

ORGANIZATION'S APPLICATION FOR GRANT FROM PRIVATE FOUNDATION  
(NOT FOR USE BY INDIVIDUALS)

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TO: The Bradenton Rotary Foundation Incorporated  
P.O. Box 1117  
Bradenton, FL 34206

FROM: (Name of Applicant & Address)

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

PART 1. INFORMATION ABOUT THE APPLICANT

1. Is the applicant organized as a nonprofit organization under State laws governing charitable organizations?  Yes  No

If yes, what State or Commonwealth governs? \_\_\_\_\_

If no, please explain:

2. Has the applicant received a ruling or determination letter from the Internal Revenue Service about any of the following:
- (a) Exempt status.....[  Yes [  No
- (b) Private foundation status.....[  Yes [  No
- (c) Grant-making procedures.....[  Yes [  No

Attach a copy of each such letter.

If any item is marked no, please explain:

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3. Describe the applicant's purposes and activities in general: Attach separate sheet if necessary.

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4. Is the applicant controlled by, related to, connected with, or sponsored by another organization?.....[  ] Yes [  ] No

If yes, give name of organization(s)

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5. Has the applicant (or any organization listed in 4 above) ever applied for or received a grant from this Foundation?.....[  ] Yes [  ] No

If yes, give details: Attach separate sheet if necessary.

PART 2. USE OF THE PROPOSED GRANT

1. Show the amount requested and explain in detail how it will be used. State whether the grant is to be earmarked for the use or benefit of any one person, group, or class of people. If so, for whom? Attach separate sheet if necessary.

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2. Person to contact who will be administering the program:

\_\_\_\_\_  
(Print or type Name)

\_\_\_\_\_  
(Title)

\_\_\_\_\_  
(Street address)

\_\_\_\_\_  
(City, State & ZIP Code)

\_\_\_\_\_  
(Area Code and Telephone Number)

Describe this person's experience and qualifications to administer the program: Attach separate sheet if necessary.

From my own knowledge, I state the information given in PARTS 1 and 2 is correct. The applicant organization has authorized me to make this application.

SIGNATURE \_\_\_\_\_

PRINT/TYPE NAME \_\_\_\_\_

TITLE/OFFICE \_\_\_\_\_

DATE \_\_\_\_\_

The information in Parts 1 and 2 is to help the grantor foundation meet the requirements of Section 4945(h) of the Internal Revenue Code.