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| **Appendix B**  **Donation Recipient Questionnaire** |
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| **Section 1: Donation Recipient Information** |
| 1. Legal Name of Organization: Click or tap here to enter text.   Tax/Business ID Number: Click or tap here to enter text.  (or country equivalent)  Address: Click or tap here to enter text.  Postal Code: Click or tap here to enter text.  (if applicable)  Country: Click or tap here to enter text.  Telephone Number: Click or tap here to enter text.  Website Address: Click or tap here to enter text. |
| 1. Name and Title of Primary Contact: Click or tap here to enter text.   Telephone Number of Primary Contact: Click or tap here to enter text.  Email Address of Primary Contact: Click or tap here to enter text. |
| 1. Date organization was established: Click or tap here to enter text. |
| 1. Organization’s mission statement/purpose:Click or tap here to enter text. |
| 1. Organization’s geographic coverage: Click or tap here to enter text. |
| 1. Is organization authorized to receive Donations in accordance with local tax laws and regulations?   Yes No |
| 1. Does organization issue receipts?   Yes No |
| Government Official – Includes but is not limited to: (a) Any officer or employee of a Government Entity; (b) Any person acting in an official capacity for or on behalf of a Government Entity; and (c) Any candidate for a public office position or any person acting in an official capacity for or on behalf of the candidate. A “Family Member” of a Government Official includes parents, children, siblings, spouses, and spousal equivalents of a Government Official. A “Close Business Associate” of a Government Official includes any person who: (a) is a current or former business partner, co-owner, co-investor, or joint-venturer with a Government Official; (b) is a consultant or advisor to a Government Official; or (c) has any other common financial interest or significant personal relationship with a Government Official.   1. Does the organization have any relationship with any Government Entity?   Yes No  If **YES**, please describe the relationship with the Government Entity:  Click or tap here to enter text.   1. Is the organization related to or otherwise affiliated with any Government Official (including a Family Member or Close Business Associate of the Official) or Government Entity?   Yes No  If **YES**, please describe the relationship or affiliation:  Click or tap here to enter text. |
| 1. Does the organization carry out political or political-party activities?   Yes No  If **YES**, please describe the activities:  Click or tap here to enter text. |
| 1. Has the organization or any member of the organization has ever been accused of any bribery or corruption-related violations?   Yes No  If **YES**, please explain:  Click or tap here to enter text. |
| 1. Has the organization received a Donation from the Company in the past five years?   Yes No  If **YES**, please specify when the last Donation was received and the amount/value of the Donation:  Click or tap here to enter text. |
| 1. Has the Company previously denied any of the organization’s requests for Donations?   Yes No  If **YES**, please specify when the Donation was denied and the reason for denial (if known):  Click or tap here to enter text. |
| **Section 2: Proposed Donation Request** |
| 1. Is this a Donation of Money, Donation of Goods, or Donation of Food (check all that apply)?   Money Goods Food |
| 1. List the countries in which activities related to the Donation will be conducted:   Click or tap here to enter text. |
| 1. For Donations of Money, describe in detail how the funds will be used, including the name of the person or organization that will receive the funds:   Click or tap here to enter text. |
| 1. For Donations of Goods, describe the good and services to be provided, including the quantities and who will receive the goods and services, if applicable:   Click or tap here to enter text. |
| 1. For Donations of Food, provide the type and quantities of food and who will receive them, if applicable:   Click or tap here to enter text. |
| 1. Amount (if Donation of Money) and/or value (if Donation of Goods or Food) of Donation:   Click or tap here to enter text. |
| 1. Explain the purpose of the Donation (attach additional information as needed):   Click or tap here to enter text. |
| 1. Please indicate whether this is a one-time or recurring Donation:   One-Time Recurring  If the Donation is **recurring**, please state the amount of any disbursements, how often such disbursements will be made, and the expected date for the final Donation:  Click or tap here to enter text. |
| 1. Did a Government Official suggest or request that the Company make the Donation?   Yes No  If **YES**, provide the name, job title, and affiliated Government Entity of the Government Official who requested that the Company make the Donation, and explain the details of the request:  Click or tap here to enter text. |
| **Section 3: Governance Structure** |
| 1. Provide information on the Donation recipient’s Board of Directors, Executive Officers, and Key Persons:   Board of Directors (please include additional pages if necessary):  i) Name: Click or tap here to enter text.  Title of Board Member: Click or tap here to enter text.  Year of Birth: Click or tap here to enter text.  City, State, and Country of Residence: Click or tap here to enter text.  ii) Name: Click or tap here to enter text.  Title of Board Member: Click or tap here to enter text.  Year of Birth: Click or tap here to enter text.  City, State, and Country of Residence: Click or tap here to enter text.  iii) Name: Click or tap here to enter text.  Title of Board Member: Click or tap here to enter text.  Year of Birth: Click or tap here to enter text.  City, State, and Country of Residence: Click or tap here to enter text.  Executive Officers (please include additional pages if necessary):  i) Name: Click or tap here to enter text.  Title of Executive Officer: Click or tap here to enter text.  Year of Birth: Click or tap here to enter text.  City, State, and Country of Residence: Click or tap here to enter text.  ii) Name: Click or tap here to enter text.  Title of Executive Officer: Click or tap here to enter text.  Year of Birth: Click or tap here to enter text.  City, State, and Country of Residence: Click or tap here to enter text.  iii) Name: Click or tap here to enter text.  Title of Executive Officer: Click or tap here to enter text.  Year of Birth: Click or tap here to enter text.  City, State, and Country of Residence: Click or tap here to enter text.  Key Persons (e.g. individuals who will have a significant role in handling the donation processes of the organization or involved in daily operations) (please include additional pages if necessary):  i) Name: Click or tap here to enter text.  Title of Executive Officer: Click or tap here to enter text.  Year of Birth: Click or tap here to enter text.  City, State, and Country of Residence: Click or tap here to enter text.  ii) Name: Click or tap here to enter text.  Title of Executive Officer: Click or tap here to enter text.  Year of Birth: Click or tap here to enter text.  City, State, and Country of Residence: Click or tap here to enter text.  iii) Name: Click or tap here to enter text.  Title of Executive Officer: Click or tap here to enter text.  Year of Birth: Click or tap here to enter text.  City, State, and Country of Residence: Click or tap here to enter text. |
| 1. Are any of the individuals listed in #1 (i) employed or otherwise engaged in any capacity by any Government Entity; (ii) employed by or have duties to any political campaign; or (iii) a candidate for any political office? ☐Yes ☐ No   If **YES**, please provide the name of the individual, job title, and Government Entity.  Click or tap here to enter text. |
| 1. Do any of the individuals listed in #1 have any relative or close relationship with a person who is: (i) employed or otherwise engaged in any capacity by any Government Entity; (ii) employed by or have any duties to any political campaign; or (iii) a candidate for any political office?   ☐Yes ☐ No  If YES, please provide the name of the individual, job title, and Government Entity.  Click or tap here to enter text. |
| **Section 4: Certification** |
| I hereby certify that I am authorized to sign this Questionnaire on behalf of the organization, and that the information provided herein is true and complete. Organization agrees to promptly notify the Company of any material changes to this information.  Organization understands that the Company’s Global Anti-Corruption Policy is available at <https://walmartethics.com>.  Organization agrees that it will comply with all applicable anti-corruption laws.   |  |  | | --- | --- | | Signature: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | Name: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (printed) | | Title: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | Year of Birth: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | Country of Residence: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | Employer: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | Date: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (mm-dd-yyyy) |   *If you are Organization’s legal representative, attach a copy of the relevant Power of Attorney (or equivalent document) establishing your authority to act on Organization’s behalf.* |
| **Section 5: Consent** |

Before engaging any contractor or supplier, Walmart Inc., or its subsidiaries or affiliates (“**Walmart**” ), conducts vendor due diligence involving the collection of information the specific purpose of which is to assess the risks associated with each potential contractor or supplier (“**Candidate**”) and determine if such Candidate represents a risk of non-compliance with the United States Foreign Corrupt Practices Act, the UK Bribery Act and the anti-corruption laws applicable in the Candidate’s jurisdiction. This vendor due diligence may include carrying out background searches on the Internet or other public sources of information, the accuracy of which we may not be able to confirm, regarding, to the extent permissible under applicable law, criminal or civil litigation or lawsuits, liens, judgments, debarments or other potentially derogatory information relating to the Candidate or to individuals connected with it for purposes of assessing the risk of non-compliance with applicable anti-corruption laws. **Other personal information collected may include name, address, year of birth, email address and phone number, and certain sensitive information such as criminal history, ethnicity or political affiliations.** Please know that this is our standard review and that nothing is implied by the nature of these questions. At the same time, a reputational review ultimately requires the application of judgment, in light of all available facts, many of which are provided to us on a confidential basis.

For the purposes of this vendor due diligence process, please be advised that the information that will be collected from you and other sources (i.e., by carrying out background searches on the Internet or other public sources of information, including, where permitted by applicable law, public data registries) will be collected and processed by Dun & Bradstreet, Inc., with registered business address at 103 John F. Kennedy Parkway, Short Hills, New Jersey, 07078 USA (hereinafter the “**Data Processor**”), acting in its exclusive capacity as representative and person in charge of processing such information on behalf of Walmart or the applicable Walmart affiliate in the Candidate’s jurisdiction (hereinafter the “**Data Controller**”, “**we**” or “**us**”), which shall be considered the entity responsible in connection with such information. Where required by applicable law, the in-country address of the Data Controller is provided below. The Data Processor and/or the Data Controller may retain the information they collect for a period of seven (7) years from the date that the Candidate is last retained by Walmart.

Data Controller / Data Controller’s Affiliate:

Walmart Inc. - 702 SW 8th Street, Bentonville, Arkansas, 72716 USA

Data Processor:

Dun & Bradstreet, Inc.

This questionnaire is used for collecting information only for the purpose of conducting vendor due diligence on behalf of the Data Controller. The Data Controller and the Data Processor do NOT intend to collect, use, review, possess, control, hold or otherwise process any State secret (classified as secret or confidential by the government authorities or applicable laws ) or any other kind of information that the Data Controller or Data Processor are not authorized to receive or process in accordance with this Application Consent Form (collectively, “Restricted Information”). Please do NOT provide any Restricted Information to us when you are answering this questionnaire. If you have disclosed Restricted Information as part of this questionnaire, please inform us immediately and the Data Processor will return or destroy such information in accordance with applicable laws. You will be responsible if you disclose Restricted Information to the Data Controller or the Data Processor. In no event shall the Data Controller or the Data Processor be liable for any direct or indirect damages or legal liability if you provide Restricted Information when using this questionnaire. Furthermore, you shall indemnify the Data Controller and the Data Processor in full for any damages caused by your breach of the above undertakings.

By signing this Application Consent Form, you are giving your express consent to the collection, use and other processing (e.g., disclosure, transfer and transmission) of business and/or personal information, including information collected from third parties (e.g., by carrying out background searches on the Internet or other public sources of information), for the purposes described above and you are specifically agreeing to the terms of the privacy notice, which is either attached to this Application Consent Form or located at the bottom of the screen, and to participate in the review process. You are further agreeing to and acknowledging the following statements:

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| 1. | You confirm you have reviewed Walmart Privacy Notice. |
| 2. | You agree and consent to the terms of this Application Consent Form. |

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|  | Your Full Name: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (By signing here, I consent to all of the above disclosures) |
| Your Year of Birth: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Your Country of Residence: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Your Title: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Today’s Date: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
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