

**VILLAGE OF KEY BISCAYNE
COMMUNITY GROUP GRANT APPLICATION FORM**

1. BOARD OR GROUP REQUESTING COUNCIL FUNDING FY 202___:

2. MEMBERSHIP:

A. Active:

B. Inactive:

3. AMOUNT BEING REQUESTED \$ _____

4. PREVIOUS YEAR Request \$ _____

5. OVERVIEW OF CURRENT FINANCIAL STATUS (AS OF THIS DATE):

A. CURRENT FISCAL YEAR FUNDS USED FROM COUNCIL \$ _____

I. HOW HAVE THESE FUNDS BEEN SPENT? (SPECIFY)

B. REMAINING FISCAL YEAR FUNDS RECEIVED FROM COUNCIL \$ _____

II. HOW DO YOU ANTICIPATE THESE FUNDS WILL BE SPENT?
(SPECIFY)

C. FIXED OBLIGATIONS, IF ANY (SPECIFY) \$ _____

6. FUNDING RESOURCES ON HAND (MONEY IN THE BANK AND RESERVES, GRANTS AND DONATIONS, AND OTHER OUTSIDE FUNDING, INCLUDING ANTICIPATED):

A. (SPECIFY):

B. ANNUAL MEMBERSHIP FEES AND FUND RAISING ACTIVITY (INCLUDING ANTICIPATED):

7. PROVIDE A BRIEF DESCRIPTION OF THE BENEFITS OF THIS GROUP TO THE VILLAGE OF KEY BISCAYNE AND ITS COMMUNITY AND ANY PLANS FOR THE COMING YEAR ;

8. NAME OF PERSON ANSWERING THESE QUESTIONS:

9. PERSON RESPONSIBLE FOR FINANCIAL ADMINISTRATION:

Other Considerations:

Application Deadline?



**CORAL GABLES
COMMUNITY
FOUNDATION**

Coral Gables Community Foundation
Grant Application

Date of Submission: _____

Name of Organization: _____

Address: _____

Contact Person: _____

Contact Email: _____

Contact Phone: _____

Project Title: _____

Population benefitting from this Grant: _____

Amount Requested from the Foundation (minimum/maximum): _____

Is your organization tax exempt under Section 501(c)(3)? _____

If not, do you have a Fiscal Agent? _____

Please provide the following as attachments along with your grant application:

- A copy of your current IRS determination letter indicating 501(c)(3) tax-exempt status.
- List of your Organization's Board of Directors, their affiliations and contact information for all Board members.
- An organizational chart including staff
- Grant Budget: Please complete a project budget as outlined in the attached Grant Budget Form
- Finances:
 - Organization's current annual report, if available
 - Organization's current operating budget, including expenses and revenue

- Organization's most recent annual financial statement (independently audited, if available; if not available, attach Form 990)

About your Organization and Program:

Provide a brief history and description of the mission of your organization. This should be no longer than one page.

Provide a one-page description of why your organization is requesting these funds.

How will your project enhance the quality of life in Coral Gables and in the South Florida community?

Explain what outcomes you plan to achieve and how you will measure the success of your program.

Who are the other partners in this project, if any?

How will the Foundation's contribution be recognized in/by this project/program?

Program Budget:

What is the total cost of the project/program? This should include the amount being requested from the Foundation as well as from other sources of financial support for the project/program.

A description of how the Foundation's funds specifically will be spent.

What percentage of your project/program budget will the Coral Gables Community Foundation grant comprise?

The Coral Gables Community Foundation's Board of Directors reviews all Grant Applications and will notify recipients approximately 45 days after submission.

Revenue (as applicable):

	Committed:	Pending:
• Grants/Contracts/Contributions		
○ Local Government	\$ _____	\$ _____
○ State Government	\$ _____	\$ _____
○ Federal Government	\$ _____	\$ _____
○ Foundations (itemize)	\$ _____	\$ _____
○ Corporations (itemize)	\$ _____	\$ _____
○ Individuals	\$ _____	\$ _____
○ Other (specify: _____)	\$ _____	\$ _____
• Earned Income		
○ Events	\$ _____	\$ _____
○ Publications and Products	\$ _____	\$ _____
• Membership Income	\$ _____	\$ _____
• In-Kind Support	\$ _____	\$ _____
• Other (specify: _____)	\$ _____	\$ _____
Total Revenue:	\$ _____	\$ _____

Application Summary

Please provide a brief summary of your application in the format that follows below. **Please only use this form.**

<u>Name of Organization + Mission:</u> (No more than 2 sentences)	<u>Project Title:</u>	<u>Amount Requested:</u>	<u>Total Amount of Project/Program:</u>	<u>What will the grant funding be used for specifically?</u> (Please be very specific. No more than a paragraph.)	<u>If your project/program is selected for funding, how will the Coral Gables Community Foundation be recognized?</u>