

Mail To:

Minnesota Attorney General's Office
Charities Division
445 Minnesota Street, Suite 1200
St. Paul, MN 55101-2130

Website Address:

www.ag.state.mn.us/charity

STATE OF MINNESOTA

**PROFESSIONAL FUNDRAISER
REGISTRATION STATEMENT
INSTRUCTIONS**

(Pursuant to Minn. Stat. § 309.531)

WHO MUST FILE

Any professional fundraiser that solicits contributions on behalf of a charitable organization in Minnesota must file a Registration Statement with the Minnesota Attorney General's Office. See Minn. Stat. § 309.531 subd. 1.

A professional fundraiser is anybody who, for financial compensation or profit, performs for a charitable organization any service in connection with the solicitation of contributions in this state. This includes any person who for compensation plans, manages, advises, consults, or prepares materials for, or with respect to, the solicitation in this state of contributions for a charitable organization. See Minn. Stat. § 309.50 subd. 6.

“Solicit” and “solicitation” have the meanings set forth in Minn. Stat. § 309.50 subd. 10 and include oral or written requests. “Contribution” has the meaning set forth in Minn. Stat. § 309.50 subd. 5 and includes the promise or grant of any money or property of any kind or value, excluding government grants. “Contribution” also includes the difference between the direct cost of goods and services and the price at which a charitable organization or any person acting on its behalf resells those goods and services to the public.

Please refer to the full definitions set forth in Minn. Stat. § 309.50 when completing your forms.

WHEN TO FILE

A professional fundraiser must register with the Minnesota Attorney General's Office prior to commencing solicitations on behalf of a charitable organization in Minnesota.

Solicitation prior to registration may result in the imposition of civil penalties up to \$25,000 for each violation of Minn. Stat. ch. 309. Each registration is effective for a period of not more than 12 months commencing on the date of registration and expiring on April 30th following the date of registration. See Minn. Stat. 309.531 subd. 1.



PROFESSIONAL FUNDRAISER REGISTRATION STATEMENT INSTRUCTIONS (Continued)

HOW TO FILE

This form may be submitted via email and the fee may be paid electronically.

- The form and all attachments should be emailed to *charity.registration@ag.state.mn.us*. The email and attachments can be **no larger than 25 MB**. The subject line of the email must contain the organization's name. If the materials you are submitting are more than 25 MB, submit the attachments in separate emails properly labeled in the subject line (e.g., email 1 of 3).
- Documents must be in PDF format and named in an identifying manner (e.g., PFR Registration Statement).
- You will receive an automatically generated confirmation email. Receipt of the email confirms only that this Office received your submission and is not an attestation regarding the validity or completeness of the submitted materials.
- You may pay the \$200 registration fee and/or \$300 late fee via credit card at *www.ag.state.mn.us/Charity/CharFees.aspx*, or you may submit a check via U.S. mail. If paying by check, make the check payable to "State of Minnesota."

PLEASE NOTE

If submitting these forms via mail, please do not use staples.

- **Include all required attachments.** Registration statements that fail to include all required attachments will be considered deficient and registration will not be effective until all required materials are received by the Minnesota Attorney General's Office. You will be informed of your registration status by letter from the Minnesota Attorney General's Office.
- **File this registration statement on or before April 30 (if renewing registration) or before soliciting in Minnesota (if registering for the first time).** Failure to file on time will result in a late fee of \$300. This late fee shall be in addition to the \$200 registration fee.
- **NOTICE: All information and documentation provided as part of registration and reporting shall be public records.**

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STATE OF MINNESOTA

**PROFESSIONAL FUNDRAISER
REGISTRATION STATEMENT**



Website Address:

www.ag.state.mn.us/charity

(Pursuant to Minn. Stat. § 309.531)

_____ Name of Professional Fundraiser	_____ Telephone and Fax Number of Professional Fundraiser
_____ Street Address of Professional Fundraiser	_____ Email Address of Professional Fundraiser
_____ City, State, and Zip Code of Professional Fundraiser	_____ Website of Professional Fundraiser

1. List all other names and addresses under which this Professional Fundraiser has been known or operated or is known or operates:

2. Legal Form of Professional Fundraiser:

- | | |
|--|---|
| <input type="checkbox"/> Corporation | <input type="checkbox"/> Partnership |
| <input type="checkbox"/> Sole Proprietorship | <input type="checkbox"/> Unincorporated Association |
| <input type="checkbox"/> Limited Liability Company | <input type="checkbox"/> Other: _____ |

Identify the state in which registrant is organized or incorporated: _____

Date organized or incorporated: _____

4. List the name and home address of **all** organizers, owners, members, partners, or shareholders holding 25% or more of the ownership shares or stock in the registered entity. Attach a list if more space is needed.

5. Names, addresses, and titles of **all** officers, directors, and key employees. Attach a list if more space is needed.

a. Name and title: _____

Address: _____

b. Name and title: _____

Address: _____

c. Name and title: _____

Address: _____



PROFESSIONAL FUNDRAISER REGISTRATION STATEMENT
(Continued)

6. Have any of the persons listed in response to Numbers 4 or 5 ever been a party to any litigation, criminal or civil, involving claims of fraud, conversion, mismanagement of funds, breach of fiduciary duty, breach of contract, or any other claim involving dishonesty?

Yes No If yes, attach a detailed explanation as to date, court, claim and disposition.

7. Is the professional fundraiser registered to solicit contributions in other states?

Yes No If yes, attach a list of all other states.

8. Has the professional fundraiser’s right to solicit contributions ever been denied, suspended, limited, revoked, or enjoined by any state or by any court or are there any proceedings requesting such relief?

Yes No If yes, attach a detailed explanation.

9. List **all** charitable organizations for which registrant is currently obligated to act as a professional fundraiser. For each, provide **complete legal name, EIN, and address**, and indicate whether the contract is currently on file or attached. Attach a list if more space is needed.

	Organization Name, Address, and EIN	Contract Attached		Contract On File	
		Yes	No	Yes	No
1.		Yes	No	Yes	No
2.		Yes	No	Yes	No
3.		Yes	No	Yes	No

9a. Have any of professional fundraisers’ employees, officers, or directors ever been employed by and/or affiliated with any of the organizations identified in response to number 9 within the last five (5) years?

Yes No If yes, identify the employee(s) and the related organization(s):

10. Does the professional fundraiser actively solicit (rather than consult or advise) for any of the organizations identified in response to number 9?

Yes No If no, identify the paragraph(s) in the contract that describe(s) the professional fundraiser’s activities on behalf of each organization: _____



PROFESSIONAL FUNDRAISER REGISTRATION STATEMENT (Continued)

11. Does the professional fundraiser have custody of or access to contributions (including both property and/or money) from a solicitation at any time?
- Yes No If yes, a surety bond is required. *See* Number 14 on this form.
12. Does the professional fundraiser anticipate that any of the services it will provide to charitable organizations will be provided by another entity under a subcontractor arrangement?
- Yes No If yes, please attach a list identifying the charity and the subcontractor's name and address.
- 12a. If yes, is the subcontractor registered with the Attorney General's Office?
- Yes No
13. **ATTACH** a copy of every contract between each charitable organization and the professional fundraiser. **If additional contracts are entered into after the filing of this registration statement, submit a copy of the new contract at that time.** Each contract must:
- a. Be in writing;
 - b. Contain information which will enable the Minnesota Attorney General's Office to identify the services the professional fundraiser is to provide, including whether the professional fundraiser will at any time have access to or custody of contributions; and
 - c. The contract must disclose the percentage or a reasonable estimate of the percentage of the total amount solicited from each person which will be received by the charitable organization.
 - For example, a professional fundraiser and a charitable organization estimate that a solicitation campaign will yield \$10,000 in contributions. The charitable organization agrees to pay the professional fundraiser a flat fee of \$2,500. In this example, the estimated percentage of funds received by the charitable organization from the campaign is 75%. Unless a charitable organization pays a professional fundraiser nothing, the estimated percentage retained by the charitable organization is unlikely to be 100%.
14. **ATTACH** a fully executed bond for \$20,000 on the appropriate form, **if** the professional fundraiser at any time will have custody of or access to contributions (which includes both money and property) from a solicitation.
15. **ATTACH** a completed solicitation notice on the appropriate form, **if** the professional fundraiser or any person the professional fundraiser employs, procures, engages, or solicits contributions in Minnesota.
16. **ATTACH** a financial report for previous campaigns in Minnesota **if** the professional fundraiser previously solicited contributions in Minnesota, unless the report has already been filed. The financial report should be on the form available at the Minnesota Attorney General's Office's website.



PROFESSIONAL FUNDRAISER REGISTRATION STATEMENT
(Continued)

SIGNATURE

I hereby certify that I am authorized to sign this Registration Statement and that the information provided is true and complete to the best of my knowledge.

Date _____

Name/Title (Print)

Address

Phone Number

Signature

State/County of _____

Signed and sworn to (or affirmed) before me on this ____ day of _____, _____

(Seal)

(signature of notarial officer)

Title (and rank)
My commission expires on: