

| **Application Cover Sheet** |
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| Organization’s legal name: (as shown on IRS Letter of Determination) |  |
| Doing business as: (if different from legal name) |  |
| EIN #: |  |
| Address: |  |
| City:  |  | State:  |  | ZIP code:  |  |
| Org. Telephone #: |  | Org. Fax #:  |  |
| Org. Website: |  | Org. Email Address: |  |
| Executive Director:(or top executive) | (Please include prefix and title) | Phone #: |  |
| Email address: |  |
| Main contact(s) for this proposal: | (Please include prefix and title) | Phone #:  |  |
| Email address: |  |

| Organization’s tax exempt status/IRS designation (e.g., 501(c)(3), 501(c)(9), etc.) | (Attach a copy of the IRS Letter of Determination. NOTE: this is not the state sales and use tax exemption certificate. If there has been a name change, provide copies of the amended state certificate of incorporation and amended IRS Letter of Determination.) |
| --- | --- |
| What year was your organization incorporated? |  |

| Organizational annual budget: | $ |
| --- | --- |
| Organization fiscal year: |  / / through / / |
| Geographic area(s) served:(include specific counties) | (For this project. If general operations support, for this organization.) |

| Organization’s Mission |  |
| --- | --- |
| Provide a 2-3 sentence summary of your funding request.  |  |
| Provide a demographic breakdown of the organization’s leadership and board of directors. |  |
| Please select the funding category your request most closely aligns with.  | * Operational
* Programmatic
* Financial
* Organizational maturity
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| Agreement |
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| *I certify, to the best of my knowledge, that all information included in this proposal is correct. The tax exempt status of this organization is still in effect. If a grant is awarded to this organization, then the proceeds of that grant will not be distributed or used to benefit any organization or individual supporting or engaged in unlawful activities.**In compliance with the USA Patriot Act and other counterterrorism laws, I certify that all funds received from this funder will be used in compliance with all applicable anti-terrorist financing and asset control laws, statutes, and executive orders.* |

|  |  |  |
| --- | --- | --- |
| Signature & Title of Authorized Representative (e.g. Executive Director) |  | Date |

| **REQUIRED ATTACHMENTS** |
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| 1. **Copy of the current IRS Letter of Determination indicating tax-exempt status.**
2. **If applicable: Memorandum of understanding or contract between the organization and the fiscal agent/fiscal sponsor.**
3. **Documentation of organization and/or program strategy and impact**
4. **Financials**
	* **Organization’s most recently filed Form 990**
	* **Income statement from current fiscal year**
	* **Itemized budget for requested funds**
5. **Narrative, must address the following:**
	* **Any internal or external efforts your organization is currently undertaking to incorporate diversity, equity, and/or inclusion (DEI) into its policies and practices.**
	* **How the organization incorporates community input in decision-making and DEI work.**
	* **How the demographics of the community/clients served by the organization are reflected in leadership and staff- additionally, please include why the organization considers itself black-led.**
	* **A description of the organization’s client population and what services the organization offers them.**
	* **How the requested funds will be used to advance the client population’s financial capability and define what success for this request would look like for your organization.**
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| **Please read the following statements and check both the boxes certifying that this application is complete according to the requirements set forth by the grantmaker.** |
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|       I have reviewed the website or spoken with the grantmaker to whom I am submitting this application and have reviewed their mission, funding interests, process, and requirements to determine if my request is a funding fit.      I have included in this application any additional materials and attachments required by this funder. |