Welcome to your application for the first grant cycle of 2023 due 5:00 p.m., January 17, 2023.

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 consult the online application help guide for additional information as you work on your application.

Please contact your Program Officer with questions about the content of your application. Click on the blue comment bubble icon (shown below and under the title of most of the sections of 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?
- If you are a licensed child care center, please choose "Licensed Child Care" even if you are planning on requesting general operating or program support for your center.
- If you are a licensed child care center and plan to ask for an additional program(s), please choose "Both Licensed Child Care & Another Program."

Briefly describe what requested grant funds would be used for. *Suggested word limit: 150.*
In one or two sentences describe at a high level what the grant will be used for. (You will have an opportunity to provide more detailed information later in the application.)

If you are seeking funding for more than one program or purpose, provide each program name 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. *Suggested word limit: 250.*
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.

Evaluation results (optional)
Provide the organization's most recent evaluation results, relevant to this request.

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.

Services/Program Information

Provide a detailed description of your organizations services and/or the program(s) you are seeking grant funds to support. *Suggested word limit: 500.*
Use this space to tell us about your organization as a whole, and the breadth of your organizations activities. Include the issue and/or opportunity addressed and key activities.

What are the stated goals and objectives of your organization's services/programs over the next year?
This section asks for the goals and objectives of the program or projects of your organization. Goals convey the general direction or overall purpose of the program or project for which funding is requested. Objectives are the measurable changes that you expect will result from operation of the program or project. Objectives help to determine whether the organization is on the right path to achieving its goals.
Suggested word limit: 250.

Describe the targeted population(s) and anticipated numbers served. *Suggested word limit: 150.*
Answer this question using the appropriate target population(s) for your organization and its programs.

Describe the area in which you provide services/programming. *Suggested word limit: 150.*

What are the duration and frequency of your organization's services/programming?
How often will the programming be offered (e.g., twice yearly, continually, etc.) and how long will the program last (e.g., four weeks, the duration of the school year, multiple years, etc.)?
Suggested word limit: 150.

What are expected results of the services/program(s) being offered? How will they be measured?
Methods of measurement may include types of evaluation & specific tools (e.g., pre/post comparisons, retrospective surveys, satisfaction survey, program model fidelity measures, etc.). Some programs have specific tools identified to measure program implementation and outcomes (e.g., Nurturing Parenting Program uses the Adult Adolescent Parenting Inventory for evaluation), and Buell Foundation staff will look for these types of tools as appropriate.
Suggested word limit: 500.

Share any additional information you feel is important to convey. *Suggested word limit: 250.*

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
- Assets
- Liabilities
- Unrestricted Net Assets
- 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
- Assets
- Liabilities
- Unrestricted Net Assets
- 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