide name(s), title(s) and total compensation during the past fiscal year?
25.	Are any members of the board of directors relatives of fellow board members or staff members of the organization?  Yes No  If yes, attach schedule identifying the name(s), title(s) and relationship(s).
	Other than paid staff members who may serve on the board, are there any other members of the board of ectors who receive some type of direct compensation (for example, fixed expense accounts or honoraria)?  Yes No  If yes, answer (a) and (b) below.
	(a) Describe the nature of the compensation and identify the board member(s) and amount(s) involved.
	(b) Are any board members related (for example, spouse, parent, sibling or child) to individual(s) named in (a) above.
	27. Does your organization have a board policy to appraise the CEO's performance at least once every two years?  Yes No
	28. Does your organization have a board policy of assessing, no less than every two years, the organization's performance and effectiveness and of determining future actions required to achieve its mission?  Yes No If yes, provide a copy of the policy.
	29. Does your organization submit a written report to its governing body outlining the results of the aforementioned performance and recommendations for future actions?  Yes No
	30. Does the board of directors formally approve the annual budget? Yes No
	31. In the past year, has your organization purchased goods and/or services from either:

		a. any member of the board and/or professional staff?
		b. any firm, organization or institution with which this member of his/her direct family relation is affiliated?
	1.	Yes No
		If yes, on a separate sheet: a) provide names and titles of individuals, and identify their relationship to the related party, b) identify goods or services purchased, c) list amounts paid for such goods or services, d) identify the size of the transaction relative to like expenses of the charity (for example, if the transaction is for printing expenses, what portion of the total printing expenses in the past year were purchased through the board member-related entity?) e) state if at least two other competitive bids were considered, f) state if the interested board member(s) participated in the vote to hire the related firm(s), g) describe if the transaction is one-time, recurring or ongoing, and h) identify any other steps taken to ensure arm's length transactions.
32		the past year, has your organization made any grants, contributions or loans to
		any member of the board member and/or professional staff, or to
	υ.	any firm, organization or institution with which this member or his/her direct family relation is affiliated? Yes No
		If yes, on a separate sheet:  a) provide names and titles of individuals, and identify their relationships to the related party, b) provide details of the arrangements, c) list the amount of the award or loan, d) identify the size of the transaction relative to other grants, contributions or loans made by the charity (for example, if the transaction is for grants, what portion of the total grant expenses in the past year were purchased through the board member related entity?), e) state if the interested board member(s) participated in the vote to hire the related firm(s), f) describe if the transaction is one-time, recurring or ongoing, and g) identify any other steps taken to ensure arm's length transactions.
	33.	. Total number of (full-time plus part-time) employees:
	34.	. Identify the past year's total compensation for your organization's chief paid executive. This total compensation should include annual salary and, if applicable, benefit plans, expense accounts and other allowances. If this person is not the highest-paid executive, also provide the name, title and compensation for that person. (It is not necessary to answer this question if all this information is contained within an IRS Form 990 that is enclosed with this questionnaire.
		. If your organization has a website, identify the Internet address for the specific page on the ebsite where the following information can be found, where applicable:
	An	nnual report:
		ganization's mission statement:
	Pro	ogram service accomplishments of the past year:
	Мс	ost recent roster of the officers and members of the board of directors:
	Мс	ost recent financial information:
		ost recent IRS Form 990:
		onation/contribution information:
		ganization's mailing address:
		ternet Privacy Policy:

36. Regarding written appeals; does you other donor information with outside organized Yes No  If yes, provide solicitations from the want their information shared outside	ganizations? e past year indica	ting how donors o	·		
Indicate how often this option is offe 37. Does the board of directors receive,			 documents?		
Most recent IRS Form 990 Yes No Most recent audited financial statements Yes No Auditor's management letter (if one was issued) Yes No It there is no audited statement, then the charity's unaudited financial statement Yes No					
38. Has your organization received any of Bureau in the past three years?  Yes No  If yes, identify from which BBB and		•		ness	
39. On the following chart, list the dates indicate the number of voting members time of the meeting. Do not include mee that meets between meetings of the full included in the meeting attendance char member(s) and how they participated (for	who attended the etings of the exect board. Attach add t did not participa	e meeting and the utive committee o ditional sheets as ate in person, on a	total voting mem or other interim go necessary. If any a separate sheet,	bership at the overning body members identify the	
Board of Directors Meeting Attendance	Fiscal Year	Ended: Month	Year		
Name of Board Member	Dates of Board of Directors Meetings				