



## TACO TIME FOUNDATION

# REQUEST FOR PROPOSALS

*Taco Time Northwest Foundation nourishes families in Western Washington by developing strategic partnerships to provide access to nutritious food and education about options for healthy lifestyles.*

### GRANT PROGRAM

The foundation seeks to invest in innovative programs and organizations committed to increasing children's and families' knowledge about nutritious food and preparing healthy food that is affordable. We know food is critical to children's overall health as well as the influence it has on academic success. We hope to bring families together around food and promote healthy eating and increase knowledge about nutrition. The foundation plans to award five \$20,000 grants.

### APPLICANT INFORMATION

Organization Name: \_\_\_\_\_

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

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_

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

Executive Director/CEO: \_\_\_\_\_

EIN: \_\_\_\_\_

Year Founded: \_\_\_\_\_

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

**Applications must be received by 5:00 p.m. on July 7, 2015 by mail, email, fax or hand delivery to:**

The Seattle Foundation  
1200 5th Avenue, Suite 1300, Seattle, WA 98101-3151

Fax: (206) 622-7673  
Email: [c.erickson@seattlefoundation.org](mailto:c.erickson@seattlefoundation.org)

## APPLICATION COMPONENTS

### Narrative Questions

*In no more than two pages, please answer the following questions:*

- Briefly describe your organization and its mission.
- Outline your program or project. What do you hope to accomplish with this grant? How does it address Taco Time Foundation's funding priority?
- Describe the population that will be served through this request. How many families received services last year? How many do you anticipate will receive services as a result of Taco Time Foundation's funding?
- Identify any collaborative partnerships.
- What does the success of this program or project look like? How will you gauge success?

### Budget Attachments

- Please attach a one-page project budget, including total annual operating budget size.
- Please attach your current yearly operating budget.

### Attachments

*Please submit the following documents. If your organization cannot provide all of the requested information, please explain why.*

- Current board list and affiliations
- Most recent IRS Form 990 (first five pages only)
- Audited financial statements (if available)

## ELIGIBILITY

- Applicant organizations must be located in King, Pierce, Snohomish, Thurston, or Whatcom County and must qualify as tax-exempt under the Internal Revenue Service Code.
- Preference will be given to programs and organizations that have been in existence for three or more years.

## REPORTING REQUIREMENTS

A final report will be required of each grantee.

### For more information, contact:

**Ceil Erickson**

1200 5th Ave Ste 1300  
Seattle, WA 98101

Email: [c.erickson@seattlefoundation.org](mailto:c.erickson@seattlefoundation.org)

Phone: (206) 515-2107