

# NORFOLK SOUTHERN CORPORATION

# COMMUNITY IMPACT GRANT FORM

AMOUNT REQUESTED:

ORGANIZATION NAME:

ADDRESS:

CITY:

STATE:

ZIP:

WEBSITE:

PHONE:

CONTACT NAME:

EMAIL:

PHONE: (o)

(m)

BRIEF DESCRIPTION / PROJECT TO BE FUNDED:

## NORFOLK SOUTHERN ONLY

DIVISION/REGION:

CONTACT NAME:

EMAIL:

PHONE:

APPROVAL SIGNATURE / NAME:

DATE:

## COMMUNITY IMPACT GRANT INITIATIVES

- Public Safety and First Responders
- Food Banks
- Healthcare (Hospitals) / Mental Health
- Community Connections

MAKING A DIFFERENCE IN THE COMMUNITIES WHERE WE LIVE AND WORK.



EDUCATION & INNOVATION



EQUITY



ENRICHMENT OF COMMUNITY



ENVIRONMENT

### ORGANIZATION MUST PROVIDE:

- Copy of 501(c)(3) letter of determination from IRS or tax status letter from government entity
- A signed W-9 form



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