Grant Application Edward B. & Joan T. Knight Grant maker to Charitable Foundation, Inc. whom this application is **2010 Staples Avenue** submitted: Key West, FL 33040 **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 #: Phone #: **Executive Director:** (or Top Executive) **Email Address:** (Please include prefix and title) Phone #: Main Contact(s) for this Proposal: **Email Address:** (Please include prefix and title) Phone #: **Board President: Email Address:** 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 specify your IRS filing status (Attach a copy of your written agreement with the related exempt organization, contact information and Federal EIN) Organization's mission statement: (If mission statement exceeds 340 character, please attach as an addendum)

Capacity Building			Program/Project			
Capital			Other (explain)			
General Operating Support						
pecific type of project (check	one):	_				
New Project		Existing Project		Expansion of Existing Project		
		1				
roject/Campaign Name: f general operating please indicate)						
roposal Summary: (If propos	al summa	ry exceeds 340 characte	er, please attach as an	addendur	n)	
unding Period Requested: pe specific)			Amount Requested:	*	US \$'s only	
otal Project Budget for this	US \$'s		Current Annual		US \$'s	
eriod: (not required if general perating request)	only		Organizational Budg	et:	only	
Organization Fiscal Year:						
Geographic Area(s) Served:						
include specific counties)						
	(For this	project. If general operations	support, for this organizatio	n.)		
ist applicant's membership						
of a giving federation: (e.g., Inited Way, Arts & Education						
ouncil, Jewish Federation)						
Agreement: certify to the best of my know	uladaa t	hat all information inclu	dod in this proposal is	courset T	ho tay o	vommt status of this
organization is still in effect. I						
or used to benefit any organiz	ation or i	ndividual supporting or	engaged in unlawful (activities.		
n compliance with the USA Po	itriot Act	and other counterterro	rism laws I cortify tha	t all funds	received	from this funder wil
n compliance with the OSA Po ne used in compliance with all						
·						
gnature, Executive Director			Date			

(or authorizing official on behalf of the organization)

^{*} Note: The amount requested may be modified at the discretion of the Board of Trustees.

In a maximum of two-pages, please include:

- 1. Brief organizational history and brief description of previous year's accomplishments.
- 2. Purpose of this funding request. Please describe:
 - a. Community needs or problems to be addressed by this project/organization.
 - b. The target population, number of individuals, and geographic area that will benefit from this proposal.
 - c. What you hope to accomplish (outputs and/or outcomes), and
 - d. How you intend to accomplish the above.
- 3. Names and brief description of roles of partners on this project (if applicable).

Required attachments:

- 1. Project budget.
- 2. Organization's current budget.
- 3. IRS Letter of Determination

Mail application, supporting documents and attachments to:

Edward B. & Joan T. Knight Charitable Foundation, Inc. 2010 Staples Avenue
Key West, FL 33040