

# TheJoyceFoundation

70 W. Madison Street, Suite 2750, Chicago, Illinois 60602

## GRANT PROPOSAL COVER SHEET

Please attach completed sheet to your proposal.

Name of Applicant		Date		
Address				
City		State		Zip
Telephone			Fax	
E-mail			Web site	
CEO		Telephone		E-mail
Project Manager		Telephone		E-mail
Financial Contact		Telephone		E-mail
Date Organization Began Operations				
Number of Staff		Full-Time		Part-Time
Total Operating Expenses (for most recently completed fiscal year)				
Estimated Duration of Project		Beginning		Ending
Budget		(Multi-Year Requests)		
	2010 (1st year)	2011 (2nd year)	2012 (3rd year)	Total
Budget Total	\$	\$	\$	\$
From Joyce	\$	\$	\$	\$
Brief Description of Project				
Geographic Area Served by Project				
Beneficiary Group(s) Targeted by Project (racial, ethnic, gender, age, income level)				
IRS Public Charity Status (circle one):		509(a)(1)	509(a)(2)	509(a)(3)
If a 509(a)(3) Supporting Organization, Type I, II or III?				
Other IRS Designation:				
Federal Tax Identification Number (EIN):				

Proposal must arrive at the Joyce Foundation by the proposal deadline and must include the following:

- |  |   |
|--|---|
| <input type="checkbox"/> Executive summary                             | <input type="checkbox"/> Organizational expenses and income |
| <input type="checkbox"/> Information on the project                    | <input type="checkbox"/> Board members                      |
| <input type="checkbox"/> Description of the organization               | <input type="checkbox"/> IRS verification                   |
| <input type="checkbox"/> Itemized project budget                       | <input type="checkbox"/> Audited financial statements       |
| <input type="checkbox"/> Key-project contacts and their qualifications | <input type="checkbox"/> IRS Form 990                       |