



Office of the Illinois Attorney General Veteran Service Organizations State Charter Application

PLEASE TYPE OR PRINT IN INK. This application is intended for submission pursuant to the Veteran Service Organizations State Charter Act. Please indicate each requirement that has been met. List the supporting documentation for each question where applicable, and attach the supporting documentation to the application for submission. Please see Instructions for State Charter Application for reference. One copy of this application and attachments are to be filed with the Office of the Attorney General, Military and Veterans Rights Bureau, by email: mvr@ilag.gov, or mail: 201 West Pointe Drive, Suite 7, Belleville, IL 62226.

Date of Application

Name of Veteran Organization

Telephone Number

Address

City County State Zip Code

Name and Title of Primary Contact Person for this Organization

Telephone Number

Type of Organization: Auxiliary of Congressionally Chartered Veteran Service Organization

Congressionally Chartered Veteran Service Organization

Other Veteran Organization

I attest that the applicant qualifies for State charter status, and submit the following in support thereof:
(Please list your supporting documentation for each question where applicable, and attach the supporting documentation to your application.)

1. Formation of organization. The applicant must meet all requirements under **either 1.a or 1.b:**

a. All of the following:

i. The applicant has been formed by and for veterans.

Yes No

Supporting documentation: _____

ii. The applicant has a board where a majority of its members are veterans.

Yes No

Supporting documentation: _____

iii. The applicant has annual expenditures that demonstrate that a majority of the organization's expenses reflect support for veterans.

Yes No

Supporting documentation: _____

b. Both of the following:

i. The applicant has a paid membership of at least 15 individuals.

Yes No

Supporting documentation: _____

ii. The applicant is associated with a congressionally chartered organization.

Yes No

Supporting documentation: _____

2. Status and purpose of organization. The applicant must meet both of the following requirements:

a. The applicant possesses tax-exempt status from the Internal Revenue Service either under Section 501(c)(3) or Section 501(c)(19) of the Internal Revenue Code.

Yes No

Supporting documentation: _____

b. The applicant's primary charitable purpose is providing service or assistance to veterans, their spouses, or their dependents.

Yes No

Supporting documentation: _____

3. Certificate of Good Standing. The applicant possesses a current certificate of good standing as an Illinois registered not-for-profit organization from the Secretary of State.

Yes No

Supporting documentation: _____

4. Charitable Trust Act registration. The applicant obtains and maintains ongoing registration and compliance under the Charitable Trust Act with the Charitable Trust Bureau of the Attorney General’s Office or provides substantiation for an exemption (please see Instructions for State Charter Application for types of acceptable substantiating documentation).

Yes No Exempt from this requirement

Supporting documentation: _____

5. Veteran Service Officers. For organizations with veteran service officers (VSO): the applicant demonstrates that each veteran service officer possesses a valid U.S. Department of Veterans Affairs accreditation or that such accreditation is pending (please see Instructions for State Charter Application for reference).

Yes No Does not have veteran service officers

List VA accreditation numbers for each VSO: _____

6. Delegates and Alternates. For veteran service organizations that have delegates and alternates or are in the process of selecting and submitting delegates and alternates to a county Veteran Assistance Commission at the time of application for State charter status: entity is in compliance with the methods and criteria set forth under Section 9 of the Military Veterans Assistance Act.

Yes No Does not / will not have delegates or alternates

Please provide an attestation of compliance with your application.

Attestation of Compliance

The following statement is required on organizational letterhead and signed by all officers: “All officers for (insert lawful organizational name) do hereby attest that all requirements for a state charter have been met, that there are no past or ongoing enforcement actions or lawsuits against the organization or any of its officers for violations or suspected violations of the Consumer Fraud and Deceptive Business Practices Act, or the Military Veterans Assistance Act, and that we will notify the Attorney General within 30 days if, at any point, the organization no longer meets one or more of the requirements for state charter status.”

The Attorney General shall deny an application for state charter to any organization that does not meet all the requirements for state charter status in Section 15 of the Veteran Service Organizations State Charter Public Act 103-0405. Any organization whose State Charter Application has been denied may resubmit an application once all deficiencies have been corrected.

Instructions for State Charter Application

PLEASE TYPE OR PRINT IN INK. Please complete all the required fields listed in the State Charter Application. List the supporting documentation for each question where applicable, and attach the supporting documentation to the application for submission. Review additional instructions below for examples of acceptable supporting documents. One copy of this application and attachments are to be filed with the Office of the Attorney General, Military and Veterans Rights Bureau, by email: mvr@ilag.gov, or mail: 201 West Pointe Drive, Suite 7, Belleville, IL 62226.

- 1. Formation of organization.** Please respond affirmatively or negatively to the statements for either 1.a or 1.b, list the supporting documentation on the application, and attach copies of the supporting documentation to the application. Examples of such documentation may include the organizational Bylaws, policy manual, annual expense report or a signed affidavit attesting that the requirement has been met.
- 2. Status and purpose of organization.** Please respond affirmatively or negatively to both statements. For 2.a, examples of supporting documentation may include a copy of the exemption determination letter from the Internal Revenue Service. For 2.b, supporting documentation may include the organization's official mission statement.
- 3. Certificate of Good Standing.** Please respond affirmatively or negatively to indicate whether the applicant organization possesses a current certificate of good standing as an Illinois registered not-for-profit organization from the Secretary of State. If so, please indicate on the application that a copy of the certificate is attached to the application, and attach a copy of the certificate to the application.
- 4. Charitable Trust Act registration.** Please respond affirmatively or negatively to indicate whether the applicant obtains and maintains ongoing registration and compliance under the Charitable Trust Act with the Charitable Trust Bureau of the Attorney General's Office or provides substantiation for an exemption. Examples of types of acceptable substantiating documentation include the organization's listing on the Charitable Trust Database or documentation from the Charitable Trust Bureau affirming such registration and compliance.
- 5. Veteran Service Officers.** For organizations with veteran service officers, please respond affirmatively or negatively to indicate whether the applicant demonstrates that each veteran service officer possesses a valid U.S. Department of Veterans Affairs accreditation or that such accreditation is pending. List the VA accreditation numbers for each VSO. For organizations that have VSOs with pending applications, please attach a signed affidavit indicating the names of individuals awaiting accreditation and the date the VA application was submitted. For organizations that do not have VSOs, please indicate that the entity does not have veteran service officers.
- 6. Delegates and Alternates.** For veteran service organizations that have delegates and alternates or are in the process of selecting and submitting delegates and alternates to a county Veteran Assistance Commission, please respond affirmatively or negatively to indicate on the application whether the entity is in compliance with the methods and criteria set forth under Section 9 of the Military Veterans Assistance Act, and attach to the application a signed affidavit. For veteran service organizations that do not have delegates and alternates and will not select or submit delegates and alternates to a county Veteran Assistance Commission, please indicate so on the application.