



NATIONAL
ENDOWMENT
FOR THE
HUMANITIES

OMB No. 3136-0134
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ORGANIZATIONAL SURVEY

Please respond to all items on this survey. You may either complete the form online (it is a fillable PDF form), or you may print out the form and attach to it your responses. In either case, also attach the relevant financial statements as requested on the last page of the form.

A hard copy of the survey, your responses, and the attachment(s) should be signed and returned to the *Office of Grant Management, Room 311, National Endowment for the Humanities, Washington, D.C. 20506.*

Name of Applicant Organization

Provide the legal (registered) name of the applicant organization and the permanent street address and telephone number.

Name:

Address:

Telephone Number:

List any commonly used name(s) of the applicant organization, and any Trade or Doing Business As (DBA) name.

Type of Organization

Incorporated, Nonprofit with IRS tax status 501(c) (3)

Incorporated, Commercial/For-Profit

Unincorporated, Nonprofit

Unit of State Government

Unit of Local Government

Federally Recognized Indian Tribal Government

College or University

Other. Provide Description:

Date organization established:

Date incorporated:

Date received IRS tax status 501(c)(3):

Is the applicant organization affiliated with any other organization, either for-profit or nonprofit?

Yes No

If yes, list and describe the relationship with any affiliate organization, e.g., parent organization, subsidiaries, or other affiliates. Please address whether there are overlapping board members and whether tax returns are consolidated or separate. Please state whether the affiliate is a nonprofit, commercial, or unincorporated business.

Does your organization share staff, premises, or equipment with other organizations or affiliates?

Yes No

If yes, provide a description of this shared arrangement.

Purpose of Organization

Provide a description of the purpose of your organization. Include information on the number of permanent, full-time employees, part-time employees and independent contractors.

Governing Board

Provide the name, title, and address for each of the persons comprising the governing board of your organization.

Other Current Activities

Will this project be the only current activity of this organization?

Yes No

If not, please provide a brief description of the other activities, projects or grants. Please list federal grants received within the past two years.

Financial Statements

Has your organization had an A-133 Organization-Wide Audit in the last two years? If so, please submit a copy. If not, please submit the latest statement of financial condition, preferably a certified financial statement. Also, indicate the name of the agency or firm that audits your organization. If no financial statements are available, please submit your organization's latest income tax return.

Prepared by:

(Printed Name and Title)

(Signature and Date)

Application / Grant Number:

NEH estimates the average time to complete this form is thirty minutes per response. This estimate includes the time for reviewing the instructions for this form, gathering the necessary data and entering the data on the form. Please send any comments regarding this estimated completion time or any other aspect of the form, including suggestions for reducing completion time, to the Director, Office of Publications, National Endowment for the Humanities, Washington, D.C. 20506; and to the Office of Management and Budget, Paperwork Reduction Project (3136-0134), Washington, D.C. 20503. According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.