

ARCHS Prospective Funded Partner Questionnaire

Organization Information

1. Legal name of organization (as shown on your IRS letter of determination)*

2. Website

3. Address Information

Street Address *

Apt/Suite/Office

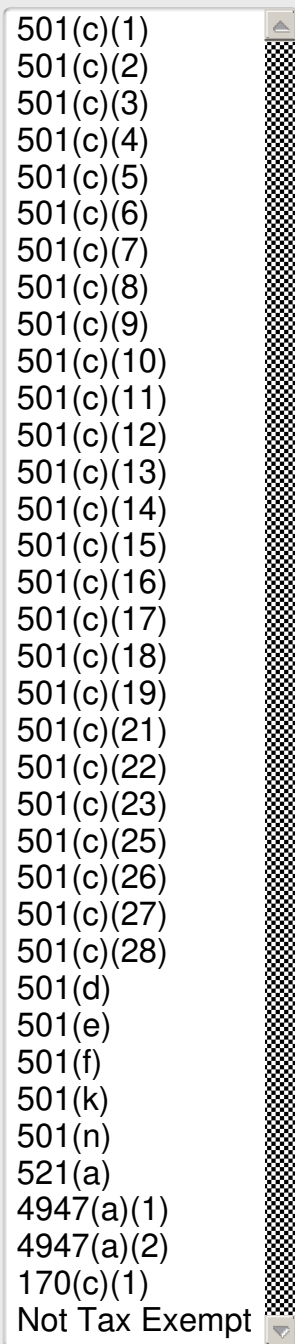
City *

State *

Zip *

Phone Number *

4. Tax Exempt Status *

A vertical dropdown menu with a list of tax exemption codes. The list includes 501(c)(1) through 501(c)(28), 501(d), 501(e), 501(f), 501(k), 501(n), 521(a), 4947(a)(1), 4947(a)(2), 170(c)(1), and Not Tax Exempt. The menu has a scroll bar on the right side.

501(c)(1)
501(c)(2)
501(c)(3)
501(c)(4)
501(c)(5)
501(c)(6)
501(c)(7)
501(c)(8)
501(c)(9)
501(c)(10)
501(c)(11)
501(c)(12)
501(c)(13)
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501(c)(15)
501(c)(16)
501(c)(17)
501(c)(18)
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501(c)(22)
501(c)(23)
501(c)(25)
501(c)(26)
501(c)(27)
501(c)(28)
501(d)
501(e)
501(f)
501(k)
501(n)
521(a)
4947(a)(1)
4947(a)(2)
170(c)(1)
Not Tax Exempt

Executive Director Information

5. Executive Director

First Name *

Last Name *

Title *

Email Address *

Phone Number *

Board President Information

6. Board President

First Name *

Last Name *

Title *

Email Address *

Phone Number *

Additional Information

7. Who is your fiscal agent? *

8. How did you find out about ARCHS? *

9. Primary reason for contacting ARCHS *

10. Organization's mission statement *

11. Brief description of organization *

12. Total annual budget *

13. Total number of employees *

14. Fiscal year start date *



15. Geographic area(s) served (include specific counties) *

16. Target population(s) served (e.g. youth, seniors, etc.) *

17. Program focus area(s) *

- ☐ Early Childhood
- ☐ School Age
- ☐ Adult/Community Education

18. Community needs/problems addressed by your organization *

19. List current funders *

20. List key partnering organizations *

21. List memberships in a giving federation (e.g. United Way, Arts & Education Council, Jewish Federation, etc.)

Agreement

Agreement/Understanding of Questionnaire

I certify to the best of my knowledge, that all information included in this questionnaire is correct. The tax exempt status of this organization is still in effect. If a grant is awarded to this organization in the future, then the proceeds of that grant will not be distributed or used to benefit any organization or individual supporting or engaged in unlawful activities.

In compliance with the USA Patriot Act and other counterterrorism laws, I certify that all funds that may be received from this funder in the future will be used in compliance with all applicable anti-terrorist financing and asset control laws, statutes, and executive orders.

I understand that this is not a promise or agreement with ARCHS to receive funding. ARCHS will review and maintain this information for future reference. ARCHS will execute a separate performance based contract with my organization if funds are awarded to my organization.

22. I certify that neither the organization nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any State or Federal department or agency. *

☐ I agree

23. Signature, Executive Director *

[illegible]

Signature of _____

Thank You!

Thank you for letting us know about your organization. Currently, we do not have any funding opportunities available. We will keep your information on file for future reference. Please follow ARCHS' website (stlarchs.org) and our social media ([stlarchs](#)) to stay connected.