

INDIANAPOLIS AFRICAN AMERICAN QUALITY OF LIFE INITIATIVE

Item #	Required Documents	Description / Notes	Required?	File Name/Link
	Completed			
	Application			
1	Form	All required fields completed	Required	IAAQLI Funding Opportunities
	Fiscal	Documentation of organization's		
	Sponsorship	responsibilities, financial oversight, and		Collected in specific application
2	Letter	administrative support	If applicable	response
	IRS 501(c)(3)	Include names, race/ethnicity, professional		
	Determination	affiliations, county of residence, and offices		Collected in specific application
3	Letter	held	Required	response
		Include names, race/ethnicity, professional		
	Board of	affiliations, county of residence, and offices		Collected in specific application
4	Directors List	held	Required	response
	Organization	Include names, race/ethnicity, professional		
	Leadership and	affiliations, county of residence, and offices		Collected in specific application
5	Staff List	held	Required	response
	Memoranda of			
	Understanding			
	(MOUs) or			
	Letters of	Documents collaborative partnerships to		Collected in specific application
6	Commitment	deliver services supported by IAAQLI funds.	If applicable	response
	IAAQLI Budget	Itemized costs with justifications; include	, ,	·
7	Form	indirect cost rate if applicable	Required	IAAQLI Budget Template
	Audited			
	Financial			
	Statements	Audited preferred; unaudited accepted with		Collected in specific application
8	(last fiscal year)	explanation if audit not available	Required	response
	Most Recent	Complete copy of latest filing, or		Collected in specific application
9	IRS Form 990	explanation if not required to file	Required	response
	Certificate of	Proof of insurance coverage: General		Collected in specific application
10	Insurance	liability, worker's compensation, etc.	Required	response