**R. HAROLD BURTON FOUNDATION**

### GRANT APPLICATION

**Date:**

**Name of your Organization:**

**Grant amount sought on this application:**

Street Address:

Mailing Address:

City/State/Zip:

Chair Person of your Board:

Organization Head:

Title:

Phone: Ext:

E-mail \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Person:

Title:

Phone: Ext:

E-mail \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Purpose of your Organization (one paragraph):**
2. **Program/Project Description (not to exceed 200 words):**
3. **Number of paid staff employed by your organization:**
4. **Key staff positions and annual salaries:** *(This information will be kept confidential.)*

Name and Title: Annual Salary:

$ $

$

$

1. **Request:**

* Grant amount sought on this application: $
* Total cost of project/program(s) for this grant: $
* Annual operating budget of your organization $
* Previous annual dollar support for your organization

from the Burton Foundation Year $

Year $

Year $

**6. Project timetable:** Begins (month/year): Ends (month/year):

**7. Requested funds needed by**: (month/year):

**8. Other Potential Donors:**

*List all individuals and organizations, both public and private (other than the R. Harold Burton Foundation), from whom you are still seeking contributions (cash or in-kind) for this project/program, but who have not yet responded to your request.*

Name of Potential Donor: Amount Sought: Request made? Completed/Expected

(Indicate yes or no)

$ Yes No /

$ Yes No /

$ Yes No /

$ Yes No /

$ Yes No /

Total amount you are seeking from these sources: $

**9. Committed Donors**:

*List all individuals and organizations (both public and private), who have made a contribution (cash or in-kind) or a firm pledge, toward this project/program. Also list the amount contributed or pledged.*

Name of Committed Donor: Amount Pledged or received:

$

$

$

$

$

*(Use an attachment if necessary)*

Total contributed/pledged to this project/program to date: $

**10.** **Names and profession of Board Members for your organization:**

(Please do not include addresses. Use a separate page if necessary.)

**11. Financial Information:**

* Attach a detailed budget for the program/project for which you are requesting a grant.
* Attach the current year’s annual budget for your organization.
* Attach the most recent audited financial statements for your organization.
* Name of individual or organization preparing these financial documents:

Name:

Address:

Telephone:

Name of Primary Contact:

**12. Attach an IRS 501(c)(3) Exemption Letter with your organization’s Tax ID Number.**

**13. Attach a copy of your organization’s most recent tax return (990PF). Should you desire to save paper, the tax return may be copied on both sides of the paper.**

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Title:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Title: