# Monumental City Bar Foundation Grant Proposal Cover Sheet (required for all applications)

Date of application:

("not a private foundation") status.

Note: Deadline for submission of completed proposals is August 1, 2013 or as announced.

### **ORGANIZATION INFORMATION**

| Name of Organization  |                      | Legal Name (if different)             |                        |  |
|---|----------------------|---------------------------------------|------------------------|--|
| Former names (if applicable)  |                      |                                       |                        |  |
| Address   | City                 | State                                 | Zip                    |  |
| Phone   | Fax                  | Website (if available)                |                        |  |
| Executive Officer's Name  | Title                | Phone                                 | Email                  |  |
| Contact person regarding this application (if different from Executive Officer) | Title                | Phone                                 | Email                  |  |
| Address of contact person (if different from abo                                | ove)                 | City                                  | State                  |  |
| Total annual operating budget: \$   | for                  | Fiscal Year Ending:                   |                        |  |
| Requested Grant Amount:   |                      |                                       |                        |  |
| Project Dates: Begins:  |                      | Ends:                                 |                        |  |
|   | TAX INFORM           | IATION                                |                        |  |
| Is your organization certified by the IRS as a 5                                | i01(c)(3) nonprofit? | □Yes                                  | □ No                   |  |
| Employer Identification Number (EIN   | )                    |                                       |                        |  |
| Please attach a copy of (1) your current IRS                                    |                      | ndicating tax-exempt 501(c)(3) status | and (2) classification |  |

| <i>lf no</i> , is y | our organization a public age  | ncy/unit of government?        | □ Yes              | □ No     |  |
|---------------------|--------------------------------|--------------------------------|--------------------|----------|--|
| Is your or          | ganization certified by the IR | S under another section of 50  | )1(c) (such as 501 | (c) (6)? |  |
|                     |                                |                                | Yes                | No       |  |
| lf yes, ple         | ease attach a copy of your cu  | rrent IRS determination letter | for that status.   |          |  |
|                     |                                |                                |                    |          |  |
| Signatur            | e:                             |                                |                    |          |  |
|                     |                                |                                |                    |          |  |
| Please F            | Print:                         |                                |                    |          |  |
|                     |                                |                                |                    |          |  |
|                     | Name                           | Title                          |                    | Date     |  |
|                     |                                |                                |                    |          |  |
|                     |                                |                                |                    |          |  |
|                     |                                | DO NOT WRITE BELOW THIS        | S LINE             |          |  |
|                     | DATE GRANT                     | RECEIVED:                      |                    |          |  |
|                     |                                |                                |                    |          |  |
|                     | BY:                            |                                |                    |          |  |

## Monumental City Bar Foundation Grant Proposal Application

### **PROPOSAL INFORMATION**

Please provide the following information <u>in this order</u>. Do not use more than 5 pages, exclusive of attachments.

1. Provide a concise description of the project for which funds are sought.

2. Why is the project needed? What are its expected outcomes?

3. Describe specifically how the Foundation funds will be used for the project?

4. What other sources of funding have been identified for this project?

5. Who is responsible for implementation of this project? Please briefly describe the qualifications of responsible parties.

6. Please provide a timeline for the project's implementation.

7. Is the applicant going to be seeking the Foundation's support on a continuing basis for this project in future years?

8. How will the project be evaluated?

9. Are there similar ongoing projects? If so, how successful have they been? Why would the proposed project not be duplicative of these?

10. What, if any, marketing or publicity activities are planned for the project?

11. Any other information that helps describe the project and its relationship to your mission and goals.

### SUBMIT SEVEN (7) COPIES OF YOUR PROPOSAL WHICH INCLUDES:

- Copy of the letter from the IRS granting tax-exempt status and any subsequent IRS letters relating to the organization's status.
- Names, addresses and phone numbers of the current board of trustees/directors and the Board meeting schedule (i.e., monthly, quarterly or annually)
- Letter of support from the president of the Board of trustees/directors of your organization (or a copy of the Minutes of the Board meeting at which the grant application was approved).
- Financial information as follows:
  - Copy of operating budget for the current fiscal/calendar year.
  - Copy of the budget and actual revenue and expenses for the preceding fiscal/calendar year.

Please mail all documents to:

Monumental City Bar Foundation Attn: Grants Committee One South Street, Suite 2300 Baltimore, Maryland 21202