

NONPROFIT ANNUAL CORPORATE DISCLOSURE FORM

Fiscal Year Period: 20____ - 20____

SECTION I: CORPORATE INFORMATION

LEGAL NAME OF ORGANIZATION

BN / TAX ID NUMBER

PHYSICAL ADDRESS

CITY

STATE

ZIP CODE

STATE OF INCORPORATION

DATE OF INCORPORATION

WEBSITE URL

SECTION II: OFFICERS, DIRECTORS, AND KEY EMPLOYEES

FULL NAME	TITLE / OFFICE HELD	EMAIL ADDRESS	COMPENSATION (IF ANY)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

SECTION III: FINANCIAL SUMMARY

TOTAL GROSS REVENUE

TOTAL PROGRAM EXPENSES

TOTAL ADMINISTRATIVE EXPENSES

NET ASSETS / FUND BALANCES (END OF YEAR)

SECTION IV: GOVERNANCE & COMPLIANCE

- Has the organization adopted a written Conflict of Interest Policy?
- Has the organization adopted a written Whistleblower Protection Policy?
- Were the financial statements of the organization audited or reviewed by an independent accountant?

If you answered "No" to any of the above, or require space to disclose transactions with interested persons, please explain below:

SECTION V: CERTIFICATION AND SIGNATURE

Under penalties of perjury, I declare that I have examined this annual corporate disclosure, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.

AUTHORIZED OFFICER SIGNATURE

DATE

PRINTED NAME

TITLE / POSITION