

Organization's Application for Grant from

THE WOLD FOUNDATION

139 West Second Street, Suite 200
Casper, Wyoming 82601

(Not for use by individuals)

Name of Applicant: _____

Address: _____

City, State, Zip Code: _____

Part I – 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 from the Internal Revenue Service about any of the following?

(a) Exempt Status (b) Private Foundation Status (c) Grant-making Procedures

Attach a photocopy of each such letter. If any item is not checked, explain:

3. (a) Attach a copy of the applicant's proposed budget for the year in which the grant funds are to be used.

(b) If this grant will be a substantial and material part of the total budget, attach a copy of the latest information return (Form 990 or 990-PF) filed by the applicant with the Internal Revenue Service.

(c) Describe the applicant's purposes and activities in general: _____

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

If yes, identify the organization (including its purposes and activities) and explain the relationship: _____

5. List the name, address, and title of each member of the applicant's governing board:

Name, Title or Office

Address

Name, Title or Office

Address

Name, Title or Office

Address

If more space is needed, please attach a separate sheet.

6. Has the applicant (or any organization listed in (4) above) ever applied for or received a grant from this Foundation?

If yes, give details: _____

Part II – Use of the Proposed Grant

7. 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?

8. Person to contact who will be administering the proposed program:

Name and Title

Address

Area Code and Telephone Number

Describe this person's experience and qualifications to administer the program:

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

Name

Title

Date

The information in Parts I and II is to help The Wold Foundation meet the requirements of Section 4945(h) of the Internal Revenue Code.

Part III – To be Completed by The Wold Foundation

1. Evaluation by Grantor program officer:

2. Special supervisory or follow-up requirements, if any:

3. Remarks:

Grantor Program Officer

4. Action Taken (to be completed by the Foundation):

(Person to approve action must initial and date.)

- a. Approved as requested _____
- b. Approved as modified, see "Remarks" _____
- c. Denied _____
- d. Date of grant agreement _____
- e. Amount of grant _____
- f. Date of grant _____
- g. Date of interim report _____
- h. Date of final report _____
- i. Date file closed _____