

Group Rulings Questionnaire

This questionnaire asks for information concerning your organization's group exemption ruling, including your relationship with your subordinates and the manner in which you and your subordinates satisfy applicable Form 990-series filing requirements. The questionnaire asks about a range of practices that some group ruling holders engage in with their subordinates. Some questions may not be applicable to your organization. If a question does not apply to your organization, answer "N/A" (*not applicable*).

Part I - Information About Your Organization

Name of organization	Employer Identification Number (EIN)
Organization's website address (URL)	Group exemption number
Full name and title of person completing this form	Contact phone number

1. Indicate under which section of the Internal Revenue Code you are tax exempt

- | | | |
|--|---|---|
| <input type="checkbox"/> Section 501(c)(3) | <input type="checkbox"/> Section 501(c)(4) | <input type="checkbox"/> Section 501(c)(5) |
| <input type="checkbox"/> Section 501(c)(6) | <input type="checkbox"/> Section 501(c)(7) | <input type="checkbox"/> Section 501(c)(8) |
| <input type="checkbox"/> Section 501(c)(9) | <input type="checkbox"/> Section 501(c)(10) | <input type="checkbox"/> Section 501(c)(14) |
| <input type="checkbox"/> Section 501(c)(19) | <input type="checkbox"/> Don't know | |
| <input type="checkbox"/> Other (<i>describe</i>) _____ | | |

2. If you selected section 501(c)(3) in question 1, indicate your private foundation or public charity classification from the list below.

Skip to question 5 if you did not select section 501(c)(3) in question 1

- | | | |
|--|---|--|
| <input type="checkbox"/> Section 509(a)(1) | <input type="checkbox"/> Section 509(a)(2) | <input type="checkbox"/> Section 509(a)(3) |
| <input type="checkbox"/> Section 509(a)(4) | <input type="checkbox"/> Private foundation | <input type="checkbox"/> Don't know |
| <input type="checkbox"/> Other (<i>describe</i>) _____ | | |

3. If you selected section 509(a)(1) in question 2, indicate the subsection under which you qualify below. **Skip to question 4 if you did not select section 509(a)(1) in question 2**

- | | | |
|---|---|--|
| <input type="checkbox"/> Section 170(b)(1)(A)(i) | <input type="checkbox"/> Section 170(b)(1)(A)(ii) | <input type="checkbox"/> Section 170(b)(1)(A)(iii) |
| <input type="checkbox"/> Section 170(b)(1)(A)(iv) | <input type="checkbox"/> Section 170(b)(1)(A)(v) | <input type="checkbox"/> Section 170(b)(1)(A)(vi) |
| <input type="checkbox"/> Don't know | | |

4. If you selected section 509(a)(3) in question 2, indicate the type of status that applies to your organization below. **Skip to question 5 if you did not select section 509(a)(3) in question 2**

- | | | |
|--|-------------------------------------|--|
| <input type="checkbox"/> Type I | <input type="checkbox"/> Type II | <input type="checkbox"/> Type III (<i>Functionally Integrated</i>) |
| <input type="checkbox"/> Type III (<i>Non-Functionally Integrated</i>) | <input type="checkbox"/> Don't know | |

5. Has your tax-exempt status ever been revoked based on an examination

- | | | |
|------------------------------|-----------------------------|-------------------------------------|
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Don't know |
|------------------------------|-----------------------------|-------------------------------------|

a. If "yes" to question 5, provide the date your tax-exempt status was revoked in the format MM/DD/YYYY, for example 06/01/2009 (*for June 1, 2009*). **If you don't know the exact date your organization was revoked, write "Don't know"**

Date (MM/DD/YYYY) _____

6. Has your tax-exempt status ever been automatically revoked for not filing a required return (*Form 990-series*) or notice (*Form 990-N*) for three consecutive years

- | | |
|------------------------------|-----------------------------|
| <input type="checkbox"/> Yes | <input type="checkbox"/> No |
|------------------------------|-----------------------------|

a. If "yes" to question 6, provide the date that your tax-exempt status was revoked in the format MM/DD/YYYY, for example 11/15/2010 (*for November 15, 2010*). **The date should be no earlier than 05/15/2010**

Date (MM/DD/YYYY) _____

Part II - Information About Your Subordinates

7. Do you currently have any subordinates in your group exemption ruling (*hereafter "group"*)

Yes No

a. If "yes" to question 7, how many subordinates are currently in your group? **The response needs to be in numeric format**

8. Indicate under which section(s) of the Internal Revenue Code your subordinates are tax exempt. **Check all that apply**

Section 501(c)(3) Section 501(c)(4) Section 501(c)(5)
 Section 501(c)(6) Section 501(c)(7) Section 501(c)(8)
 Section 501(c)(9) Section 501(c)(10) Section 501(c)(14)
 Section 501(c)(19) Don't know
 Other (*describe*) _____

9. If you selected Section 501(c)(3) in question 8, indicate the types of foundation or public charity classifications that are represented by your subordinates. **Check all that apply. Skip to question 12 if you did not select section 501(c)(3) in question 8**

Section 509(a)(1) Section 509(a)(2) Section 509(a)(3)
 Section 509(a)(4) Private foundation Don't know
 Other (*describe*) _____

10. If you selected section 509(a)(1) in question 9, choose the subsection under which your subordinates qualify below. **Check all that apply. Skip to question 11 if you did not select section 509(a)(1) in question 9**

Section 170(b)(1)(A)(i) Section 170(b)(1)(A)(ii) Section 170(b)(1)(A)(iii)
 Section 170(b)(1)(A)(iv) Section 170(b)(1)(A)(v) Section 170(b)(1)(A)(vi)
 Don't know

11. If you selected section 509(a)(3) in question 9, choose the type of status that applies to your subordinates below. **Check all that apply. Skip to question 12 if you did not select section 509(a)(3) in question 9**

Type I Type II Type III (*Functionally Integrated*)
 Type III (*Non-Functionally Integrated*) Don't know

12. Are some or all of your subordinates nearly identical to each other in their governance structure, organizational documents and the types of activities they perform

Yes (*all subordinates*) Yes (*more than half of the subordinates*) Yes (*half or fewer of the subordinates*)
 No Don't know

13. Are any of your subordinates organized in a foreign country

Yes No Don't know

a. If "yes" to question 13, list the countries in which your subordinates are organized

14. Do any of your subordinates conduct or support any activities in foreign countries

Yes No Don't know

a. If "yes" to question 14, list the countries in which your subordinates conduct or support activities

15. Do you have a written contract or agreement with any of your subordinates

Yes No Don't know

a. If "yes" to question 15, do you have a written contract or agreement with all of your subordinates

Yes No

16. Do you have a formal, written set of eligibility criteria for a subordinate to be included in and remain in your group

Yes No Don't know

17. Do you require subordinates to include specific provisions in their articles, bylaws or other governing instruments before you will add them to your group

- Yes No Don't know

18. Which of the following documents do you require your subordinates to adopt before you will add them to your group? Check all that apply. **Select "N/A" if you do not require your subordinates to adopt any of these documents**

- Charter Articles of Incorporation/Organization Bylaws
 Conflict of Interest Policy N/A
 Other (describe) _____

19. When considering whether to add an organization to your group as a subordinate, which of the following do you require the organization to give you? **Check all that apply. Select "N/A" if you do not require your subordinates to give you any of this information**

- Bylaws Financial statement
 Articles of Incorporation/Organization Membership list
 Past information return or notice Description of activities
 Names of directors, trustees and officers Signed document authorizing inclusion in the group
 Compensation of directors, trustees and officers N/A
 Other (describe) _____

20. How many of your current subordinates have given you an authorization to be included in your group, signed by a duly authorized officer of each subordinate? Provide an approximate number if exact number is unknown

- _____ Don't know

21. Do you require an organization to pay an application or joining fee before you will add it to your group

- Yes No

22. If "yes" to question 21, which of the following describes your payment procedure? **If "No" to question 21, skip to question 25**

- Fee is the same for all new subordinates Fee varies

23. If you checked "Fee is the same" in question 22, indicate the dollar amount you require each new subordinate to pay for joining or applying to join your group. **Use whole dollar amounts**

Enter amount _____

24. If you checked "Fee varies" in question 22, describe how you determine the application or joining fees

25. Do you require that all or some of your subordinates pay you annual fees or dues each year

- Yes (all subordinates) Yes (more than half of the subordinates) Yes (half or fewer of the subordinates)
 No Don't know

a. If "yes" to question 25, how do you determine the amount(s) of your subordinates' fees or dues? **Check all that apply**

- Flat fee Percent of subordinate membership dues Percent of subordinate gross receipts
 Other (describe) _____

26. Do you permit an organization to be included in your group if it already has its own determination letter from the Internal Revenue Service (IRS) recognizing its tax exemption

- Yes No Don't know

27. If an organization has its own determination letter when it joins your group, IRS records will only reflect the subordinate's exemption as a part of your group, and not the determination letter it had prior to joining your group. Do you inform the subordinate that its individual determination letter will no longer be effective after it is added to your group

- Yes No Don't know

28. Is there a person in your organization who has primary responsibility for overseeing the relationship between you and your subordinates

Yes No Don't know

a. If "yes" to question 28, what is this person's title

29. Do you delegate authority to any of your subordinates to supervise other organizations in your group

Yes No Don't know

30. Do any of your subordinates engage in political campaign intervention

Yes No Don't know

31. Do any of your subordinates conduct lobbying activities

Yes No Don't know

32. Do any of your subordinates offer any gaming services to their members or to the public

Yes (*members only*) Yes (*members and public*) No
 Don't know

33. Do any of your subordinates offer goods, facilities or services to the public that do not further their tax-exempt purposes

Yes No Don't know

a. If "yes" to question 33, briefly describe those activities of your subordinates that do not further their tax-exempt purposes

Part III - Communication with Your Subordinates

34. Do you hold in-person meetings with directors, trustees or officers of all or some of your subordinates

Yes (*all subordinates*) Yes (*more than half of the subordinates*) Yes (*half or fewer of the subordinates*)
 No Don't know

a. If "yes" to question 34, check the option that best describes how often you hold in-person meetings with your subordinates

Less often than annually Annually Semi-annually (*twice a year*)
 Quarterly Monthly

b. If "yes" to question 34, do you keep minutes of all or some of these meetings

Yes (*all meetings*) Yes (*more than half of the meetings*) Yes (*half or fewer of the meetings*)
 No Don't know

35. Do you hold regular conference calls with the directors, trustees or officers of all or some of your subordinates

Yes (*all subordinates*) Yes (*more than half of the subordinates*) Yes (*half or fewer of the subordinates*)
 No Don't know

a. If "yes" to question 35, check the option that best describes how often you hold conference calls with your subordinates

Less often than annually Annually Semi-annually (*twice a year*)
 Quarterly Monthly

b. If "yes" to question 35, do you keep minutes of all or some of these conference calls

Yes (*all conference calls*) Yes (*more than half of the conference calls*) Yes (*half or fewer of the conference calls*)
 No Don't know

36. Do you send a newsletter to all or some of your subordinates

Yes (*all subordinates*) Yes (*more than half of the subordinates*) Yes (*half or fewer of the subordinates*)
 No Don't know

a. If "yes" to question 36, check the option that best describes how often you send a newsletter to your subordinates

Less often than annually Annually Semi-annually (*twice a year*)
 Quarterly Monthly

37. Do you communicate with your subordinates through your website

- Yes No Don't know

38. Do you communicate with your subordinates through means other than those described in this Part III

- Yes No

a. If "yes" to question 38, describe the other means through which you communicate with your subordinates

Part IV - Relationship with Your Subordinates

39. Do you elect or appoint (or have the right to elect or appoint) one or more of the directors, trustees or officers of all or some of your subordinates

- Yes (all subordinates) Yes (more than half of the subordinates) Yes (half or fewer of the subordinates)
 No Don't know

40. Do you have one or more overlapping directors, trustees or officers with all or some of your subordinates

- Yes (all subordinates) Yes (more than half of the subordinates) Yes (half or fewer of the subordinates)
 No Don't know

41. Do one or more of your subordinates elect, nominate or appoint (or have the right to elect, nominate or appoint) one or more of your directors, trustees or officers

- Yes (all subordinates) Yes (more than half of the subordinates) Yes (half or fewer of the subordinates)
 No Don't know

42. Do any of your subordinates compensate their directors, trustees or officers

- Yes (all subordinates) Yes (more than half of the subordinates) Yes (half or fewer of the subordinates)
 No Don't know

a. If "yes" to question 42, what involvement, if any, do you have in the compensation process? **Check all that apply**

- Approve compensation of subordinates' directors, trustees or officers
 Require subordinates to adopt a policy for determining reasonable compensation
 Require subordinates to provide documentation showing basis for compensation
 Review compensation information on Form 990/990-EZ or reports provided by subordinates
 Do not take any action to ensure reasonableness of compensation
 Don't know
 Other (describe) _____

43. Do you approve or have veto power over the following decisions of all or some of your subordinates? **Check one box for each row**

Decision	Yes (all subordinates)	Yes (more than half of the subordinates)	Yes (half or fewer of the subordinates)	No	Don't Know
Changes to Organizing Documents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Appointment/Removal of Directors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Compensation of Directors, Trustees, Officers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sale of Substantial Assets	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Termination	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

44. Describe any other decisions you approve or have veto power over for all or some of your subordinates. **If there are no other decisions, indicate "N/A"**

45. Do you require all or some of your subordinates to provide you with copies of all their Form 990-series annual returns or notices (Form 990, 990-EZ, 990-N, 990-T or 990-PF) that they file

- Yes (all subordinates) Yes (more than half of the subordinates) Yes (half or fewer of the subordinates)
 No Don't know

46. Do you require all or some of your subordinates to provide you with copies of their financial statements

- Yes (all subordinates) Yes (more than half of the subordinates) Yes (half or fewer of the subordinates)
 No Don't know

47. Do you require all or some of your subordinates to provide you a report on their activities

- Yes (all subordinates) Yes (more than half of the subordinates) Yes (half or fewer of the subordinates)
 No Don't know

a. If "yes" to question 47, how often do you request a report on activities? **Check the option that best describes how often you request reports on the activities of your subordinates**

- Less often than annually Annually Semi-annually (twice a year)
 Quarterly Monthly

48. Do you conduct performance reviews of all or some of your subordinates

- Yes (all subordinates) Yes (more than half of the subordinates) Yes (half or fewer of the subordinates)
 No Don't know

a. If "yes" to question 48, check the option that best describes how often you conduct performance reviews of your subordinates

- Less often than annually Annually Semi-annually (twice a year)
 Quarterly Monthly

49. Do you approve the budgets of all or some of your subordinates

- Yes (all subordinates) Yes (more than half of the subordinates) Yes (half or fewer of the subordinates)
 No Don't know

a. If "yes" to question 49, check the option that best describes how often you approve the budgets of your subordinates

- Less often than annually Annually Semi-annually (twice a year)
 Quarterly Monthly

50. Do you take any other actions not described in this Part IV, Relationship with Your Subordinates, to exercise general supervision or control over your subordinates

- Yes No

a. If "yes" to question 50, describe any other actions that you take to exercise general supervision or control over your subordinates

Part V - Services You Provide For Your Subordinates

51. Do you provide any kind of educational training or materials for all or some of your subordinates

- Yes (all subordinates) Yes (more than half of the subordinates) Yes (half or fewer of the subordinates)
 No Don't know

52. Do you provide financial support for all or some of your subordinates

- Yes (*all subordinates*) Yes (*more than half of the subordinates*) Yes (*half or fewer of the subordinates*)
 No Don't know

53. Do you provide fundraising assistance for all or some of your subordinates

- Yes (*all subordinates*) Yes (*more than half of the subordinates*) Yes (*half or fewer of the subordinates*)
 No Don't know

54. Do you conduct joint activities with all or some of your subordinates

- Yes (*all subordinates*) Yes (*more than half of the subordinates*) Yes (*half or fewer of the subordinates*)
 No Don't know

a. If "yes" to question 54, briefly describe those joint activities

55. Do you provide administrative services or support for all or some of your subordinates

- Yes (*all subordinates*) Yes (*more than half of the subordinates*) Yes (*half or fewer of the subordinates*)
 No Don't know

56. Do you hire an independent outside auditor to review all or some of your subordinates

- Yes (*all subordinates*) Yes (*more than half of the subordinates*) Yes (*half or fewer of the subordinates*)
 No Don't know

Part VI - Inclusion of Subordinates in Your Group Exemption Ruling

57. Have you ever removed a subordinate from your group

- Yes No Don't know

a. If "yes" to question 57, indicate why you removed a subordinate from your group. **Check all that apply**

- The subordinate failed to send one or more annual reports to you
 The subordinate permanently terminated its operations
 The subordinate temporarily went inactive
 The subordinate failed to pay fees or annual dues to you
 The subordinate failed to meet the requirements for tax exemption under the Internal Revenue Code
 The subordinate didn't meet the criteria for inclusion in your group exemption
 The subordinate engaged in activities not in compliance with your charter, requirements, governing instruments, etc
 The subordinate applied for and received recognition of exemption from the IRS
 The subordinate requested to be removed from the group
 Other (*describe*) _____

58. Do you have written standards or procedures with regard to when a subordinate will be removed from your group

- Yes No Don't know

a. If "yes" to question 58, do you provide these written standards or procedures to your subordinates

- Yes No Don't know

59. Have any of your subordinates ever had their tax-exempt status revoked while a member of your group

- Yes No Don't know

a. If "yes" to question 59, indicate how many were revoked during an examination and how many were automatically revoked for not filing a Form 990-series return or notice for three consecutive years. If no subordinates were revoked in one of these two categories, enter "0" on the applicable line. Write "Don't know" on the applicable line if you don't know the number

Revoked due to examination _____ Automatically revoked for non-filing _____

60. Have you ever added to your group an organization whose tax-exempt status has been revoked (either by examination or for not filing for three consecutive years)

Yes No Don't know

61. Have you ever added a subordinate back to your group that you previously removed

Yes No Don't know

Part VII - Form 990-T Filing Information

62. Have any of your subordinates filed a Form 990-T, Exempt Organization Business Income Tax Return, for tax years 2008, 2009 or 2010

Yes No Don't know

- a. If "yes" to question 62, provide the total number of subordinates in your group, the number that filed a Form 990-T, and for those that filed Form 990-T, the number of subordinates that paid unrelated business income tax for the periods listed below. **Provide approximate numbers if the exact numbers are not known. If you did not have any subordinates in a particular year, enter "N/A" in the column entries for that year**

	2010	2009	2008
Total Number of Subordinates			
Number Filing Form 990-T			
Number That Paid Unrelated Business Income Tax			

63. Have you filed a Form 990-T on behalf of one or more of your subordinates for tax years 2008, 2009 or 2010

Yes No Don't know

- a. If "yes" to question 63, did you include the subordinate(s) on your own Form 990-T, and/or did you file a group Form 990-T that includes only your subordinate(s)? **Check all that apply**

Yes (own Form 990-T) Yes (group Form 990-T) Don't know

- b. If "yes" to question 63, check the year(s) you filed a Form 990-T on behalf of any of your subordinates

Tax Period	Filed
2010	<input type="checkbox"/>
2009	<input type="checkbox"/>
2008	<input type="checkbox"/>

Part VIII - Annual Information Returns, Notices, and Group Returns

64. For the tax years listed below, which types of information returns or notices did you file with the IRS for your own organization?

Check all that apply for each row. If you did not file any of these returns for a particular year, check the "N/A" box for that row

Tax Period	Form 990	Form 990-EZ	Form 990-N	N/A
2010	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2009	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2008	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

65. Have you ever reported information on any of your subordinates' revenues, expenses, assets, liabilities or activities on your own Form 990-series return (not a group return)

Yes No Don't know

66. Have you filed a Form 990 group return on behalf of two or more of your subordinates for tax years 2008, 2009 or 2010? **If you answer "no" or "don't know," skip to question 70**

Yes No Don't know

a. If "yes" to question 66, provide the total number of subordinates included in your group exemption, the total number included in your Form 990 group return, and the number of subordinates included in that return that had gross receipts greater than or equal to \$200,000 OR had total assets equal to or greater than \$500,000 for the periods listed below

Provide approximate numbers if the exact numbers are not known. If you did NOT file a group return with two or more of your subordinates in any of the years below, insert "N/A" in the column entries for that year

	2010	2009	2008
Total Number of Subordinates			
Number Included in Your Form 990 Group Return			
Number of Subordinates with \geq \$200,000 Gross Receipts OR Total Assets \geq \$500,000			

b. Have you obtained an EIN (Employer Identification Number), separate from your own EIN, to use to file a group return

Yes No Don't know

c. Prior to filing a group return, did you obtain a written statement, signed by an officer under penalties of perjury, from each of the subordinates included in the group return that authorized each subordinate's inclusion in the return for the periods listed below?

Select one per row

Year	Yes	No	N/A (Didn't File Group Return)
2010	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2009	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2008	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

d. Did you file a group return on behalf of some but not all of your subordinates for tax years 2008, 2009 or 2010

Yes No Don't know

e. If 'Yes' to question 66d, describe the reason(s) why you did not file a group return for all subordinates and the criteria you used to determine which subordinates to include (or not include) in a group return

67. Have any of your subordinates that you included in a group return for tax year 2008, 2009 or 2010 separately disclosed to the public the subordinate's portion of the compensation information reported on the group return

Yes No Don't know

a. If "yes" to question 67, how many of your subordinates separately disclosed to the public the subordinate's portion of the compensation information reported on the group return? **Check one box for each row**

Year	All subordinates	More than half of the subordinates	Half or fewer of the subordinates	Don't Know	N/A (no group return filed)
2010	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2009	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2008	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

b. If "yes" to question 67, how did your subordinates disclose the compensation information to the public? **Check all that apply**

Subordinate's website Another's website Don't know
 Other (describe) _____

68. Have any of your subordinates that you included in a group return for tax year 2008, 2009 or 2010 separately disclosed to the public the subordinate's portion of the program services information reported on the group return

Yes No Don't know

a. If "yes" to question 68, how many of your subordinates separately disclosed to the public the subordinate's portion of the program services information reported on the group return? **Check one box for each row**

Year	All subordinates	More than half of the subordinates	Half or fewer of the subordinates	Don't Know	N/A (no group return filed)
2010	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2009	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2008	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

b. If "yes" to question 68, how did your subordinates disclose the program services information to the public? **Check all that apply**

Subordinate's website Another's website Don't know
 Other (describe) _____

69. Have any of your subordinates that you included in a group return for tax year 2008, 2009 or 2010 separately disclosed to the public the subordinate's portion of the information on revenue, expenses, assets and liabilities reported on the group return

Yes No Don't know

a. If "yes" to question 69, how many of your subordinates separately disclosed to the public the information on revenue, expenses, assets and liabilities reported on the group return? **Check one box for each row**

Year	All subordinates	More than half of the subordinates	Half or fewer of the subordinates	Don't Know	N/A (no group return filed)
2010	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2009	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2008	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

b. If "yes" to question 69, how did your subordinates disclose the information on revenue, expenses, assets and liabilities to the public? **Check all that apply**

Subordinate's website Another's website Don't know
 Other (describe) _____

70. Do you inform all new subordinates of their annual Form 990-series return or notice filing obligations? **Select "N/A" if none of your subordinates have any Form 990-series return or notice filing obligations**

Yes No Don't know N/A

a. If "yes" to question 70, how have you informed your new subordinates of their filing requirements? **Check all that apply**

Telephone call Newsletter E-mail
 Website
 Other (describe) _____

71. Have you informed all of your subordinates that were exempt from Form 990-series filing requirements prior to 2007 because they didn't exceed the annual gross receipts filing threshold that they are now required to file a Form 990-N (e-Postcard) notice? **Select "N/A" if you do not have any subordinates that had less than \$25,000 in average annual gross receipts prior to 2007**

Yes No Don't know N/A

a. If "yes" to question 71, how have you notified these subordinates of their Form 990-N filing requirements? **Check all that apply**

Telephone call Newsletter E-mail
 Website
 Other (describe) _____

72. Do you confirm that all of your subordinates (*other than those included in your group return, if any*) file their own Form 990-series information return or notice each year? **Select "N/A" if you file a group return on behalf of all subordinates each year**

- Yes No Don't know N/A

a. If "yes" to question 72, how do you confirm that each subordinate has filed a Form 990-series information return or notice? **Check all that apply**

- Require a copy of a subordinate's annual return
 Confirm on www.irs.gov that a subordinate has filed Form 990-N
 Require a written confirmation from an officer of a subordinate that it has filed
 Other (*describe*) _____

73. Do you review or approve each of your subordinate's annual Form 990-series informational returns or notices before they are filed? **Select "N/A" if you file a group return on behalf of all subordinates each year**

- Yes (*review only*) Yes (*review and approve the filing*) No N/A

74. Indicate below the number of your subordinates required to file each type of Form 990-series information return or notice for tax year 2010. **Use an approximate number for a particular Form 990-series return if the exact number is not known. If a particular return listed below was not required to be filed by any of your subordinates for tax year 2010, indicate with an "N/A"**

Return	Number of Subordinates Required to File for TY 2010
Form 990	
Form 990-EZ	
Form 990-N	
Form 990-PF	
Not Required to File	
Don't Know	
Total	

Part IX - Annual Group Exemption Update

75. Indicate the method you use to complete your annual group exemption update to the IRS

- Revise the subordinate listing provided to you each year by the IRS
 Provide your own current listing of all active subordinates to the IRS
 Other (*describe*) _____

76. Do you verify the continued existence of your subordinates prior to the submission of your annual group exemption update

- Yes No

a. If "yes" to question 76, describe how you verify the existence of your subordinates

77. Do you verify that your subordinates continue to meet the requirements for federal tax exemption prior to the submission of your annual group exemption update

Yes No

a. If "yes" to question 77, describe how you verify that your subordinates continue to meet the requirements for federal tax exemption

78. If you have ever removed subordinates from your group, did you report the removal of any of the subordinates to the IRS through your annual group exemption update

Yes (reported all removals) Yes (reported some removals) No Don't know

79. Indicate the date of the most recent annual group exemption update you submitted to the IRS

Date (MM/DD/YYYY) _____ Don't know

80. Have you ever included an organization in a group return prior to notifying the IRS that the organization had become a subordinate in your group

Yes No Don't know