

Support Organization Annual Information Form

School Year (or Month) Ending _____

Organization Name _____

Goals and Objectives of Organization (Fill out if this is your first filing or if you have a change)

No change from previous year.

First filing or change. Please explain.

Status

Nonprofit

Foundation

Chartered member of nonprofit organization or foundation

(For initial filing, or if status has changed, attach supporting documentation for status, e.g., annual report filed with Secretary of State.)

Officers:

President _____ Phone # _____

Address _____

Vice - President _____ Phone # _____

Address _____

Treasurer _____ Phone # _____

Address _____

Secretary _____ Phone # _____

Address _____

Other _____ Phone # _____

Address _____

Other _____ Phone # _____

Address _____