

Revenue Producing Activities Questionnaire

To request approval of a departmental revenue producing activity:

- 1 Complete the attached questionnaire in its entirety.
- 2 Attach business plan supporting how rates were determined and how they will be applied.
- 3 Submit the signed questionnaire, rate schedules, budget, and business plan to your campus business officer for approval.
- 4 Please provide the name of a person that can be contacted for additional information concerning this revenue producing activity.

Name_____

Address_____

Phone Number_____

E-mail address_____

Location of activity_____

Responsibility Center Name and Department_____

Proposed Account Manager_____

****NOTE: All incoming funds must be deposited in an approved university account and recorded with the appropriate general ledger account(s) and object code(s).**

<p>RC Fiscal Officer Approval _____</p> <p>Printed Name: _____ Date _____</p> <p>RC VP/Dean/or Director Approval _____</p> <p>Printed Name: _____ Date _____</p> <p>Campus Business Officer Final Approval _____</p> <p>Printed Name: _____ Date _____</p>
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The following questions will be used to determine under what sub-fund and function code the revenue producing activity should be established:

1. **Expected name of your activity:** _____

Please describe the purpose and nature of the revenue producing activity you would like to set up. If this activity is a change to an existing activity, please describe the change in detail:

Desired starting date for your revenue producing activity: _____

List account/sub-account number if known: _____

Activity Type

Check the category(s) that most closely characterize the activity described in the request:

- _____ Dept professional/consulting services fee
- _____ Sale of support/administrative services

_____ Testing of equipment/product
_____ Sale of goods

**If there are to be goods sold, will the goods sold be licensed goods (IU logo)?
(Circle one) "Yes" or "No"**

_____ Sale of food & beverage
_____ Laboratory testing services
_____ Sale of biological materials
_____ Advertising
_____ Journals

_____ Conferences and workshops (If "checked", please complete the following questions)

Will registration fees be collected? _____

Is the IU Conferences handling the registration process? _____

If registration fees are being collected for your activity and the IU Conferences is NOT handling the process, describe your collection method(s) in detail below:

Are you in negotiations with non-university hotels? _____

_____ Other (describe) _____

2. **Size of activity** (estimated gross annual revenues): _____

3. **Customers:**

a) What percentage of the sales is expected to be made to (total should equal 100%):

_____ Internal (IU accounts)
_____ IU employees (faculty and staff)
_____ IU students
_____ Affiliated entities (IUF, Clarian, IUAA, ARTI)
_____ General Public
_____ Retail Businesses
_____ Wholesale Businesses
_____ Governmental entities
_____ Other tax-exempt entities

b) What percentage of the sales is expected to be made to (total should equal 100%):

_____ Customers within the state of Indiana
_____ Customers outside the state of Indiana

4. **Will food and/or beverages be served during the course of your activity?** _____

Will alcoholic beverages be served? _____

Please list the caterer/vendor(s): _____

5. Vendor (hotel, transportation, etc.):

Will the activity be self-operated or will an external vendor be used? _____

What is the nature of the compensation arrangement between IU and the third party?

If an external vendor is used, Purchasing needs to be involved in the negotiations.

6. Space:

In which building on your campus will this activity take place? _____

Is this space assigned to your department (check one)? Yes _____ No _____

Does this space require modifications or remodeling for use (check one)? Yes _____ No _____

If "Yes", have you submitted a Request for Services form (check one)? Yes _____ No _____

Will space be permanently converted (check one)? Yes _____ No _____

Will any activities be conducted outdoors (check one)? Yes _____ No _____

Do you intend to charge for use of space (check one)? Yes _____ No _____

Will a vendor conduct this activity for you in a campus space (check one)? Yes _____ No _____

Do you plan to conduct this activity in an off-campus space (check one)? Yes _____ No _____

If any external vendor is occupying University space, Purchasing needs to be involved in the negotiations.

7. User Rates/Prices:

What price(s) will you charge for products or services? _____

If you have a printed price schedule, please attach a copy.

The business plan must include calculations showing how you arrived at your rates.

8. Sale of printed material:

If this activity involves the sale of printed material, is any copyrighted material included?

_____ Yes _____ No _____ NA

If yes, have the proper copyright releases been obtained for the material?

_____ Yes _____ No

If the activity involves the sale of printed material, Purchasing needs to be involved in the negotiations.

9. Self-supporting or subsidized?

Will this activity be self-supporting with all costs recovered through sales?

_____ Yes _____ No

If no, what fund source(s) or account(s) will be used for the subsidy? _____

It is understood that all deficits are the responsibility of the unit/RC _____ Agreed
Initial

10. Can this activity and all related business transactions be completed within one fiscal year?

_____ Yes _____ No

If your customers will include the general public, other universities, corporations, and/or non-profits, please complete questions 11 - 16. These questions will be used to help determine if **Unrelated Business Taxable Income** will be generated by the activity.

11. Regularly Carried On

a) Would you consider that your business with the general public, corporations, etc. will be recurring on a regular basis?

Yes No

(An activity should not be considered "regularly carried on" if it is on a very infrequent basis or for a short period of time during the year.)

b) Will sales be conducted:

Daily

Weekly

Monthly

Annually

Greater than one fiscal year

Other (describe) _____

12. Which of the following tax-exempt purposes does the sale of the goods or services help fulfill? Production of income to fund university programs is not sufficient. (Please check all that apply.)

Teaching and instruction

Research is being conducted (i.e. not solely product testing for industry or routine lab testing).

Economic Development within the state of Indiana

Medical and Health Care Related

Public Service

Activity is performed for the convenience of University students, faculty, or staff.

Other educational or governmental purpose

For every purpose chosen, please explain:

13. Is revenue generated from the sale of advertisements or corporate sponsorships in a University publication, broadcast, or event?

Yes No

(Income from the sale of advertising is considered to be unrelated business income. There are tax reporting requirements associated with the generation of unrelated business income.)

If the activity involves the sale of advertisement, Purchasing needs to be involved in the negotiations.

14. Will this activity involve e-business (accepting payment securely over the Internet)?

Yes No

If e-business is involved, Treasury Operations must approve the process.

15. **If you are currently collecting income for this activity, what is your process/procedure (check all that apply)? Please include a copy of your current invoice.**

Payment Collection through Web-based Environment _____

Payment Collection on Site _____

Payment via Lock Box _____

Payment through U.S. Mail _____

Cash _____

Checks _____

Credit/Debit Cards _____

FIS Internal/Service Billings _____

Other (describe) _____

16. **Please identify the process of payment collection you would like to use for this activity:**

_____ Internal/Service billing to another IU account

Electronic transfer:

_____ domestic transfer using the Automated Clearing House (ACH) system

_____ wire transfer (domestic or international) using the Federal Reserve Fedline system

_____ by e-check using the QuikPay system (requires user authentication)

Payment cards:

_____ in-person (over the counter or by telephone, US mail)

_____ via the internet using IUPayPlus (please complete the set up form found on the Treasury website:
<http://www.indiana.edu/~iutreas/iupayplus.html>)

_____ via the internet using a different process (**NOTE: Exceptions to the use of centralized IU credit card processing requires explicit authorization from the Office of the Treasurer.**)

Checks:

_____ in-person (over the counter or by U.S. mail)

_____ via a bank Lock Box or the FIS accounts receivable system

Cash (**not recommended due to inherent risks and costs of handling**):

_____ in-person

Other (please describe):

17. **Conflict of Interest Statement**

State Statute #35-44-1.3, Section 2.50 - Conflicts of Interest; public servants:

"A public servant who knowingly or intentionally: (1) Has a pecuniary interest in; or (2) Derives a profit from; a contract or purchase connected with an action by the governmental entity served by the public servant commits conflict of interest, a Class D felony."

DEFINITIONS:

Conflict of interest occurs when a person's private interests and his or her university responsibilities are at odds. This means an individual should not be in a position to gain personally as a result of conducting business on behalf of the University. Employees engaged in any aspect of the purchasing process are expected to be free of interests or relationships which are actually or potentially detrimental to the best interests of Indiana University. For instance, employees should not be conducting university business with a company he or she substantially owns or with businesses substantially owned by close relatives.

Please complete and sign the Conflict of Interest Statement, if applicable.

Activity risk characteristics

- | | Yes | No | |
|-----------|--------------------------|--------------------------|--|
| A. | <input type="checkbox"/> | <input type="checkbox"/> | Activity involves testing or creating a product that could be a subject to product liability claims. |
| B. | <input type="checkbox"/> | <input type="checkbox"/> | An exclusive contractual relationship with a vendor or third party will be required. |
| C. | <input type="checkbox"/> | <input type="checkbox"/> | The activity will involve intellectual property such as trademarks, copyrights, patents, trade secrets or other proprietary information and materials. |
| D. | <input type="checkbox"/> | <input type="checkbox"/> | The activity will require a non-compete agreement/non-employment agreement. |
| E. | <input type="checkbox"/> | <input type="checkbox"/> | The activity will require confidentiality commitment/nondisclosure agreement. |
| F. | <input type="checkbox"/> | <input type="checkbox"/> | University personnel involved with the activity has an interest in a company that may be affected by this activity. |
| G. | <input type="checkbox"/> | <input type="checkbox"/> | The use of the University's name, logo, or wordmark by a third party is being proposed. |
| H. | <input type="checkbox"/> | <input type="checkbox"/> | This activity will involve human subjects, laboratory animals, radiological hazards, biohazards, recombinant DNA, or the use of human biological material. |
| I. | <input type="checkbox"/> | <input type="checkbox"/> | Federal equipment or state appropriations will be used in this activity. |
| J. | <input type="checkbox"/> | <input type="checkbox"/> | Start-up funds will be provided fully or in part by a Contract & Grant account. |
| K. | <input type="checkbox"/> | <input type="checkbox"/> | Potentially subject to federal Unrelated Business Income Tax (UBIT) and/or Indiana state sales or use tax. |
| L. | <input type="checkbox"/> | <input type="checkbox"/> | Gross revenues from this activity are expected to exceed \$50,000 annually. |
| M. | <input type="checkbox"/> | <input type="checkbox"/> | Are the revenue producing activities being conducted in a building that was financed with university bonds? |
| N. | <input type="checkbox"/> | <input type="checkbox"/> | Are students engaged in producing the goods or services as part of their academic requirements? |