

New Jersey Office of the Attorney General

Division of Consumer Affairs Office of Consumer Protection Charities Registration Section 124 Halsey Street, 7th Floor, P.O. Box 45021 Newark, NJ 07101 (973) 504-6215

Form CRI-300R

Long-Form Renewal Registration/Verification Statement

(Revised April 2008)

All questions must be answered.

Pursuant to the New Jersey Charitable Registration and Investigation Act (also known as "the C.R.I. Act" (N.J.S.A. 45:17A-18 et seq.), and prior to operating or commencing solicitation activity in the State, a charitable organization unless exempted from registration requirements (or qualified to file a Short-Form Registration Statement, CRI-200) shall file a Long-Form Initial Registration Statement, CRI-150-I. Charities submitting their annual long-form renewal registration must use Form CRI-300R. Please see the checklist at the

end (of this form for a discussion of fees	, imanciai statements	, documents to be	attached, and	omer requirem	ents for regist	iation.
1.	This statement contains the facts	and financial informa	tion for the fiscal	year ending:	12 / 31 month day	/ 2015 year	
2.	Federal ID Number (EIN) 30 -	0562250 28	a. N.J. Charities Re	egistration Nu	mber: CH- <u>32</u>	228900	
3.	Full legal name of the registering In care of: (if necessary, otherwise)	e leave this line blank	HE OEIS	FOUNDA	PRESI	VC. DENT	
4.	Mailing Address: 11 50. AD	ELAIDE AVE, H	-IGH LAND City	PARK, NJ	7 08904 ZIP Code	_ Chang	e of Address
NOT	E: If " in care of," a postal, privat	e or rural delivery mo	il box number is i	ised, the street	address of the c	charity must b	e given below.
5.	The principal street address of the Same as Mailing Address	e registering organiza		reet Address	City	State	ZIP Code
6.	Does the organization have any of If "Yes," attach a list giving the					□ Y	es 🗷 No
6a.	If the street address listed above is office in New Jersey, indicate the records, and to whom correspond	name, full address, ph	one and fax numb	ecords are kept er of the person	, or if the organ	ization does n y of the of the	ot maintain an organization's
	Contact person		Street address	Cit	у	State	IP Code
	Telephone number (include area code)		Fax number (include area	code)			
7.	Organization's contact information	on:					
	732-828-6098						
	Telephone number (include area code) president a oeis E-mail address	org ht	Fax number (include area co	sf.org			
8.	Type of organization (check one)						
	Nonprofit corporation Partnership	☐ Foundation ☐ Trust	☐ Indivi	dual (Specify)	☐ Associatio	n 🗆 S	Society
	1						

9.	Where and when was the organization legally established? Date: 4 18 2009 State: N J As required by the C.R.I. Act (N.J.S.A. 45:17A-24c(1)), attach to this registration a copy of the organization's bylaws and instrument of organization (that is, the organization's charter, articles of incorporation or organization, agreement of association instrument of trust, or constitution) only if the document has been issued or amended during the fiscal year being reported.				
10.	Does the organization solicit funds under any name or names other than as indicated on line 3 of this form? If "Yes," indicate all of the other names used:	□Yes	No		
11.	Does the organization intend to solicit contributions from the general public?	X Yes	□No		
12.	Is the organization authorized by any other state or jurisdiction to solicit contributions? If "Yes," please provide a list of those states or jurisdictions, below or on a separate sheet of paper. ALL STATES	Yes	□ No		
13.	Does the organization have affiliates which share the contributions or other revenue it raised in New Jersey? If "Yes," provide a separate listing of those affiliates indicating the name, street address and telephone number				
4	What is the charitable purpose or purposes for which the organization was formed? If necessary, attach a separ registration.	ate staten	nent to this		
	TO MAINTAIN AND SUPPORT THE ON-LINE ENCYCLOPEDIA OF INTEGER SEQUENCES				
14a.	What are the specific programs and charitable purposes for which contributions are used? For each program already exists or is planned. Only major program categories need be listed. If necessary, attach a separa registration. WEB HOSTING MATHEMATICAL SOFTWARE, EXHIBITS AT MATHEMATICAL CONFERENCES	am, state te statem	whether it ent to this		
15.	Does the organization use an independent paid fund-raiser or fund-raising counsel? If "Yes," please attach to this registration a list of paid fund-raiser(s) or fund-raising counsel(s), including their fund-raiser, fax number, registration number in New Jersey, and a contact person's name.	☐ Yes			
15a.	Does the independent paid fund-raiser or fund-raising counsel have custody, control or access to the organization. If "Yes," please describe the situation.	's funds? □ Yes	□No		
16.	Has the organization permitted a charitable sales promotion to be conducted on its behalf by a commercial confiscal year-end being reported? If "Yes," please explain:	-venturer Yes	during the		
17.	Has the Internal Revenue Service (I.R.S.) determined that the organization is tax exempt under code 501(c)(3 a. If "No," has an application been filed which is still pending? If so, please attach a copy of the I.R.S. 1023 form filed. b. Has a tax exemption been granted under another I.R.S. code? If "Yes," advise which one: Has an I.R.S. tax exemption been refused, changed or revoked?	□Yes	□ No □ No		
	c. Has an I.R.S. tax exemption been refused, changed or revoked? If an exemption has been refused, changed or revoked, attach to this registration a copy of the I.R.S. de notification and provide a detailed explanation of the circumstances on a separate sheet of paper.				

	organization ever entered into any voluntary agreement of discontinuance with any governmental entity? Yes No If "Yes," attach to this registration a copy of the denial, suspension, revocation or voluntary agreement of discontinuance. If the document does not explain the reasons for the denial, suspension or revocation, attach to this registration an explanation on a separate sheet of paper.
19.	Has the organization voluntarily entered into an assurance of voluntary compliance or similar order or agreement (including, but not limited to, a settlement of an administrative investigation or proceeding, with or without an admission of liability) with any jurisdiction, state or federal agency or officer? If "Yes," please attach to this registration the relevant document.
20.	Has the organization or any of its present officers, directors, executive personnel or trustees ever been found to have engaged in unlawful practices in the solicitation of contributions or administration of charitable assets or been enjoined from soliciting contributions, or are such proceedings pending in this or any other jurisdiction? If "Yes," attach to this registration photocopies of any and all written documentation (such as a court order, administrative order, judgment, formal notice, written assurance or other document) which show the final disposition of the matter.
21.	Has the organization or any of its present officers, directors, trustees or principal salaried executive staff employees ever been convicted of any criminal offense committed in connection with the performance of activities regulated under this act or any criminal or civil offense involving untruthfulness or dishonesty or any criminal offense relating adversely to the registrant's fitness to perform activities regulated by this Act? A plea of guilty, non vult, nolo contendere or any similar disposition of alleged criminal activity shall be deemed a conviction.
22.	Has the organization or any of its officers, directors, trustees or principal salaried executive staff employees been adjudged liable in any administrative or civil action involving theft, fraud, or deceptive business practices? For purposes of this question a judgment of liability in an administrative or civil action shall include, but is not limited to, any finding or admission that the individual engaged in an unlawful practice in relation to the solicitation of contributions or the administration of charitable assets. Yes No If "Yes," identify the individual(s) below and attach to this registration a copy of any order, judgment or other documents indicating the final disposition of the matter.
23.	Provide the following information for each officer, director, trustee and the five most-highly compensated executive staff employees:
	Name Business address Telephone number Title Salary (include area code)
	PLEASE SEE ATTACHED LIST OF 12 TRUSTEES.
	THE TRUSTEES DO NOT RECEIVE A SALARY.
	THERE ARE NO PAID STAFF

18. Has the organization ever had its authority to conduct charitable activities denied, suspended, or revoked in any jurisdiction or has the

As of March 27, 2015, there are twelve trustees. The trustees do not receive a salary. JUNE 10 2016: THE TRUSTEES ARE AS LISTED HERE: NO CHANGES. Applegate, David L. (Vice-president) 626 Prospect St, Maplewood, NJ 07040, USA Tel.: 973 763 3009 (h), 973 951 1260 (c), 973 360 7127 (o) (david(AT)research.att.com) Chandler, Ray (Treasurer) 7000 Briercliff Ct, Fort Worth, TX 76132, USA Tel.: 817-370-7772 (rayjchandler(AT)sbcglobal.net) Cox, Russ 378 Broadway #1, Cambridge, MA 02139, USA Tel.: 617 669 8617 (cell) (rsc(AT)swtch.com) Cuyler, Susanna Stevens (Secretary)

11 South Adelaide Avenue, Highland Park, NJ 08904, USA Tel.: 732 828 6098 (h) (SusannaCuyler(AT)gmail.com)

Duff, Tom 3111 Deakin Street, Berkeley, CA 94705-1950, USA Tel: 510 703 8195 (cell) (td(AT)pixar.com)

Graham, Ronald L. 1555 Coast Walk, La Jolla, CA 92037, USA Tel.: 858-551-1077 (H), 858 534-2086 (O) and 858-254-5945 (C). (graham(AT)ucsd.edu)

Greathouse, Charles, IV. 3214 Whitethorn Rd., Cleveland Heights, OH 44118, USA Tel: 216-368-6951 (oeis(AT)crg4.com)

Guy, Richard K. Dept. of Math. & Statist., University of Calgary, 2500 University Dr NW, Calgary, Alberta, CANADA T2N 1N4 Tel.: 403-282-0485 (h), 403-220-6314 (o) (rkg(AT)cpsc.ucalgary.ca)

LeBrun, Marc 80 Saddle Wood Dr, Novato, CA 94945, USA Tel.: 415-215-0355 (cell) (mlb(AT)well.com)

Munafo, Robert P. 10 Linwood St., Unit 304, Malden MA 02148 Tel.: 617-335-1321 (mobile) (mrob(AT)mrob.com)

Plouffe, Simon
Chateau Bois Briand, 10 Rue du Bois Briand, 44300 Nantes, FRANCE
Tel.: +33 970 460 350 (home)
(simon.plouffe(AT)gmail.com)

Sloane, Neil James Alexander (President)
11 South Adelaide Avenue, Highland Park, NJ 08904, USA
Tel.: 973 360 8415 (o), 732 828 6098 (h)
(njasloane(AT)gmail.com)

CRI-300R Long-Form Registration Renewal Financial Statement

Note: If the financial value of a line item = 0, place a zero in the space provided. Please report all figures as GROSS, not NET.

Full legal name al	ia street a	aaress of the organization	
Full legal name:	THE (EIS FOUNDATION INC	
Fiscal year-end bei	ng reporte	d: 12 / 31 / 2015 Federal ID Number (EIN) 30	0-0562250
Mailing address:	1 Ame	AVE HIGHLAND PARK, NJ P.D. Box Number or Suite City	02904
Mailing Ad	dress	P.O. Box Number or Suite City	State ZIP code
		ng organization: (Same)	
		Street Address City	State ZIP Code 727 6092
			number: 732 828 6098 (include area code)
forms. Attach a correceived gross results the financial report	py if the ovenue in ovenue	most recent Internal Revenue Service Form 990 and Schedule organization's annual financial report included an audited fexcess of \$500,000. Note: If the organization received certified by the organization's president or other authorized RI-300R Financial Statement pages, attached please find a copy	inancial statement, or if the organization gross revenue of less than \$500,000, officer of the organization's board.
indicated above.			
A. Receipts			
Line A1a. Dir	ect Public	Support received from the following sources:	21 212 21
	(1)	Direct mail INCLUDING PAY-PAL	21,312.96
	(2)	Telephone solicitation	
	(3)	Commercial co-venture	
	(4)	Gross receipts from fund-raising events	
	(5)	Canisters, counter cards, door to door etc	
	(6)	Corporations and other businesses	
	(7)	Foundations and trusts	
	(8)	Donated land, buildings, property, equipment and	
	(0)	I aggies and bequests	
	(9)	Legacies and bequests Membership dues solely resulting from	
	(10)	solicitations	
	(11)	Other support (specify)	
	(11)	Other support (specify)	0
Line A1b. Tot	al Direct F	Public Support (add lines A1a(1) through A1a(11)	21,312.96
Line A1c. Ind	irect Publi	c Support received from the following sources:	
	(1)	Federated fund-raising organization	
	(2)	From an affiliated organization	
	(3)	From another fund-raising organization	
Line A1d. To	tal Indirec	t Public Support (add lines Alc(1) thru A1c(3))	
		Contributions (add lines A1b and A1d)	21,312.96

		ernment grants including purchase of service contracts (specify ager a. b. c. d. Government Grants (add lines 2a thru 2d).	ncy)
	Line A3. Othe	er Support	
		 a. Bona fide membership b. Program service revenue c. Professional services rendered by volunteers d. Miscellaneous income (specify) 	17.10
	Line A3e. Tota	al Other Support (add the total of lines A3a thru A3d)	17.10
		al Gross Revenue (add lines A1e, A2e and A3e)	21,330.06
B.	Expenses		Y
	Line B1. Line B2. Line B3. Line B4. Line B5.	Program expenses	6,514.79 2,57.78 3,093.82 9,866.39
C.	Excess or For the fiscal y	Deficit year-end (subtract line B5 from line A4)	11,463.67
D.	Fund Bala	ance	
	Line D1. Line D2. Line D3.	Net assets or fund balances at beginning of year Other changes in net assets or fund balances (attach explanation) Net assets or fund balances at end of year (Combine line C, D1 and D2)	73,015.98

Please Note: The amount of Gross Contributions (line Ale on this form) determines the registration fee which must be paid and the form which should be used. July 2006 revisions to the Charities Registration Act now require all charities to pay a registration fee, including charities whose Gross Contributions are less than \$10,000. Further information for charity registrants may be found on our Web site: http://www.njconsumeraffairs.gov/ocp/charities.htm.

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Long-Form Renewal Registration Statement Form CRI-300RC Confidential Information

	Organization's Name: THE OEIS FOUNDATION INC
	N.J. Charities Registration Number: CH - 32289 -00 Federal ID Number (EIN) 30 0562250
	Fiscal Year-End being reported: 12 / 31 / 2015 month day year
24.	Are any of the organization's officers, directors, trustees or the five most-highly compensated employees related by blood, marriage or adoption to:
	a. each other?
	b. any officers, agents or employees of any fund-raising counsel or independent paid fund-raiser under contract to the organization?
	c. any chief executive, employee, any other employee of the organization with a direct financial interest in the transaction, or any partner, proprietor, director, officer, trustee, or to any shareholder of the organization with more than two (2)
1	percent interest in any supplier or vendor providing goods or services to the organization?
	d. If you answered "Yes," to questions 24a, b, or c, please provide a statement explaining these relationships.
25.	Do any of the organization's officers, directors, trustees or the five most-highly compensated employees have a financial interest in any activities engaged in by a fund-raising counsel or independent paid fund-raiser under contract to the organization, or any supplier or vendor providing goods or services to the organization? Yes," please detail these relationships below or on a separate sheet of paper, and provide the name, business address and telephone number of all interested parties.
of the	inderstand that this registration is being issued at the discretion of the Division of Consumer Affairs and agree that employees e Division may inspect the records in the possession of this organization in order to ascertain compliance with the statute and all nent regulations. We also understand that we may be required to provide additional information if requested.
of the	ereby certify that the above information and the attached financial schedule(s) and statement(s) are true. We are aware that if any e above statements are willfully false, we are subject to punishment. Name NEIL J.A. SLOANE Title PRES IDENT Date 5/15/2016 This form must be signed by two (2) authorized officers of the organization, including the chief financial officer.

Note: Form CRI-300RC must be filed with Form CRI-300R.

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Renewal registrants who are required to file the Long-Form Renewal Registration/Verification Statement CRI-300R/RC must submit the following:

- (1) A fully completed Long-Form Renewal Statement CRI-300R along with the CRI-300R Financial Statement, the CRI-300RC Confidential Information Statement (with signatures), and all lists, statements and attachments as may be required by answers to the form's questions.
- All charity registrants in New Jersey must pay a registration fee based on gross contributions. Please visit our Web site at www.njconsumeraffairs.gov for a complete schedule of registration fees due. A check or money order for the registration fee due, made payable to the New Jersey Division of Consumer Affairs, must accompany the registration form. Cash or credit card payments cannot be accepted. Initial registrations must be submitted prior to soliciting in the State of New Jersey. Registrations must be renewed annually, and are due within six months of the fiscal year-end. Extensions of time to file cannot be granted on initial (first-time) registrations.
- (3) Charity registrants with total gross revenue in excess of \$500,000 annually are required to submit a certified audit (including any management letters) which has been prepared by a certified public accountant.
- (4) Please write the organization's charities registration number on all checks, forms, and copies of documents submitted.
- (5) If the charity was required by the Internal Revenue Service to file an IRS-990 form for the organization's fiscal year-end being reported, a copy, including Schedule A, must be submitted with the registration form.
- Photocopies of any orders, judgments, agreements or other documents which show the final disposition of any civil or criminal actions brought against the organization or its board members, must be marked with the related question number and the charities registration number.
- Only initial registrants must submit photocopies of the organization's bylaws, the certificate of incorporation and the I.R.S. determination letter. However, copies of these documents must be resubmitted each time they are amended.
- (8) Mail the completed registration, enclosures and any attachments to the:

New Jersey Division of Consumer Affairs Charities Registration & Investigation Section P.O. Box 45021 Newark, NJ 07101

Should you have questions regarding charities registration in New Jersey, please visit our Web site at http://www.njconsumeraffairs.gov/ocp/charities.htm where registration information, instructions, forms and a fee schedule may be viewed and/or downloaded. After reading through all of the information on our Web site, if you have further questions, please contact the Charities Registration Section at our hotline number (973)-504-6215 during regular business hours.