

State of Connecticut Department of Consumer Protection 450 Columbus Blvd, Ste 801 Hartford, CT 06103-1630 Email: <u>dcp.publiccharities@ct.gov</u> For Official Use Only

Connecticut Charitable Organization Reinstatement Form

Only use this form if reinstating more than 6 months after expiration date

To be eligible for reinstatement, all applicants must meet the following requirements:

- All IRS 990 reports or business tax returns must have been completed and filed with the IRS; and,
- Organizations with gross revenue between \$500,000 and \$1,000,000 as indicated on your 990 or business tax return, must have an independent audit report or review report completed by an independent certified public accountant. Organizations with gross revenue greater than \$1,000,000 as indicated on your 990 or business tax return, must have an independent audit report completed by an independent certified public accountant.
- An approved reinstatement application will only activate the registration to your next renewal cycle.

CT Public Charity Registration Number to be Reinstated	Expiration Date of Registration

Organization Information

Name of Charitable Organization						
Street Address			City	State	Zip Code	
FEIN	Fiscal Year End	Emai	l Address to be used for all correspondence			
Mailing Address (if different than above)						
Name						
Street Address			City	State	Zip Code	

Check the applicable box for your organization and complete the questions.

Organization has <u>NOT</u> been soliciting in Connecticut. You will need to attest to the following: A non-refundable fee of <u>\$50.00</u> must accompany this notice. Checks should be made payable to *"Treasurer, State of Connecticut."* (No late fees required, only <u>\$50.00</u> registration fee). Make any necessary address or email changes on this form and return this signed reinstatement notice and applicable attachments with the fee to the above address.

- 1. Did your organization file the current year's IRS 990, 990 EZ, 990N, 990PF with the IRS? 🗌 Yes 🗌 No
- 2. Select the range that best describes the total gross revenue the organization received in whole dollar amounts on their last IRS 990 form.

Less than \$500,000

Between \$500,000 and \$1,000,000

Greater than \$1,000,000

3. If gross revenue are greater than \$500,000, did the organization complete an independent audit report for this renewal period? Yes No

Organization <u>HAS BEEN</u> soliciting in Connecticut. You will need to submit to the following:						
A non-refundable fee of $$50.00$ must accompany this notice. Checks should be made payable to " <i>Treasurer</i> , <i>State of Connecticut</i> ." Add an additional $$25.00$ for each full month this notice is late after the last expiration date, with a maximum late fee of $$300.00$ (late fee is required). Make any necessary address or email changes on this form and return this signed reinstatement notice and applicable attachments with the fee to the above address.						
1.	Include IRS Form(s) 990, 990EZ, 990N or 990PF for all the year(s) since the last expiration date in which solicitations were conducted. (**Required**) Do not submit 990's that were provided during active years.					
2.	Include all audit reports if the IRS Form 990 reported more than \$500,000 in gross revenue for all the years being provided.					
3.	Select the range that best describes the total gross revenue the organization received in whole dollar amounts on their last IRS 990 form.					
	Less than \$500,000					
	Between \$500,000 and \$1,000,000					
	Greater than \$1,000,000					

Business Questions – All questions <u>must</u> be answered.

1.	Has the organization's FEIN changed since your last application? Yes No
2.	Has the organization's Fiscal Year End changed since your last application? Provide the month and day of your fiscal year end which your organization has selected
3.	Has any government agency taken any action against your organization, including, but not limited to: (a) revocation of any registration or license, (b) imposition of any fine or payment of any forfeiture, or (c) issued any warning or notice? \Box Yes \Box No If yes, circle each action (a, b or c) as it applies and attach an explanation with the submission of this reinstatement notice.
4.	Has there been any change in your tax-exempt status in the past 18 months or has the IRS issued you any warnings? \Box Yes \Box No \Box Do Not hold tax exempt status, does not apply. If yes, attach an explanation with the submission of this reinstatement notice.

Certification

<u>One authorized person</u> from the organization <u>must</u> sign this renewal notice and attestation on behalf of the organization.

I hereby certify under penalty of false statement that I am authorized to sign this document for the organization and that the organization completed and filed its financials with the IRS, and that the information provided is true and complete to the best of my knowledge.

Signature

Printed Name

Date

State law requires one signature