

Federal Express Address

American Honda Foundation 1919 Torrance Boulevard Torrance, California 90501 Mail Stop 100-1W-5A (310) 781-4090

Mailing Address

American Honda Foundation P. O. Box 2205 Torrance, California 90509-2205 (310) 781-4090

Application for Grant From the American Honda Foundation

(Attachments should be used where indicated and if more space is needed for the response to any item.)

	Date of Request:
Orga	anization Information
1.	Full name of requesting organization (the "Grantee") and type of organization (Corporation, Association, Foundation):
2.	Address:
3.	Website Address, if applicable:
4.	Name of main contact for grant request:
5.	Telephone Number:
6.	Email Address, if applicable:
7.	Employer Identification Number:
8.	Chief officer of organization:
9.	Please enter the names and titles of the officer(s) responsible for expenditure of proposed grant:

	nter staff information for your organization:
a.	How many paid full-time employees:
b.	Part-Time:
	Volunteers:
	chotocopy of your tax exemption letter from the Internal Revenue Service (Section 501 (c) (3)). The been any changes in the nature of your activities since receipt of such letter? If so, please in detail:
	tate and when were you incorporated or organized? In what state is your primary office, if differ address given in question 2?
	organization operated under a different name? If so, when, what name and why was it changed
Give a br	ief description of the organization's mission. (What are its specific objectives?)
Provide a	brief history of the organization:

What is the title of the program / project fo	or which lunding is being sought?
Is this a pilot program / project?	
Yes No No	
If this is not a pilot program, what year was	s the program established?
Grant request detail.	
a. Amount of Request:	b. Total Program Budget:
c. Program Start Date:	d. Program End Date:
Enclose a detailed budget or narrative for organization hereby agrees to expend the	the requested funds. If the proposed grant is made, the grant grant in the exact manner indicated.
Attach a detailed description of the propose	ed program including an executive summary and the activities p
What are your plans to recruit or attract pa	articipants for this project?
What are the general, long-term goals of y	your proposed program?

Wha	data collection and evaluation procedures do you have in place or plan to utilize?
Desc	ribe the plans for the growth of this program:
Plea	
	se describe past results of the program, if applicable:
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Plea	se answer these two questions honestly and to the best of your ability:
Plea	
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Number of people you expect this program to serve: Ages of those benefiting from the program: Describe the communities served by the program and its benefits for the community: What is the ethnic breakdown of those you expect this project to serve? (Total must equal 100% a. African American / Black	Numb	per of people you expect this program to serve:
Ages of those benefiting from the program: Describe the communities served by the program and its benefits for the community: What is the ethnic breakdown of those you expect this project to serve? (Total must equal 100% a. African American / Black		
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a. African American / Black b. Asian / Pacific Islander	Descr	ibe the communities served by the program and its benefits for the community:
a. African American / Black b. Asian / Pacific Islander		
a. African American / Black b. Asian / Pacific Islander		
a. African American / Black b. Asian / Pacific Islander		
a. African American / Black b. Asian / Pacific Islander		
b. Asian / Pacific Islander		
	a.	African American / Black
o Caucacian	b.	Asian / Pacific Islander
C. Caucasian	C.	Caucasian
d. Hispanic / Latino	d.	Hispanic / Latino
e. Native American		
f. Other	e.	Native American

an	ces & Board of Directors
	 enclose a copy of the following documents. Your application will not be complete without the following. Income statement for past two years and current year estimate Audited financial statements for the past two years Most recent Form 990 filed with the IRS 3-5 year projected plan for the organization 1 year full budget, with line item detail for the project and organization Annual reports, media clippings, etc., if available
	Board of Directors (List names, titles and affiliated organizations for each Board member). (Please asterisk names of officers and members of the Board, if any, who are employed by the organization).
	Frequency of Board Meetings:
	Are any of the members of the Board of Directors compensated for their services on the Board? Yes No No If "Yes", give name and amount of compensation.
	List the five highest grants or gift amounts and sources awarded last year:
	Where will the funds from the proposed grant be kept from the time of your receipt until the time of your expenditure?
	What is the organization's yearly budget?
,	What are the total yearly administrative costs?
	What is the total yearly amount spent on fundraising?

<u>ierm</u>	<u>is of Agreement</u>
42.	If your organization receives a grant or award from the American Honda Foundation, does your organization, in consideration thereof, (i) warrant and represent that any amounts received from the American Honda Foundation will be used solely for youth or scientific educational purposes, and (ii) hereby agree to submit, upon request, independent audits showing how your organization used any such grant or award from the American Honda Foundation?
	Yes No No
43.	If the proposed grant is made, the grantee agrees to provide any information and make any reports that the American Honda Foundation may require.
	If the proposed grant is made, the grantee agrees to repay, upon demand, to the American Honda Foundation, the amount of said grant, if any of the following events occurs (the determination that any of the following has occurred, unless otherwise specified, is at the complete and sole discretion of the American Honda Foundation)
	 A determination (preliminary or otherwise) by the Internal Revenue Service that such grant is inappropriate for the American Honda Foundation, i.e., that it constitutes a "taxable expenditure" or does not constitute a "qualifying distribution,"
	Failure of the grantee to properly conform to the aforementioned reporting procedures,
	A change in the activities of the grantee which affects the nature of its exempt status,
	Failure to spend the grant as indicated in this application, or
	 This grant application or any required report to the American Honda Foundation is found to be inaccurate in any material respect.
The fo	pregoing information is certified to be true to the best of our knowledge, information and belief.
	Date:
	Name of requesting organization:
	Signed by:
	Type or print signer's name:
Officia	al capacity of signer with reporting organization:

RETURN TO: -	

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The following quarterly grant-making schedule will be utilized by the American Honda Foundation. No faxed applications will be accepted.

DEADLINE FOR SUBMISSION OF APPLICATIONS

BOARD REVIEW

GRANTS AWARDED

February 1	April	May 1
May 1	July	August 1
August 1	October	November 1
November 1	January	February 1

^{*} Should the deadline for submission of applications fall on a weekend (Saturday or Sunday), the deadline will automatically be extended to the close of business (5:00 p.m.) the following Monday.