



FY 2021 Stillaguamish Tribe of Indians Community Contribution Application

Check List (If application is not complete, your organization will not be eligible for funding)

- Complete Community Contribution **Application**
- Project **Budgets**
- Completed & Signed **W-9**
- Copy of IRS Final Determination **501(c) Letter** (*Applicable to Charitable Donations*)

Community Contribution Categories:

There are five (5) separate fund categories, please select the category you are applying for (only check one box):

- **Community Impact Grants:** Funds that can be distributed to **non-tribal local** Governmental agencies, for reimbursement for actual or potential impacts from class III gaming activities. (*I.E. Police, Sheriff and Fire Departments, Etc.*)
- **Charitable Donations:** Funds for **non-tribal bona fide nonprofit and charitable organizations in the State of Washington**. Non-tribal meaning it cannot be owned by Stillaguamish Tribe of Indians. Other tribes who have bona fide nonprofit or charitable organizations are eligible to petition for funds. Stillaguamish Tribe of Indians controlled programs are not eligible for these funds. Non-profit letter must be submitted for proof of status. (*501 (c) Letter Required for the category*)
- **Tribal Community Funds:** These funds are for **Tribal Governmental Programs** that promote the tribe and its members to become self-sustaining. (Stillaguamish and other tribal programs can be considered for this category)
- **Problem Gambling:** Funds dedicated to problem gambling education, awareness, and treatment in the State of Washington. Stillaguamish Tribe of Indians program can petition for these funds.

Check if this applies:

- Your organization receives support from Federal funding. If so, please attach a list of the grants your organization receives and the amount awarded.

Award Schedule:

All applications shall be due by the end of **March, June, September and December**, to be considered for the following funding period.

****Please attach a signed W-9. Also, attach a copy of the non-profit organizations determination letter, if applicable. Your request will not be considered for the funds distributed without these documents.**



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Date: _____

Name of Person or Organization (Same as on W-9): _____

Project Name: _____

Checks Payable to: _____

Amount Requested: _____ Total Project Budget Requesting: _____

Duration of Project: _____ From: _____

Contact Person: _____ Phone #: _____

Fax #: _____ E-mail: _____

Address: _____

City, State, Zip: _____

Was your organization a Stillaguamish Tribe of Indians Community Contribution recipient in the last 12 months?

- Yes
- No

If checked yes, date and amount of contribution received: _____



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Project Name:

Est. # of People Served Annually: _____ **Ages of Persons Served:** _____

of Employees: _____ **# of Volunteers:** _____

Est. # of Stillaguamish members served: _____

Target Populations

- Youth
- Veterans
- Education
- Community
- Elders
- Public Safety
- Animal Care, Rescue & Welfare
- Substance Abuse Prevention & Awareness
- Other _____

Specific Purpose of Funds:

What is your organization's mission or purpose?



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Submissions of Application:

Applications are reviewed as applications are received. Please attach a copy of your IRS non-profit letter ruling, and completed W-9 Form.

Submit Application on or before the deadline to:

**Stillaguamish Tribe of Indians
P.O. Box 277
Arlington, WA 98223**

E-mail : Donations@stillaguamish.com

If you have any questions concerning the application, feel free to email.

PLEASE NOTE:

- **Determination letters will be sent out within 45-days of the application deadline.**
- **You must submit all required documentation to have the complete application. Otherwise, your application will not be complete and will not be considered for review.**