Insurance Industry Charitable Foundation

Helping communities and enriching lives, together.

ALL IICF GRANTEES MUST BE PUBLIC CHARITIES WITH 501(c)(3) STATUS – PLEASE ATTACH YOUR IRS DETERMINATION LETTER TO THE APPLICATION

- **Grant proposals are due no later than 5:00PM Friday, May 31, 2019.**
- **Please send all documents electronically: IRS Letter, Application, Part B/Additional Pages.**
- **Please DO NOT send paper copies.**
- **Please include your organization's name or acronym in the name of each electronic document that you send (Example: IICF-APPLICATION).**
- **Please name your documents consistently.**
- **IF YOU NEED MORE SPACE THAN IS PROVIDED ON THE FORM, YOU MAY SEND AN ADDITIONAL PAGE WITH YOUR APPLICATION. PLEASE LABEL IT: Your organization name or acronym – Part B**

Please send application and supporting documentation to: Lauren Pincus, Associate Director, Insurance Industry Charitable Foundation, Northeast Division: **Email: lpincus@iicf.com Phone: (973) 879-5497**

SPONSOR INFORMATION	
Sponsoring Insurance Company Name	
Sponsoring Individual Name	
Sponsoring Individual Contact Details (phone and email)	
NONPROFIT APPLICANT INFORMATION	
Applicant/Nonprofit Name	
Nonprofit FEIN	

Nonprofit Primary Contact (name and title)	
Nonprofit Address	
Nonprofit Primary Contact Details (direct phone number and email)	
Mission of the Organization	
Description of Proposed Project	
If Awarded, HOW Will the Grant be Acknowledged and Recognized?	
Financial Summary from most recent 990* *Please use line 4e in part three: total program service expenses and in part one, line 18: total expenses for the current year to complete this section.	**Total revenue:** _____ **Total expenses:** _____ **Total program expenses:**_____**** from 990 Statement of Functional Expenses** **Ratio of program expenses to total expenses:**____**%** **Do you receive government funding? If yes, what percentage of your revenue is government funding? _____%** **How does the current revenue compare to the previous year (up/down by $?)**