

University of Alaska Foundation
Special Event Form
and
Determination of Income Taxability

Department/Campus or Program
Holding the Activity or Event: _____

Foundation Fund Into Which Proceeds will be Placed:

a. Name: _____ b. Account Number: _____

Name of Event or Activity: _____

Date of Event or Activity: _____

Description of Event and How Income Will Be Generated (ticket sales, auction, raffle etc.):

1. Is substantially all of the work at the event performed by volunteers?

_____yes _____no

2. Is the activity carried on primarily for the convenience of the members of the University community, the department or college?

_____yes _____no

3. If items are being sold at the event or activity, are those items substantially all contributed items?

_____yes _____no

4. Is this event or activity a trade or business?

_____yes _____no

5. Is the activity regularly carried on?

_____yes _____no

6. Is the activity substantially related to the University's normal activities and programs of education, research and public service?

_____yes _____no

7. Is an auction (silent **or** outcry) being held at the event?
_____yes _____no

If yes, what is being auctioned?

How are auctioned items being obtained?

8. Is a raffle being conducted at the event
_____yes _____no

If yes, under whose raffle permit is the raffle being held?

_____ UAA _____ UAF _____ UAS
_____ Other (please specify organization) _____

Have you contacted the raffle permit administrator?:
_____ yes _____no

What is being raffled? _____

How was it obtained? _____

9. Are tickets being sold to the event?
_____yes _____no

If yes, how much does a ticket cost? \$_____

Is the ticket being used for door prizes or raffles?
_____yes _____no

10. What will be provided to those who attend the event (food, beverages, merchandise, music, entertainment, services etc.)?

_____ Value: \$ _____

_____ Value: \$ _____

_____ Value: \$ _____

_____ Value: \$ _____

(Income is taxable only if answers to 4 and 5 are **yes**, answer to 6 is **no**, and answers to 1., 2., or 3 are **no**)

Form Completed by:

_____/_____(date) Phone: _____

Note: Approval of this event, as indicated below MUST be received PRIOR to the date of the event.

FOUNDATION USE ONLY

Other compliance regulations which should be researched:

Other comments:

Conclusion:

Foundation Approval: _____/_____

Cash Management Approval: _____/_____