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| **Vatterott Foundation**  **Cover Sheet** | | | | | | |
| Application Date: |  | Org Website: |  | | | |
| Applicants Legal Name: (as shown on IRS Letter of Determination) |  | | | | | |
| Doing Business As: (if different from legal name) |  | | | | | |
| EIN #: |  | | | | | |
| Address: |  | | | | | |
| City: |  | State: |  | | Zip code: |  |
| Telephone #: |  | Fax #: | |  | | |
| 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: | |  | | |
| Board President: |  | Phone #: | |  | | |
| Email Address: | |  | | |

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| Applicant’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) |
| If not a 501(c)(3) Nonprofit, then who is fiscal agent? | (Attach a copy of the written agreement from fiscal agent plus fiscal agent’s contact information and EIN) |

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| Organization’s mission statement: |
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| Type of request (check one): Note, not all funders support each type of request. Check with individual grantmaker. | | | |
| [ ] Program/Project | |  | |
| [ ] General Operating Support | |  | |
| [ ] Other (explain) | |
|  | | | |
| [ ] New Project | [ ] Existing Project | | [ ] Expansion of Existing Project |

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| Project/Campaign Name:  (if general operating please indicate) | |  | | |
| Proposal Summary - In 100 words or less summarize the purpose of this request. | | | | |
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| Funding Period Requested: (be specific) | / / through / / | | Amount Requested: | $ |
| Total Project Budget for this period: (not required if general operating request) | $ | | Current Annual Organizational Budget: | $ |
| Organization Fiscal Year: | / / through / / | | | |
| Geographic Area(s) Served:  (include specific counties) | (For this project. If general operations support, for this organization.) | | | |

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| List applicant’s membership of a giving federation: (e.g., United Way, Arts & Education Council, Jewish Federation, Earthshare Missouri) |  |

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| Agreement |
| *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.* |

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| Signature, Executive Director  *(or authorizing official on behalf of the organization)* |  | Date |