

# 24\_Winter\_Annual

*NW Children's Foundation*

## *Internal Use Only - Post-LOI Evaluation*

**Other - add notes here:**

*Character Limit: 250*

## *LOI Overview & Guidance*

### **LOI Guidance**

- Please note that character limits **do** include spaces.
- You may draft your responses in Word and then copy and paste them into the form. Formatting in Word (bullet points, bolded text etc.) **will not** carry over into the eGrant form.
- To preview questions (in Word), visit the Letter of Inquiry page on our website. To preview in PDF format, click the "Question List" button at the top right of the LOI form.
- To return later to finish or submit your request, click "Save" at the bottom of the form.
- To preview your request prior to submission, click the "LOI Packet" pdf button at top right.
- More than one person may work on the same LOI. Once you've started, you may use the Collaborate button at the top of the page to invite others to work on the request with you. View this short video tutorial for more details.

## *Organization Overview*

**Number of Clients Served Annually by your Organization\***

*Character Limit: 250*

### Organization Budget Total\*

Please insert the total amount of your organization's operating budget (total expenses) for the current fiscal year. *Exclude in-kind income/expenses.*

*Character Limit: 20*

### Organization's General Mission\*

Describe the mission of your organization.

*Character Limit: 500*

### Primary Geographic Area Served (by this request)\*

Please select the primary geographic area(s) that your organization provides services in. (Note: Our grantmaking is restricted to western Washington. Though we sometimes expand our reach, our grants predominantly support programs located in King, Snohomish, Pierce and Kitsap counties).

#### Choices

Clallam  
Clark  
Cowlitz  
Grays Harbor  
Island  
Jefferson  
King  
Kitsap  
Lewis  
Mason  
Pacific  
Pierce  
Skagit  
Skamania  
Snohomish  
Thurston  
Wahkiakum  
Whatcom  
Other

### Application Title\*

If your organization is requesting funds for a specific project/program please enter the project/program name.

If you are requesting funds for **general operating expenses**, enter "**General Operating**" as the **Application title**.

*Character Limit: 150*

## Type of Funding\*

### Choices

General Operating  
Program/Project

## For Program/Project Requests Only

### Program/Project Budget Total

If you are applying for a specific program or project, please include the amount of the program/project budget.

*Character Limit: 20*

### 990 Program Expense Ratio

For each of the two most recent years for which you have filed a Form 990, provide your organization's Program Expense Ratio using the data found on Line 25 of the 990's Statement of Functional Expenses (Part IX). This percentage may be obtained dividing the total Program Service Expenses (column B) by the Total Expenses (column A).

### Fiscal Year Ending

(date only)

*Character Limit: 10*

### Program Expense Ratio

(percentage only)

*Character Limit: 10*

### Fiscal Year Ending

(date only)

*Character Limit: 10*

### Program Expense Ratio

(percentage only)

*Character Limit: 10*

### Number of Clients Served by this Program

*Character Limit: 250*

## *Project Funding*

**For all of the questions in the following group, please respond with information related to your Program/Project.**

### **Choices**

I understand that the questions below are to reflect the program/project.

## *Funding Request*

---

### **Amount Requested\***

Please note that our grants generally range from \$5,000 to \$20,000 and do not exceed \$30,000.

*Character Limit: 20*

### **Proposed Use of Grant Funds\***

(including the target clients/risk factors addressed, the intended outcomes of your work, how you evaluate those outcomes, and how the use aligns with NWCF's mission.)

*Character Limit: 5000*

## *Feedback*

---

### **LOI Process Feedback**

We are always trying to streamline our grantmaking process to ensure that we are collecting the information we need without creating too much of a burden for applicants. We welcome your feedback and/or suggestions, if any.

There's no right or wrong answer here, and your answer (or decision to leave this blank) will in no way influence our evaluation of your grant request. Thank you!

*Character Limit: 500*