

**Support Organization Annual Information Form**

School Year 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 Number \_\_\_\_\_  
Address \_\_\_\_\_

Vice-President \_\_\_\_\_ Phone Number \_\_\_\_\_  
Address \_\_\_\_\_

Treasurer \_\_\_\_\_ Phone Number \_\_\_\_\_  
Address \_\_\_\_\_

Secretary \_\_\_\_\_ Phone Number \_\_\_\_\_  
Address \_\_\_\_\_

Other \_\_\_\_\_ Phone Number \_\_\_\_\_  
Address \_\_\_\_\_

Other \_\_\_\_\_ Phone Number \_\_\_\_\_  
Address \_\_\_\_\_

*Distribution to director/designee at completion of fiscal year*