

The first step in the Northfield Bank Foundation grant application process is to submit a Preliminary Proposal Summary. The Preliminary Proposal Summary, a shortened version of our Full Grant Application Package, will help us determine which proposals best fit our funding priorities.

**Please contact the Foundation at (718) 303-4265 prior to submitting any requests.**

Based on this Preliminary Proposal Summary, organizations may be invited to submit a formal Grant Application Package.

**Date of application:** \_\_\_\_\_

## ORGANIZATION INFORMATION

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**Is your organization exempt from Taxes under IRC section 501(c)(3)**  Yes  NO (If no, please attach a letter of explanation.).

**Organization:** \_\_\_\_\_

**Address of organization:** \_\_\_\_\_  
\_\_\_\_\_

**Telephone/Fax:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Web Site:** \_\_\_\_\_

**Executive Director:** \_\_\_\_\_

**Contact Person/Title:** \_\_\_\_\_

**Federal Tax ID #:** \_\_\_\_\_

**Geographic Area Served:** \_\_\_\_\_

**Brief History of Organization:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Organization's Mission Statement:** \_\_\_\_\_

## FINANCIAL INFORMATION

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**Organizational Annual Operating Budget (\$):** \_\_\_\_\_

**Organizational Net Assets At  
End of Last Fiscal Year (\$):** \_\_\_\_\_

**Organization's Revenue & Expenses for each of the last 3 years as stated on Form 990:**

<b>2021 Revenue</b> _____	<b>2021 Expenses</b> _____
<b>2020 Revenue</b> _____	<b>2020 Expenses</b> _____
<b>2019 Revenue</b> _____	<b>2019 Expenses</b> _____

**Attach a listing of your Board of Directors with their affiliations. Also list your Board of Directors annual giving to your organization.**

<b>Does your organization have:</b>	<b>Conflict of Interest Policy</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	<b>Audit or Finance Committee</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	<b>Whistle Blower Policy</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No

**List the 3 highest Paid Employees and their Titles:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List the 3 most significant Donors and Totals for each of the last 3 years:

2021 \_\_\_\_\_

2020 \_\_\_\_\_

2019 \_\_\_\_\_

## PROGRAM INFORMATION

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Name of Program:

\_\_\_\_\_

Description of Program:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Primary Need Addressed by Program:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Project Start Date:

\_\_\_\_\_

Funding Requested (\$):

\_\_\_\_\_

Total Project Budget (\$):

\_\_\_\_\_

*(Attach a detailed budget for this project)*

Other sources of Committed Funding  
And funding amounts:

\_\_\_\_\_

\_\_\_\_\_

**Please submit a copy of your 501(c)(3) form along with this application.**

Submit via regular mail to: **Northfield Bank Foundation**, 1731 Victory Boulevard, Staten Island, NY 10314