



ADVISED FUND GRANT RECOMMENDATION

As Fund Advisor to the _____, I recommend the following grant.

It is the policy of the Montana Community Foundation that payment of any grant recommendation will not:

- Satisfy a previously made pledge
- Provide more than incidental benefit to fund advisors (IRS 4967)

Conflict of interest disclosure: I acknowledge that I and the other Fund advisor/s have no interest in/relationship with the organization being recommended. If a relationship exists, the attached copy of committee minutes discloses each conflict and that the recommendation was approved by a majority vote of disinterested advisors.

I understand that final approval of this recommendation rests with the Foundation Board of Directors, whose charge it is to see that all grants are consistent with the Fund's and the Foundation's purposes, as required by IRS regulations.

Date: _____ Signature: _____

This grant is anonymous

Special instructions: _____

Organization Name: _____

This is a (check one): 501 (c)(3) organization government organization

Contact Person: _____

Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

Purpose of Grant: _____

Amount \$ _____

Mail, fax, or email completed form to:
Montana Community Foundation, PO Box 1145 Helena, MT 59624; Fax (406) 442-0482; grants@mtcf.org

For questions or more information, call (406) 443-8313 or email grants@mtcf.org.