



Grant # \_\_\_\_\_  
(for TCF office record)

## LOI Proposal Coversheet – 2018

### 1. Applicant Information:

Organization / Agency:

Executive Director:

Mailing Address:

Telephone:

Fax:

Email:

Website:

Federal Tax ID (EIN#):

### 2. LOI Request – Please select one:

Core Support

Specific Project Title: \_\_\_\_\_

### 3. Organization's Mission Statement:

4. Please add two or three sentences outlining the work of your organization and any highlights you would wish to be shared with fund-holders and committee members.

## Taos Community Foundation Non-Profit Documentation Checklist / Signature Page

Place a check in each box to certify that you have a current copy of these documents on file and can provide these documents if your LOI Proposal is accepted for funding or additional review. **Do not send hard copies of the following items.** Please sign below.

- Board Contact List for Non-Profit Programs – indicating board members’ names, community affiliations and contact information.
- Organization’s most recent 990 filed with the IRS. Filing Year: \_\_\_\_\_
- Current Organizational Budget, Profit & Loss Statement **and** Balance Sheet.
- If you are not a 501(c) (3), you must have a Fiscal Sponsor/Agent, please provide the following:

Fiscal Sponsor Organization: \_\_\_\_\_

Is there a written sponsorship agreement in place?       YES       NO

By signing this LOI Proposal, I am endorsing the accuracy of it and the commitment of my organization to implement the proposed scope of work as it is described.

**Organization Name:** \_\_\_\_\_

\_\_\_\_\_  
**Executive Director**

\_\_\_\_\_  
**Date**