STATE OF CALIFORNIA CT-NRP-2 (Rev. 09/2017)

## NONPROFIT RAFFLE REPORT



MAIL TO: Office of the Attorney General Registry of Charitable Trusts P.O. Box 903447 Sacramento, CA 94203-4470

STREET ADDRESS: 1300 I Street Sacramenlo, CA 95814 (916) 210-6400

WEBSITE ADDRESS:

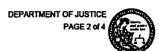
A report must be completed for each year in which a raffle was conducted (September 1 through August 31).

The report is due on or before October 1. (California Penal Code section 320.5)

www.oag.ca.gov/charities			(For Registry Use Only)			
PART A: General Organiza	ation Reporting	Information				
Name of Organization:		Provide at least one of the fo	Provide at least one of the following:			
AAUW Branch		State Charity Registration N	umber: Branch #			
Address of Organization:		Raffle Registration Number:	Branch #			
Branch Address						
City or Town, State and ZIP Code:		Federal Employee Identifica	tion Number (FEIN):			
Branch Address		Branch #	, , ,			
E-mail Address:		SOS Cornoration Number of	r FTB Organization Number:			
Branch contact email address		Branch #	SOS Corporation Number or FTB Organization Number:  Branch #			
Telephone Number:						
Branch contact telephone number	<u> </u>					
Fax Number:						
Part B: Raffle Information	***					
<ol> <li>Raffle year ending Augus</li> </ol>	t 31, <u>2020</u>					
		(Year)				
Aggregate gross receipts	2. Aggregate gross receipts from the operation of raffle(s): \$ 705					
	3. Aggregate direct costs incurred by the organization from the operation of raffle(s): \$ 30					
At least 90% of the gross receipts received from ticket sales must be used for the beneficial or charitable purpose of the eligible organization or for the benefit of another eligible organization. Did direct costs  4. exceed 10% of gross receipts and did your organization use funds from sources other than from ticket sales to offset costs?						
If yes,						
4(A) Total funds from sources other than ticket sales used for the administration or other costs of conducting the raffle(s)?						
\$		·-·				
4(B) What was the source	e of these funds?					
5. Describe the charitable or for which the raffle proces		e Scholarships to attend local college				

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Title of Authorized Officer or Director

6.	Were some or all of the raffle proceeds used for the bene		Yes [		
	If the answer is yes, provide the following information used. Attach additional sheets of paper, if necessary		is were	<b>3</b>	
<u>.</u>		\$			
Recipi	ent Organization	Dollar Amount of Raffle Proceeds to Recipient O	rganiz	ation	
Address of Recipient Organization C		Contact Person for Recipient Organization			
City, S	state, and ZIP Code	Telephone Number of Recipient Organization			
Part (	C: Certification by Authorized Officer or Direct	tor of Reporting Organization	<u> </u>		
l he	reby certify that:				
			True	Fals	
1)	At least 90% of the gross receipts (total dollar amount prior of raffle tickets was used for the beneficial or charitable praffle or for the benefit of another eligible organization.		✓		
2)	None of the funds required to be used for beneficial or charitable purposes were provided to an officer, director or member (as defined by Corporations Code section 5056) of the organization which conducted the raffle(s).				
3)	No person involved in or connected with the conduct of the raffle(s) was compensated by the organization conducting the raffle(s) from raffle proceeds required to be used for beneficial or charitable purposes.				
4)	No gaming machine, apparatus or device, including but n machine as described in California Penal Code sections 3 raffle(s).		1		
5)	No individual corporation, partnership or other legal entity the raffle(s) other than the organization conducting the ra- which received funds from the raffle(s).		✓		
6)	No raffle was conducted, and no raffle tickets were sold, the enclosure, satellite wagering facility, or gambling established.		✓		
7)	Tickets were not sold, traded or redeemed over the Interr	net.	1		
8)	Raffle funds were not used for any purpose outside of Ca	lifornia.	1		
the an in Par	answer to any question in Part C, Items 1 through 8, wa swer. Use additional sheets of paper, if necessary, for t C was "False," reference the question number next to ning this Nonprofit Raffle Report, I hereby certify that a	the explanation. If the answer to more than one each explanation.	ques	tion	
Si	gnature of Authorized Officer or Director Who Prepared the Report	e Date			
		Treasurer			

Printed Name of Authorized Officer or Director