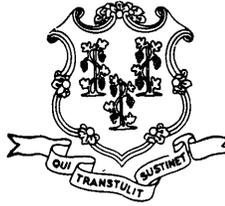


STATE OF CONNECTICUT
DEPARTMENT OF CONSUMER PROTECTION
 Public Charities
 165 Capitol Avenue
 Hartford, CT 06106
 Email: dcp.publiccharities@ct.gov
 Web site: www.ct.gov/dcp



For Official Use Only

Charitable Organization Renewal Form

- The Charitable Organization Registration number you wish to renew must be entered on this form.
- A total **fee of \$50.00** must accompany this form. Checks should be made payable to “*Treasurer, State of Connecticut.*” Add an additional \$25.00 for each month the renewal application is received after the expiration date.
- **Attach the IRS Form 990, 990EZ or 990PF for your most recently completed year end.** An Audit Report for your most recently completed year end if 990 reported more than \$500,000 in gross revenue.
- Return this completed form with the applicable fee to the above address.

Registration Number

Charitable Organization Registration Number to be Renewed	Expiration Date of Registration

Organization Information

Name of Charitable Organization				
Street Address		City	State	Zip Code
FEIN	Email Address		Fiscal Year End	
Mailing Address (if different than above)				
Name				
Street Address		City	State	Zip Code

Extension of Time to File

If any part of the application requirements shown above will not be available by the due date, you must request an extension of your current registration before the expiration date. Email your request to dcp.publiccharitiesextensions@ct.gov. All extension requests must include the Name of the Organization, Connecticut Charities Registration Number, your FEIN and the reason for the request. No fee is required. Mailed or Faxed extensions will not be granted.

Certification

Two persons authorized by the organization must sign this form.

_____ Signature	_____ Printed Name	_____ Date
_____ Signature	_____ Printed Name	_____ Date