

ON SHORE FOUNDATION INC. ANNUAL QUESTIONNAIRE

EVEN IF YOU HAVE ALREADY DONE SO, PLEASE SEND A COPY OF YOUR 501-C-3 IRS LETTER.

TODAY'S DATE: _____

Organization Name: _____

Name of President: _____

Name of Founder: _____

Mailing Address: _____

City, State and Zip: _____

Actual Site Address: _____
(If different than mailing)

Phone Number(s): _____

Email Address: _____

Website: _____

Date, Non-Profit Status: _____

Primary Purpose: _____

Number of Paid Employees: # _____

Annual Total all Salaries Paid: \$ _____

Number of (unpaid) Volunteers: _____

TOTAL INCOME FROM ALL SOURCES: \$ _____
(Monetary value, including all donations, grants, placements, other)

**Please remove our name from mass mailing lists.
Request funds only ONCE PER YEAR by brief letter.
Sent no mailings of any other kind other than acknowledgment letter for funds received.**

***PLEASE DO NOT SEND HOLIDAY CARDS & ADDITIONAL YEAR END REQUESTS.**

OUR WEBSITE: www.onshorefoundation.org

**Mail to: On Shore Foundation
6202 FRONDOSA Dr., MALIBU, CA. 90265**

Remember to include IRS 501-C3 letter along with this application or you will not qualify for a donation.