

**Office of the Attorney General of the Commonwealth of Massachusetts
Non-Profit Organizations/Public Charities Division**

**Boston Marathon Bombings Informational Survey
(for Charities)**

Name of business or organization: _____

AG number (if registered): _____

EIN number: _____

1. Identify the dollar amount of donations and pledges that your organization has received to date in response to the Boston Marathon bombings (you may approximate if necessary):

2. Will these funds be used solely to benefit those affected by the Boston Marathon bombings?

_____ YES _____ NO

3. If your answer to question 2 is no, please respond to the following:
 - a. What portion of funds that you have received will be used to benefit those affected by the Boston Marathon bombings?

 - b. What portion will be used for other purposes?

 - c. What are the other purposes for which those funds will be used?

4. Approximately how much has your organization used to benefit those affected by the Boston Marathon bombings?

5. What goods or services has your organization provided to those affected by the Boston Marathon bombings?

6. What goods or services does your organization expect to provide to those affected by the Boston Marathon bombings in the future?

7. What populations or class of victims are being served by your organization in response to the Boston Marathon bombings?

8. Has your organization provided funding to other organizations for purposes related to the Boston Marathon bombings?

___ YES ___ NO

9. If your answer to question 8 is yes, please respond to the following:

a. Which organizations have received funding from your organization, and in what amounts, approximately?

Name of Organization	Amount

b. How did your organization determine the need for funding?

10. Has your organization received funding from other organizations for purposes related to the Boston Marathon bombings?

___ YES ___ NO

11. If your answer to question 10 is yes, please list from which organizations your organization has received funds and in what amounts, approximately:

Name of Organization	Amount

12. Has your organization provided, or does it intend to provide, direct financial assistance to individuals, families, or businesses for harm or injury associated with the Boston Marathon bombings?

____ YES ____ NO

13. If your answer to question 12 is yes, please respond to the following:

- a. What is the approximate dollar amount that your organization has provided to date?
- b. Approximately how much direct financial assistance does it expect to provide in the future?
- c. How does your organization determine the need for assistance?

14. Has your organization established a plan for how to use any surplus funds not used to support those affected by the Boston Marathon bombings?

____ YES ____ NO

- a. If you answered "yes," please describe that plan.

15. To your knowledge, has there been any outside commercial activity conducted whereby funds were raised for your organization for purposes related to the Boston Marathon bombing? Examples of commercial activity include fundraising events, retail store or restaurant promotions, specific products being created and sold, etc.

____ YES ____ NO

16. If your response to question 15 is yes, please provide the following information regarding each outside commercial activity:

Commercial Activity	Date(s) of activity	Total amount raised through the activity	Have you received all of those funds? (Y/N)	Do you have a contract with the commercial fundraiser?

Name and title of representative

Date

Primary telephone number for contact person: _____

Primary email address for contact person: _____

SAMPLE