

# 2018 Telluride Foundation Community Grant: Capital Requests

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*Telluride Foundation*

## *Executive Summary*

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### **Project Name\***

*Name of Project*

*Character Limit: 250*

### **Funding Amount Requested\***

*Whole dollar amounts only; no \$ signs*

*Character Limit: 20*

### **Grant Request Executive Summary\***

*Please provide a one sentence statement of what the grant will be used for.*

*Character Limit: 175*

## *Organization Information*

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### **Mission Statement\***

*Character Limit: 1000*

### **Organization Programs, Activities, Accomplishments\***

*Please provide a brief list or summary*

*Character Limit: 3000*

### **Board of Directors\***

*List the names of each board member*

*Character Limit: 500*

### **Years Organization has been in Existence\***

*Character Limit: 250*

### **Number Full-time Employees**

*Character Limit: 10*

### **Number Part-time Employees**

*Character Limit: 10*

**Current Fiscal Year Start Date\***

*Character Limit: 10*

**Last Fiscal Year Total Expense\***

*Character Limit: 20*

**Last Fiscal Year Total Income\***

*Character Limit: 20*

## *Grant Request Details*

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**Total Capital Budget\***

*Character Limit: 20*

**Amount Committed/Raised to Date\***

*Character Limit: 20*

**Program Area\***

*If you are unsure as to which sector your program belongs, please review the Outcome/Indicator Matrix for each sector on the Telluride Foundation Community Grants web page.*

**Choices**

- Arts & Culture
- Athletics
- Early Childhood Education
- Education
- Environment & Animals
- Health
- Human Service

**Program Region\***

*Select the region that best fits the primary location that your program for which you are seeking funding serves. This is not necessarily the same region where your organization primarily serves.*

**Choices**

- Norwood
- Ouray County
- Rico
- San Miguel & Ouray counti
- San Miguel & West Montrose counites
- San Miguel County
- San Miguel, Ouray & West Montrose counties
- Telluride
- West Montrose County

## Population Served\*

### Choices

- All Age Groups
- 65 years and older
- 18 years to 65 years
- 18 years and under
- 5 years and under

## Gender

*Which gender(s) is/are served by this request?*

### Choices

- Both genders
- Primarily male
- Primarily female
- Other

## Ethnic group\*

*Which ethnic group(s) is/are served by this request?*

### Choices

- All Ethnic Groups
- Asian
- African American
- Caucasian
- Latino
- Native American
- Other

## Primary Economic Group Served\*

### Choices

- All Income Levels
- High Income
- Households 200% of Poverty
- Households At or Below Poverty
- Medium Income
- Second Homeowners

## Grant Request Purpose

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### Request Purpose\*

*Describe your capital project (This section expands on your Executive Summary.)*

*Character Limit: 3000*

### Project Need\*

*Character Limit: 3000*

## Describe your Fundraising Plan\*

Character Limit: 3000

## Project Deliverables\*

Character Limit: 3000

## How will completion of the project help you achieve your mission?\*

Character Limit: 3000

### Optional Video

*Applicants may provide, at their option, a link (YouTube, Vimeo, your website) to a video. Your video should emphasize the need for your grant request and why you are requesting funds from the Telluride Foundation. This is an opportunity to get across something more effectively with pictures and expressions than you could with narrative. Please do not send generic organization videos or videos of an event. This video should be made specifically for this grant application.*

*Videos should be a maximum of 3 minutes (two minutes is recommended). Make sure a password is not required to view.*

### Link to Video

Character Limit: 2000

## Fiscal Agent Information

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***A Fiscal Agent is a formal arrangement in which a 501(c)(3) nonprofit sponsors an organization that may lack exempt 501(c)(3) status. Only complete this section if you have a fiscal agent and attach your fiscal agent agreement under attachments.***

### Organization Name

Character Limit: 250

### Organization Address

Character Limit: 250

### City, State, ZIP

Character Limit: 250

### Fiscal Agent Contact Person

Character Limit: 250

### Fiscal Agent Email

Character Limit: 250

## Fiscal Agent Contact Phone

*Character Limit: 20*

## Attachments

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A Capital Project Budget Detail (use form on Community Grants Website) is required. Provide additional attachments, only if not submitting another Community Grants application.

### Capital Project Budget Detail\*

The Capital Project Budget Form is available on the Community Grant website and by clicking [here](#).

*File Size Limit: 1 MB*

### Current Year Balance Sheet\*

*File Size Limit: 1 MB*

### Current Year Income Statement/Budget v. Actual Year to Date\*

*File Size Limit: 1 MB*

### Next Year's Proposed Budget

*File Size Limit: 1 MB*

### 990 Tax Return from Previous Year\*

*File Size Limit: 4 MB*

### IRS 501c3 Determination Letter\*

*If you do not have an IRS 501(c)(3) letter, either attach:*

- *your fiscal agent's letter*
- *a document stating that you are a government entity*
- *a document stating that you are in the process of obtaining your 501(c)(3) status and date filed.*

*File Size Limit: 2 MB*

### Previous Year's Audit (if applicable)

*File Size Limit: 4 MB*

### Annual Report

*File Size Limit: 3 MB*

### Fiscal Sponsorship Agreement (if applicable)

*File Size Limit: 1 MB*

**Other (if applicable)**

*File Size Limit: 1 MB*