Western Indiana Community Foundation
2025 Community Legacy Grant – Letter of Inquiry (LOI)

Eligibility Requirements

Geographic Area Served*

Will your funding request serve or provide opportunities to the citizens of Fountain or Vermillion Counties in Indiana?

Charitable Status*

Is your organization or group defined as tax exempt under Section 501(c)(3) by the Internal Revenue Service?

* OR

- Recognized as a governmental entity including state, county, or city agencies such as health departments
- Recognized as an educational facility, such as K-12, private or charter schools or school districts and higher education institutions
- Formed as a non-governmental organization which operates exclusively for charitable purposes.

Has it been 12 months or more since you last received grant funding from the Community Foundation? *

Funding Amount*

Is the amount being requested over $7,500?

Project Information

Project Name*

Provide a project name. (Maximum of 3 words, such as: Facility Restoration; Walking Path Signage; Library Upgrades; Field Trip; Entrance Fee Costs, Etc.)

Project Description*

Please explain your project and provide a clear, focused description that highlights its purpose, the need it addresses, what stakeholders helped you, and how it will benefit the community or its residents.

How many people will this project serve or impact?*

Grant Funding Amount

Total Project Budget*

This amount is the full amount of the project including amounts you have budgeted or fundraised, contributions from other organizations or grant programs, and the amount being requested from the Community Foundation.

Which Community Foundation are you requesting funding and how much?

Each Community Foundation provides funding only to organizations that directly impact its geographic area. For instance, if an organization primarily serves the Attica community it is unlikely the Vermillion County Community Foundation will provide funding for the project. Some organizations provide services across geographic boundaries (Fountain County Ambulance Services; Bi-County Water Rescue Team). These organizations would be the entities most likely to receive funding from one or more Community Foundation. Please round amounts to nearest dollar.

Community Foundation Name, Amount Requested

Are you requesting full and complete funding for this project from the

Foundation? * If YES, please explain.