

The Marilyn Lichtman Foundation

GRANT APPLICATION

Thank you for your interest in the Marilyn Lichtman Foundation grant program. Please complete the below application and submit it to RBrull@marilynlichtmanfoundation.org with the subject line "Grant Application from [Name of Applicant Organization]". Please use PDF files rather than ZIP files for any submission. Incomplete applications will not be reviewed or considered. Please contact us at RBrull@marilynlichtmanfoundation.org with any questions.

1.	Date:					
2.	Amount of grant request: \$					
3.	. Name of Organization to which grant would be paid:					
	Please list exact legal name.					
4.	Address of Organization:					
5.	Employer Identification Number (EIN)/Federal Tax ID#:					
6. Executive Director (or CEO or President, if the Organization has no Executive Director):						
	a. Name:					
	b. Telephone Number:					
	c. Email address:					
7.	Grant Writer/Grant Contact:					
	a. Name:					
	b. Telephone Number:					
	c. Email address:					

Has your organization previously applied for a grant from the Marilyn Lichtman Foundation?						
Yes [□ or No □					
a.	If yes, please pr	rovide date(s) of	f prior Grant Application	on(s):		
b.				s) of Grant Notification and Acceptance amount of the grant(s) received:		
	i. Date: _		Amoun	nt \$		
	ii. Date: _		Amoun	nt \$		
	iii. Date: _		Amoun	nt \$		
	iv. Date: _		Amoun	nt \$		
	Report(s) to the	Marilyn Lichtr		s) your organization submitted the Gran		
Brief e	•	ow the Organiza		ole mission and meets its goals, and how		

13.	What would this grant be used for?					
	a. To provide general support to the Organization \square					
	b.	To help the Organization with a specific program or project \Box				
		•	3(b) above, please provide additional information about the program or project out with the grant funds, including:			
		(i)	the name of the project,			
		(ii)	a summary of the program or project's objectives and goals including who will benefit from it,			
		(iii)	the projected total program or project budget/cost,			
		(iv)	the projected duration of the program or project,			
		(v)	how the grant funds would be used in connection with the program or project and			
		(vi)	the expected outcomes of the program or project. Attach additional sheets if necessary.			
14.	In wha	t geographic loca	tion(s) will the grant funds be used?			
15.	How often does the Organization's board of directors meet?					
16.	Does the Organization's board of directors have a finance committee: Yes □ No □					
17.	Does the Organization have an annual budget that is approved by the board of directors? Yes □ No □					
18.	Does the Organization have quarterly cash flow and/or other financial statements? Yes □ No □					
	a.		arterly cash flow and/or financial statements reviewed by the board of directors ith the annual budget? Yes □ No □			

- 19. In addition to completing the above sections, please also submit:
 - a. a copy of your Organization's IRS tax exemption determination letter,
 - b. your most recent audited financial statements,
 - c. a copy of your most recent IRS Form 990, and
 - d. a copy of any public promotional materials used by your Organization or a link to such materials.

[Please do not use ZIP files to submit this Grant Application or any supporting documentation. Please use PDF files instead.]