

# 2023 Friends of Coleman County Foundation Grant Cycle

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*Community Foundation of Abilene*

## *Preliminary Information*

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### **Project Name\***

Use this space to title your funding request. For example, you may title this request "Operational Needs" or if making a program request, "ABC Program Support."

*Character Limit: 100*

### **Amount Requested\***

*Character Limit: 20*

### **Total Program Cost or Budget\***

*Character Limit: 20*

### **Purpose of Organization\***

Please provide your mission statement and a brief introduction to your organization and what you do.

*Character Limit: 2500*

### **Program Area**

#### **Choices**

- Animals
- Arts and Culture
- Children and Youth
- Community Development
- Disability Services
- Disaster/Emergency Response
- Economic Development
- Education
- Environment
- Health
- Health and Wellness
- Human Services
- Hunger Relief
- Mental Health
- OTHER
- Religion
- Senior Citizens
- Social Justice
- Social Services

Veterans  
Workforce Development

## *Proposal Narrative*

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### **Discussion of Need\***

Please provide details about the proposed project and describe how it will meet the community need as well as how funding will be used.

Some questions to answer:

What are the current needs, challenges, or problems this will address? How will funding be used to meet those needs/challenges? What is your target population? What are the program objectives and expected outcomes?

*Character Limit: 3500*

### **Collaborations/Partnerships\***

Is your organization collaborating with the community in support of this project? Has your organization secured additional funding partners? Is your board of directors in support of this project and are they supporting the fundraising effort?

*Character Limit: 2500*

### **Timeline of proposed project/program\***

*Character Limit: 1000*

### **Continuation of Program**

If applicable, what are your plans for continuation for this program?

*Character Limit: 1500*

## *Financials*

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For the **Financials** section where uploads are needed. The following formats will be accepted.

- doc or docx (Microsoft Word)
- xls or xlsx (Microsoft Excel)
- pdf (Adobe)

Only one document can be uploaded per section. If you have separate documents for a specific section, please combine into one document and upload.

## Project Budget\*

Please download and attach the Project Budget Form.

**Note:** You may edit the line items listed on the Project Budget Form to better align with the budget for your project or capital need.

*File Size Limit: 1 MB*

## Annual Operating Budget Amount\*

*Character Limit: 20*

## Annual Operating Budget\*

Please upload your organization's annual operating budget. If you do not have one, please complete and upload the attached [Annual Operating Budget Form](#).

**Note:** You may change the line items listed on the Annual Operating Budget Form to better align with your organization's budget.

*File Size Limit: 2 MB*

## Balance Sheet\*

Please upload a current Balance Sheet or Statement of Financial Position for your organization. This is not a P&L Statement.

If you do not have one please use the link to access an excel format of the Balance Sheet and upload.

**Note:** You may change the line items listed on the Balance Sheet Form to better align with your organization's assets and liabilities.

*File Size Limit: 1 MB*

## Financial Narrative - Optional

If applicable, please use this space to better explain your budget and/or balance sheet. Examples would be a large cash balance on hand, budget issues, or better explain how things are going financially and where your organization is headed.

*Character Limit: 1500*

## *Bid Documentation for Capital Requests*

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### Competitive Bids for Capital Support\*

If your request includes capital needs, please use the space below to upload bid documentation. The grant committee wants to see that your organization has considered multiple vendors and will be a wise steward of grant funds, if awarded.

Example of capital needs:

- Purchasing tangible assets such as furniture, equipment, technology, maintained fixed assets
- Capital Projects such as a renovation, remodeling, or construction of a new building.

If you are unsure of how to answer this question, please contact Meagan Harris, Rural Grants Manager, mharris@cfabilene.org.

Does your request include funds to support capital needs?

### Choices

Yes (Proceed to file upload below)

No (Skip to the next section)

### Bid Worksheet

If you answered "yes" to the question above, please complete the [competitive bid form](#). Please see an [example of a completed bid form here](#).

*Please note, in certain circumstances, copies of the actual bids may be required.*

*File Size Limit: 4 MB*

## Organizational Information

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### Governing Board Members\*

Upload a list of the organization's Board of Directors.

*File Size Limit: 1 MB*

### Salaried and Volunteer Staff\*

Upload a list of salaried and volunteer staff members.

*File Size Limit: 1 MB*

### IRS Determination Letter\*

Please attach your IRS 501c3 Determination Letter. If you are not considered a charitable organization by the IRS, please upload one of the following:

- Fiscal Agent Letter
- W-9
- Articles of Incorporation

If you have a fiscal agent arrangement with an tax-exempt organization and do not have a fiscal agent letter, you may download and use our Fiscal Agent Form.

If you have any questions regarding your charitable status, please reach out to Meagan Harris at [mharris@cfabilene.org](mailto:mharris@cfabilene.org)

*File Size Limit: 1 MB*