2025 Lummi Nation Community Contribution Application

Checklist:

- ☐ **Application** – Completed Community Contribution Application
- ☐ **Budget** – Attach Project Budget
- ☐ **W-9** – Completed W-9 & it must be signed
- ☐ **501(c)** – Copy of IRS Final Determination (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 Contribution**: 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, Fire Departments, etc.)
- ☐ **Charitable Donations**: Funds for non-tribal bona fide non-profit and charitable organizations in the State of Washington. Non-Tribal meaning it cannot be owned by the Lummi government. Other Tribes who have bona fide non-profit or charitable organizations are eligible to petition for funds. Lummi Nation controlled programs are not eligible for these funds. Non-profit letter must be submitted for proof of status. (*501(c) Letter Required for this category*).
- ☐ **Community Impacts**: These funds are for Tribal governmental programs that promote the Tribe and its members to become self-sustaining. (*Lummi 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. Lummi Nation programs can petition for these funds.
- ☐ **Smoking Cessation**: Funds dedicated to smoking cessation, prevention, education, awareness, and treatment in the State of Washington. Lummi Nation programs can petition for these funds.

Award Schedule:

- **Application Deadline**: December 31, 2025
- **Award Announcements**:
  - **January 15, 2026** – Smoking Cessation & Problem Gambling
  - **March 31, 2026** – Community Contribution, Charitable Donation & Community Impacts

Date:_____

Project Name:_____

Name of person or organization (Same as on W-9):_____

Contact Person:_____ **Phone:**_____

Email:_____

Address:_____

City, State, Zip:_____

Geographic Area Served:_____

Est. # of people served annually:_____ **Age of persons served:**_____

# of Employees:_____ **# of Volunteers:**_____ **Est. # of Lummi people served:**_____

Was your organization a Lummi Nation Community Contribution recipient last year?

YES **NO**

<u>Target Population</u>:

Youth	Veterans
Prevention Awareness	Education
Elders	Community
Public Safety	Other:_____

What is your organization's mission or purpose?

_____

_____

_____

_____

_____

Give a brief (50 words or less) summary of your program:

_____

_____

_____

_____

_____

Briefly describe how your program would benefit the Lummi Nation and/or the surrounding geographic area served:

_____

_____

_____

_____

_____

Project Budget – Specific Purpose for Funds:

Amount Requested:_____ Total Project Budget:_____

Project Duration:_____ Project Period (From-To):_____

Specific Purpose of Funds:

_____

_____

_____

Check if this applies:

☐ **Your organization receives funding from Federal sources**

If yes, please attach a list of all federal grants your organization receives, including the award amounts.

Submission of Application:

- **Email** the completed application to **LNCC@lummi-nsn.gov**
- **Electronic submissions only** – paper copies will not be accepted

Questions?

Contact:
Lummi Indian Business Council
Office of Economic Policy
2665 Kwina Rd.
Bellingham, WA 98226
Phone: (360) 312-2000
Email: LNCC@lummi-nsn.gov

PLEASE NOTE:

- Award letters will be emailed by the end of March. If you do not receive an award letter, you have not been selected for funding for the current year. You are welcome to reapply next year.
- All required documentation must be submitted for your application to be considered. Incomplete applications will not be reviewed.

CERTIFICATION:

By signing this application form, the undersigned certifies that:

- All information provided is true, accurate, and complete, and any grant funds received will be used solely for the purposes stated in the application and as approved in the award.
- The organization will comply with all applicable Lummi Nation regulations, guidelines, and requirements.
- All awarded funds will be expended exclusively for the approved purposes.
- If awarded, reasonable efforts will be made to publicly acknowledge the grant.
- A final evaluation report will be submitted in a timely manner to LNCC@lummi-nsn.gov detailing at a minimum how the funds were utilized.
- The signer has the legal authority to commit the organization to these terms and conditions.

Contact person's signature:_____**Date:**_____