



# Nisqually Indian Tribe Charitable and Local Government Funds Guidelines

---

## To Apply for Support:

Read the General Guidelines below to determine if your organization or project will qualify for consideration for Charitable Funds or for Local Government

## Application:

Each organization will be allowed **only one** application yearly.

## Local Government

To qualify your organization must be non-tribal, organized to provide emergency services and/or service agencies (including those agencies responsible for traffic and transportation), or be a Law Enforcement agency.

## Charitable Funds

To qualify your organization must be registered as a 501 (c)(3) tax exempt status with the Internal Revenue Service and be within Washington State. *(Please note Thurston County will be the main priority of funding, then if funds remain other locations may be considered).*

- If you are claiming 501(c)(3) Status you must attach official documentation
- All Applications are due by **September 29, 2017**
- Fund recipients will receive an invitation for two (2) via mail, make sure your address is correct on the application.
- Recipients who do not receive fund will get a notice of denial.
- Completed Applications are to be either emailed or mailed to:

**Nisqually Indian Tribe**  
**Attn: Lori Lund**  
**4820 She-Nah-Num Dr. SE**  
**Olympia, WA 98513**  
**Email: [lund.lori@nisqually-nsn.gov](mailto:lund.lori@nisqually-nsn.gov)**

## Check List

- Attached 501(c)(3) documentation
- W-9 form attached
- Current address and phone number
- Completed application

For questions or more information, please contact Lori Lund at (360) 456-5221 ext. 1237.



# Nisqually Indian Tribe Charitable and Local Government Funds

## 2017 Charitable Fund 501(C)(3) Application

---

To qualify your organization must be registered as a 501(c)(3) tax exempt status with the Internal Revenue Service and provide service within Washington State. (Please note; Thurston County will be the main priority of funding first, then if funds remain other locations may be considered).

Amount requested: \$ \_\_\_\_\_

Organizations name: \_\_\_\_\_

Mailing address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Web address: \_\_\_\_\_ Email: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Geographical area served \_\_\_\_\_

Ages of persons served \_\_\_\_\_

501 (C)(3) Status?  Yes (If yes please attach certification)  
 No

You must attach a brief description of the principle purpose for your request. (Summarize in a short paragraph the purpose of your organization, why you are requesting funding, what outcome you hope to achieve).

Please keep entire application packet, including attachments, to a maximum of four (4) pages. Please note; anything submitted for review will not be returned.

### Deadline is September 29, 2017

\_\_\_\_\_  
Chief Executive Officer (CEO) or President

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Point of Contact Name

\_\_\_\_\_  
Phone



# Nisqually Indian Tribe Charitable and Local Government Funds

## 2017 Local Government Application

---

To qualify your organization must be non-tribal, organized to provide emergency services and/or service agencies (including those agencies responsible for traffic and transportation), or be a Law Enforcement agency.

Amount Requested: \$ \_\_\_\_\_

Organizations Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Web Address: \_\_\_\_\_ Email: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Geographical Area Served \_\_\_\_\_

You must attach a brief description of the principle purpose for your request. (Summarize in a short paragraph why you are requesting funding, what outcomes you hope to achieve). Please keep entire packet, including attachments, to a maximum of four pages. Please note; anything submitted for review will not be returned.

## Deadline is September 29, 2017

\_\_\_\_\_  
Chief Executive Officer (CEO) or President

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Point of Contact Name

\_\_\_\_\_  
Phone



# Nisqually Indian Tribe Charitable and Local Government Funds

## 2017 Community Impacts

---

To qualify under this section, your Program must be reoccurring or a new Program with the Nisqually Indian Tribe and have an impact on the Community by assisting the Tribe and its Members in becoming self-sufficient. Please submit this application to Lori Lund at [lund.lori@nisqually-nsn.gov](mailto:lund.lori@nisqually-nsn.gov) Please note, should you receive these funds a report must be submitted (to the Tribal Council Treasurer) and funds must be spent by December 31, 2018.

Amount Requested: \$ \_\_\_\_\_

Program Name: \_\_\_\_\_

Department: \_\_\_\_\_

Members/Community Members Served: \_\_\_\_\_

Ages of Persons Served \_\_\_\_\_

You must attach a brief description of the principle purpose for your request. (Summarize in a short paragraph the purpose of your program, why you are requesting funding, what outcome you hope to achieve). Please keep entire application packet, including attachments, to a maximum of four (4) pages. Please note; anything submitted for review will not be returned.

### **Deadline is October 31, 2017**

\_\_\_\_\_  
Chief Executive Officer (CEO) or President

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Point of Contact Name

\_\_\_\_\_  
Phone