

Inukai Family Foundation Request for Funding

The Inukai Family Foundation supports 501© (3) nonprofit organizations that make a measurable difference within the communities of Oregon, Idaho and Southwest Washington. The Foundation supports the legacy of Richard M. (Dick) Inukai to help make society better by supporting organizations servicing children, underserved youth, minorities, seniors, health care and education. The Foundation funding priorities are: **Education**; **Community and Social Services**; and **Health Care and Medical Research**.

Type of Sponsorship Request: EResearch	ducation 🗌 Commun	ity & Social Services [Health Care and Medical
Name of Organization:			
Contact Person(s):			
Address:			
City, State, Zip:			
Telephone Number:	Email:		Fax:
Federal Tax ID Number: Proof of 501(c) (3) status must be submitted with the Grant Application.			
Amount requested: \$			
Project Name:			
Briefly describe the community:	_	your request a	nd how this project
Description of program/progoals, performance measure timeline, project budged description and numbers afformations.	res, collaborat t/percent for	tive partnershi this request	ps if appropriate,
Has the Foundation received	d this request i	n the past? 🗌 Y	Yes No
What is your organizatio summary):	n's annual bud	dget? (Please a	attach brief budget
Please provide a list of (phone/email):	of your board	members with	contact information



Grant Information

The Grant Application deadline is October 15th of each year. Feel free to attach additional pages to the application as necessary.

Mail Grant Applications to the following:

841 S. Gaines Street #1308 Portland, Oregon 97239

Please email any questions to Stacie@inukaifamilyfoundation.org.

