



# 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](mailto:RBrull@marilynlichtmanfoundation.org) with the subject line “Grant Application from [Name of Applicant Organization]”. Incomplete applications will not be reviewed or considered. Please contact us at [RBrull@marilynlichtmanfoundation.org](mailto:RBrull@marilynlichtmanfoundation.org) with any questions.

1. Date: \_\_\_\_\_
2. Name of Organization to which grant would be paid: \_\_\_\_\_

Please list exact legal name.

3. Brief summary of the Organization’s history, charitable mission and goals:

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4. Reason you are requesting grant funds:

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One-two sentences only, please.

5. Address of Organization: \_\_\_\_\_

6. Employer Identification Number (EIN)/Federal Tax ID#: \_\_\_\_\_

7. Executive Director (or CEO or President, if the Organization has no Executive Director):

a. Name: \_\_\_\_\_

b. Telephone number: \_\_\_\_\_

c. Email address: \_\_\_\_\_

d. Fax number: \_\_\_\_\_

8. Is your Organization a 501(c)(3) non-profit? Yes  or No

a. If no, please explain:

\_\_\_\_\_

9. Amount of request: \$ \_\_\_\_\_

10. What would this grant be used for?

a. To provide general support to the Organization

b. To help the Organization with a specific program or project

If you checked by 10(b) above, please provide additional information about the program or project you wish to support 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 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.

\_\_\_\_\_  
\_\_\_\_\_

11. In what geographic location(s) will the funds be used? \_\_\_\_\_

12. Has your organization previously applied for a grant from the Marilyn Lichtman Foundation?

Yes  or No

a. If yes, please provide date(s) of prior Grant Application(s): \_\_\_\_\_.

b. If yes, and a grant was received, please provide date(s) of Grant Notification and Acceptance Letter(s) from the Marilyn Lichtman Foundation and amount of the grant(s) received: \_\_\_\_\_.

c. If yes, and a grant was received, please provide date(s) your organization submitted the Grantee Report(s) to the Marilyn Lichtman Foundation: \_\_\_\_\_.

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In addition to completing the above sections, please also submit (1) a copy of your Organization's IRS tax exemption determination letter, (2) your program/project budget, (3) audited financial statements from your Organization's last fiscal year, (4) a copy of your most recent IRS Form 990, and (5) a copy of any public promotional materials used by your Organization or a link to such materials.