

Application Summary of: SAMPLE [for reference only; must complete online]

* = required questions [online application includes tips and links to resources not shown here]

i General Information	
*1. I am applying as part of a fiscal sponsorship. <i>Learn more about fiscal sponsorship.</i>	yes/no
*2. Legal name of tax entity <i>Must be a 501(c)(3) nonprofit. If not, contact program officer Greg Hamilton prior to applying.</i>	
*3. Employer Identification Number (EIN). <i>Also known as a Federal Tax Identification number.</i>	
4. Applicant's organization name (if different than legal name above).	
*5. Title of grant proposal <i>Include a short descriptive explanation, e.g., "General Operating 2023-24" or "Program Grant for 2023: After-school Programs."</i>	
*6. Amount Requested. <i>Up to \$7,500.</i>	
*7. Contact person for this application.	
*Title or position.	
*Phone number.	
*Email address.	
*8. Mailing address for grant award. <i>Winning grants are payable to the legal entity (line 2) above. Must be able to receive U.S. Mail. If your address is not permanent or expected to change in the next 12 months, type an explanation on this line.</i>	
*City.	
*State.	CO
*Zip code.	
*9. Physical address for applicant organization's main office. <i>If more than one office or location, provide a single address for your primary headquarters or administrative center.</i>	
City.	
State.	select

*10. Counties served by applicant organization. <i>Check all that apply.</i>	Routt, Moffat, Other
*11. Website.	
*12. Type of grant requested. <i>Make sure to review guidelines. Contact us if unsure which applies to you.</i>	General Operating or Program Grant

Program Grants Only * Only required if you selected 'Program Grant' in question 12

*12a. Include a summary of your plan and explain: i) needs, problems, or opportunities this program will address, ii) the audience you expect to serve, iii) the approaches, tools, techniques, and resources you will employ, iv) the positive outcomes you seek, and v) a timeline. *Please note: this response should be specific to the program you are proposing, not organization-wide (which you will address in question 19 below). (500 word limit)*

*12b. Provide a budget that clearly details how you will spend the funds you are applying for through this grant. Also make sure to include other anticipated sources of revenue and other expenses for a sense of the program's overall financial outlook. *Upload one PDF document only (free conversion/merging tools linked above).*

12c. (OPTIONAL) Supporting documents. *Please provide any additional item(s) to support this application by uploading here. Upload one PDF document only (free conversion/merging tools linked above).*

Organization Overview

*13. Total FTEs (full-time equivalent employees) per year. *Sum of full-time, year-round employees (at 1.00 each) plus part time (e.g., year-round half-time = 0.50) for the past full year. For seasonal employees or other tricky calculations: see the IRS explanation here.*

*14. Organizational leadership. *We want to know more about the people who are leading this effort. At a minimum, list all board members and key staff, but we strongly encourage including short bios of all board members plus key staff and advisors, including professional affiliations/expertise, if applicable.* [PDF document upload]

*15. Does your board have term limits and/or a succession plan for human resources at the organization? Please explain. *Succession plans might be formal or informal, regarding board membership, board leadership, and/or organizational staffing. (100 word limit)*

16. (OPTIONAL) Would you like to further characterize human resources at your organization? *For instance, if significant changes are anticipated in the next year, staffing is seasonal, or volunteers make up an important part of your labor, please provide a brief explanation. (100 word limit)*

***17.** Organizational mission. Your formally adopted mission statement. (250 word limit)

***18.** Organizational vision, including multi-year goals. *Please include your formally adopted organizational vision statement, if any, and make sure to include long-term goals for a minimum of three years in the future. (250 word limit)*

***19.** Qualitative impact: Expand on the above mission and vision with brief explanations of: a) needs, problems, or opportunities your organization is addressing, b) the audience you serve, c) the approaches, tools, techniques, and resources you rely on for your work, d) the positive outcomes you seek, and e) qualitative/anecdotal highlights of your efforts. (250 word limit)

***20.** Evaluation and quantitative impact: Please briefly summarize data that indicates the positive impacts your organization is making— or hopes to make— in the community each year. *Examples include number of clients served, measured land area your work benefits, number of animals helped, people reached with your messages, etc. (250 word limit)*

***21.** Shared goals and collaboration How does your organization address a common need, problem, or opportunity with other groups or organizations in the region? (250 word limit)

Attachments

***22.** Operating budget for your organization. *"An organization-wide operating budget accounts for everything the nonprofit spends to carry out, evaluate, and administer all its programs and activities."* [source: Candid - [click to learn more](#)]

[PDF document upload]

*Upload organizational budget for the current year.

***23.** Financials for most recent full fiscal year (audited if applicable). Include a Consolidated Statement of Financial Position (Balance Sheet) and Consolidated Statement of Financial Activity (P&L).

[PDF document upload]

***24.** Total cash on hand from your most recent bank statement(s).

**Date of total cash on hand above.*

***25.** Upload your most recently filed Form 990.

[PDF document upload]

26. Other (OPTIONAL): How many hours did it take to complete this grant application?

Declaration and Compliance

***27.** Is your organization currently (or has it been during the last twelve months) involved in any litigation or inquiry from a state or federal regulatory agency that may have an impact on the organization's operations?

***28.** If awarded a YVCF grant, I agree that programs and services provided by this funding will abide by the Yampa Valley Community Foundation's nondiscrimination policy.

***29.** Is your organization current with the state's Secretary of State Annual Business Entity filing requirements?

***30.** Is your organization currently in good standing with the Internal Revenue Service?
Organizations in good standing will be listed on the IRS Publication 78 Business Master File.

From my own knowledge, I state the information given in this application is true and correct. An official with contracting authority of the applicant organization, parent organization, or fiscal agent has authorized me to make this application.

*Full name: Authorized representative

*Title or position

*By signing here, I attest that the information provided in this application is true and accurate.