**Welcome to your application for the fall grant cycle due September 1, 2022.**

The application will automatically save information as you enter it. You can also manually save by clicking the button at the bottom of each page. You can return to the application to continue working on it anytime before the application deadline. You can also use the button at the bottom of each page to "View/Print Application" if you want to print it or save it as a PDF.

Please note there are some changes to the application from previous years. We recommend grantees plan additional time. Required fields are noted with an asterisk. You will not be able to submit your application until every category on the far right of the screen shows a green checkmark.

Please contact your Program Officer with questions about the content of your application. Click on the chat icon on the upper left of each page within the application for technical questions related to the online application. Note this is not a 'live' chat, questions will be answered within one-business day via email.

You will receive an email once your application is successfully submitted. Please check your spam folder, and then contact grants@buellfoundation.org if you do not receive the confirmation email once you have submitted your application.

The Buell Foundation would love to hear from you regarding this online grants management system. Please complete a brief survey to provide feedback related to your experience.

# Organization Profile

**Legal Name of Organization**
This should be the exact wording from the IRS 501(c)(3) determination letter.

**DBA (Optional)**
Doing Business As – This is the name that the organization is widely known by if different from the legal name.

**EIN (Applicant Organization)**
The Employer Identification Number from the top right corner of your IRS 501(c)(3) determination letter. It is sometimes referred to as a Federal Identification Number.

**Tax Exemption Status**
Please choose the one that best describes your organization.

> *If you selected Other as your Tax Exemption Status, please describe:*

**Office Mailing Address**

**County**
Please select the county where your headquarters are located.

**Office Phone**

**Organization Website**

**Year Organization Founded**

**Organization Mission Statement**

**Geographic Area(s) Served**
(e.g., counties, towns, etc.)

**Anti-discrimination policy**
An anti-discrimination statement is not the same as a harassment policy. If you do not have an anti-discrimination statement, please enter "No anti-discrimination policy." below.

**Board of Directors List**
Include the following information for each board member:

1. Position(s) on the board (officer and committee position)
2. Occupation and name of employer and/or affiliations(s)
3. City or county of residence
4. Term end date

You can upload a document that you already have developed. If you do not have a document, use the template provided here.

**List of names and qualifications of Key Staff**
Including length of service with the organization. Do not include job descriptions or resumes.

You can upload a document that you already have developed. If you do not have a document, use the template provided here.

**Does your Organization use a Fiscal Sponsor?**

# Key Contacts

**CEO or Executive Director**
Click the Select Contact button below to either select a contact already in the system or to create a new contact. Note that all information must be included for each contact before your application will be considered complete.

**Grant Contact**
Click the Select Contact button below to either select a contact already in the system or to create a new contact. Note that all information must be included for each contact before your application will be considered complete.

**Fiscal Sponsor Contact (If Applicable)**
Click the Select Contact button below to either select a contact already in the system or to create a new contact. Note that all information must be included for each contact before your application will be considered complete.

# Fiscal Sponsor Information (If Applicable)

**Name of Fiscal Sponsor Organization**

**EIN (Fiscal Sponsor)**

*Please attach the following documents:*
**Memorandum of Understanding or the contract between your organization and your fiscal agent/fiscal sponsor**

**Attach your Fiscal Sponsor's operating budget for the current fiscal year**
Please include revenues and expenses in the budget. Maximum number of attachments allowed: 4

**Fiscal Sponsor Current (year-to-date) financial statements**
These are generally financial statements reviewed at your Fiscal Sponsor's most recent board meeting. In some cases, the fiscal sponsor's year-to-date financial statements are the same as their most recent year-end statements. Please provide statements from within three months of application date.

1. Statement of Financial Position (Balance Sheet)
2. Statement of Activities (Income and Expense Statement)

**Fiscal Sponsor's Year-end Financial Statements**
Include your Fiscal Sponsor's most recent fiscal year-end financial statements, audited if available. If the fiscal sponsor has an audit, but it is not available for the most recent fiscal year-end, also include the most recent audit.

1. Statement of Financial Position (Balance Sheet)
2. Statement of Activities (Income and Expense Statement)
3. Most recent Audit (optional)

**Board of Directors List for the fiscal agent/fiscal sponsor**
Include the following information for each board member:

1. Position(s) on the board (officer and committee position)
2. Occupation and name of employer and/or affiliations(s)
3. City or county of residence
4. Term end date

You can upload a document that you already have developed. If you do not have a document, use the template provided here.

# About Your Request

**Total Grant Request ($)**

**How are you planning to use the funds you are requesting?**

**What type of Capital Project(s) are you seeking to fund?**
Select all that apply and then specify what percentage of the requested amount you are planning to allocate to each project. Allocated percent's must total 100%.

*If you selected Other above, please specify*

**Briefly describe what requested grant funds would be used for.** Suggested word limit: 150.
If you are seeking funding for more than one program or purpose, describe each program and purpose and note the requested amount for each. Be sure to note any one-time requests that are outside of typical funding (e.g., technical assistance, materials, etc.).

# More About Your Organization and Programs

**Provide a brief history of your organization.** Suggested word limit: 250.

**Provide a brief description of the organization's current programs.** Include:
- Program Name
- Population
- Numbers served
- Expected results

Suggested word limit: 250.

**Number of Employees**

**Full-Time Staff**

**Part-Time Staff**

**Describe the organization's overall approach to evaluation, including how the organization measures impact.**
In this section, you may choose to discuss the following:
- How the organization incorporates findings from its evaluation efforts or its experience to inform its future direction and improve its programming
- How often staff and/or the board and/or program participants engage in evaluation-related activities
- The relationship the organization has to formal research or evaluation efforts, linkages with colleges, universities, and/or evaluators, if appropriate

*If the organization does not attempt to measure impact in any way, provide an explanation as to why not.*
Suggested word limit: 250.

**Describe the challenges facing the organization in the next one to three years.** Suggested word limit: 250.
If applying for program or capital project support, also include the challenges facing the program or project for which funding is requested.

**Describe the opportunities facing the organization in the next one to three years.** Suggested word limit: 250.

If applying for program or capital project support, also include the opportunities facing the program or project for which funding is requested.

**Are you a current partner of the Buell Foundation with an open grant?**

**Please describe the progress made toward the current grant's goals and the impact the grant has had on the organization, specific funded program, and/or community.** Suggested word limit: 500.
Please use this space to tell us how you are progressing in your current grant period. You may want to include notable successes or challenges to your organization, or funded program, to date as well as any lessons learned and resulting changes.

   *This question takes the place of the interim report we have historically required from current partners.*

**Have the funds been fully expended?**

***Check this box to acknowledge that, once all funds have been expended, you will submit your final report. Your deadline for submission is noted in your contract and you will receive an automatic reminder to access the report on the grantee portal.***

# Capital Project(s) Information

**Total Budget for Capital Project ($)**

**Why is the project important to the mission of the organization?** Suggested word limit: 150.

**Please describe the community buy-in for this capital project, including who has been/is involved.**
We recognize that community engagement is not required for all types of capital projects. If you are requesting funding for a new child care center, be sure to complete this question.
Suggested word limit: 250.

### *Fundraising*
**Describe the fundraising plan for the project.** Suggested word limit: 250.

**Funds raised to date**
Provide a sum of all monetary contributions to your project.

**In-kind support committed to project**
Please provide a description and the dollar value. This often includes, but is not limited to, donated land, labor, or materials. Suggested word limit: 150.

**Is there a loan involved?**

**If so, how much has been approved?**

### *Project Details*
**Who owns or will own the building and/or property?**
If the building/property is leased, it is the expectation of the Buell Foundation that the lessee has a written commitment by way of the lease agreement of at least five years. You will be asked to provide proof of this commitment before your request will be considered. The lease agreement can be attached in the attachments for capital requests section of this application.

**Describe the scope of the project. How will the completed project impact the services you provide?**
How large is the building and what components will be included? How will the completed project impact the services you provide? Suggested word limit: 250.

**Describe the construction plan and timeline.** Suggested word limit: 250.

**Describe the ability and/or readiness of the organization to manage the changes in programming that the capital project will create (e.g., increased enrollment, the start-up of a new program, the need to hire more staff).** Suggested word limit: 250.
Be sure to include information about your plan to sustain the project beyond the first 1-3 years.

# Financials

**Read these instructions carefully before answering the Organizational Budgets forms below. Note that each form is comprised of two parts:** *Budget Summary* **and** *Notable Sources of Revenue.*

Buell Foundation requires Organizational Budget information for:

1. Your most recently completed Fiscal Year
2. Your current Fiscal Year

Use the **first form** below to provide the following information about your **most recently completed fiscal year**:

> *Budget Summary*
> - Revenue
> - Expenses
> - Data Source (Note the source from which revenue and expenses were pulled)
>
> *Notable Sources of Revenue*
> Note your primary sources of revenue with amounts from your most recently completed fiscal year. The form will show several primary source categories (raised income, tuition/fees/earned income, other, and in-kind). Please include information for these broad categories as well as the breakdown by subcategory wherever possible. Be sure to specify:
> - The top three (3) businesses supporting your organization, if applicable
> - The top three (3) fundraising events, if applicable
> - The top five (5) foundations supporting your organization, if applicable
> - The top five (5) government agencies supporting your organization, if applicable

Use the *second form* below to provide the following information from your **operating budget for your current fiscal year**:

> *Budget Summary*
> - Revenue
> - Expenses
> - Data Source (This should be your operating budget)
>
> *Notable Sources of Revenue* **- DO NOT FILL OUT**
> For example: If your current fiscal year ends December 31, 2022, first enter the relevant information for the fiscal year ending December 31, 2021. Then, enter all information for your current fiscal year 2022.

**Organizational Budgets for your most recently completed and your current Fiscal Years.**

Use the **first form** to provide information about your most recently completed fiscal year. DO fill out the Notable Sources of Revenue on the first form.

Use the **second form** to provide information from your operating budget for your current fiscal year. ***DO NOT fill out the Notable Sources of Revenue on the second form.***

# Attachments

**Attach your Organization's budget for the current fiscal year and your Program(s) budget if applicable**

Attached budgets should include both revenues and expenses. Please provide the following budgets:

1. Organization budget for current fiscal year
2. Program/project budget(s) for current fiscal year, if applicable (not required for general operating requests)

**Current (year-to-date) financial statements**

These are generally financial statements reviewed at your most recent board meeting. In some cases, the organization's year-to-date financial statements are the same as your most recent year-end statements. Please provide statements from within three months of application date.

1. Statement of Financial Position (Balance Sheet)
2. Statement of Activities (Income and Expense Statement)

**Year-end Financial Statements**

Include the most recent fiscal year-end financial statements, audited if available. If the organization has an audit, but it is not available for the most recent fiscal year-end, also include the most recent audit.

1. Statement of Financial Position (Balance Sheet)
2. Statement of Activities (Income and Expense Statement).

**Does the organization have a financial audit?**

**If so, please enter the audit date:**

**Most recent Audit**

# Additional Attachments for Capital Requests (If Applicable)

**Business Plan**

A business plan should include the following components at minimum:
- Market/Needs Analysis
- Implementation Timeline (i.e., the timeline for various project components, including hiring and enrollment timelines)
- Marketing Strategy
- Organizational Structure and Management
- Staffing and Human Resources
- Budget and Finance
- Facilities Plan

**Budget**

Proforma budget for first three years of operating in new space

**Schematics/Conceptual Drawings**

**Five-year lease agreement**

Attach a lease or letter noting commitment of space if provided by another agency for at minimum five years.

**Does your Capital Project involve furniture, fixtures, equipment (e.g., boiler, carpet, cubbies, etc.) or playground or other outdoor renovations?**

**Please submit bids for work to be completed**