

## **Woods Charitable Fund Letter of Intent (LOI)**

***WCF requires a Letter of Intent from any organization interested in applying for a grant. Please complete this form or provide a prepared document that answers all questions in this form. After receiving your emailed LOI, WCF staff will notify you of receipt.***

***LOIs are due by the end of the day (11:59 p.m.) February 15 and August 15 to one or all of the email addresses at the end of this form.***

### Request Information

Organization Name

Project Name

Request Amount

Request Summary

*(Provide information about the organization, project or program for which you seek funding. Please include if this project is especially time-sensitive or needed at this time.)*

Organization's Operating Budget

Project or Program Budget

*(Please note how this WCF request would fit into this budget and indicate how the remainder of the budget may be raised if known. WCF rarely funds 100% of a project budget.)*

### Organizational Information

- Organization website, Facebook page or other social media presence, if available
- Mission Statement
- How long has your organization been a 501 c(3)?

- Please provide your EIN.  
*(If the organization is not its own 501(c)3, please provide the name of its fiscal sponsor and that agency's EIN.)*
- Number of staff  
*(specify full-time, part-time, or volunteer)*
- Number and composition of board members  
*(Race, ethnicity and gender identity required; other aspects of diversity relevant to your mission are optional. WCF's Board of Directors prioritizes applicants with boards that are diverse and representative of the Lincoln community and/or the people the agency serves.)*
- Is the governing board fully independent? (Yes or No)  
  
*(Board members are considered independent if they are not related by family or marriage to another board member; not compensated as an officer or other employee of the organization; did not receive compensation in excess of \$10,000 during the organization's tax year; were not involved in financial transactions with the organization or with a related organization, nor was a family member involved in a financial transaction with the organization or with a related organization.)*
- Are any staff members related by family or marriage to another staff member or a board member? (Yes or No) If so, please describe relationship.
- Is the organization a member of Cause Collective? (Yes or No)
- Woods Charitable Fund affirms its [commitment to diversity](#) and believes its goals can best be accomplished by supporting organizations and programs that reflect a diversity of perspectives. Please read this statement and affirm that your organization and/or program for which you are seeking WCF support fit this statement.

*Once complete, please email your LOI to [Tom](#), [Kathy](#) or [Nicole](#). LOIs will be reviewed following the submission deadline, and those organizations invited to apply will receive a link to the full application. Organizations will be notified if they are not invited to apply.*