2023 Telluride Foundation Community Grant

Telluride Foundation

Introductory Questions

Eligibility Check List*

You must check all of the items below to be eligible to apply.

To confirm that you have a Certificate of Good Standing, click here. To see the Telluride Foundation's Nondiscrimination Clause, click here. To review the Outcomes/Indicators for your program sector, click here.

Choices

Program serves people in Rico, San Miguel, Ouray or west Montrose counties

Application has been approved by Executive Director, CEO, or Board Chair

Organization will agree to Foundation's Nondiscrimination Clause

Either you/fiscal agent has a CO Certificate of Good Standing OR you are a govt. or taxing entity I have reviewed the Outcome/Indicators for my program sector

I understand that I will be required to report on these Indicators in my Progress Report

Executive Summary

Project Name*

Name of Project
Character Limit: 100

Funding Amount Requested*

Whole dollar amounts only; no \$ signs

Character Limit: 20

Grant Request Executive Summary*

Please state what the grant will be used for in no more than one sentence. (Example Format: "for general operating." or "to provide scholarships for classes and programming.")

Character Limit: 150

Multi Year Funding

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Check the box if you are attaching a Multi-Year Funding Application Form to the attachments section, have read and met the criteria, and have discussed with Telluride Foundation staff

Choices

Multi-year Funding Form Attached

Organization Information

Mission Statement*

Character Limit: 1000

Organization Programs, Activities, Accomplishments*

Please provide a brief list or summary

Character Limit: 2000

Justice, Equity, Diversity and Inclusion (JEDI)*

Please describe how your organization demonstrates a commitment to justice, equity, diversity, and inclusion (JEDI) through your governance, operations, and/or mission delivery. For example, commitments could include (but not limited to):

- How programming and direct service decisions are informed by members of the communities you serve.
- How, this year, your staff and/or board are implementing JEDI efforts, including policies, trainings, programs, and events.
- How your organization has budgeted for JEDI efforts this year.
- How your board and/or staff reflect the people and communities you serve in terms of race, ethnicity, gender, disability, geographic location, social-economic status, sexual orientation, and/or lived experience.

We recognize that every organization is different and that advancing JEDI is an ongoing process and journey unique to each organization. We appreciate your honest reflections.

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

Amount Given in Financial Aid Last Fiscal Year

If you give out scholarships, financial aid, or have a sliding scale program, how much did you give in financial aid last fiscal year?

Character Limit: 300

Number of Months of Operating Expenses (last fiscal year expenses) your Organization has in Reserve*

This is the number of months you could continue operating with the savings you have, if you didn't receive any additional revenue.

Character Limit: 4

What are your plans for your unrestricted cash balances, if any, as of year-end?

Character Limit: 1500

What percent of your revenue is philanthropic (grants, donors, sponsorships) vs. earned?*

Character Limit: 150

Is there anything else about your financials you would like us to know?

For example, upcoming capital expenditures, program additions or expansions, new grants received, etc.

Character Limit: 2000

Grant Request Details

Request as Percent of Budget*

Grant request as a percent of your fiscal year organization budget. Provide whole numbers and no symbols; for example 25% would be 25.

Character Limit: 10

Previous Grant Information (Not Applicable if Grant Request \$5,000 or Less)

If you received a grant from the Telluride Foundation last year, how much did you receive? If you are asking for more this year, please explain why.

Character Limit: 1000

Differences from Last Year's Request (Not Applicable if Grant Request \$5,000 or Less)

If you submitted an application last year, highlight how this year's grant request is different. For example, you may indicate that it is the same, the same with a different request amount, or a different program.

Character Limit: 1000

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 where your grant funding would be used. This is not necessarily the same location where your organization office resides or where you may primarily serve.

Choices

Norwood

Ouray County

Rico

San Miguel & Ouray counties

San Miguel & West Montrose counites

San Miguel County

San Miguel, Ouray & West Montrose counties

Telluride

West Montrose County

Request Type*

Choose all that apply.

Choices

Program/Project

General Operating

Technical Assistance

Ethnic group*

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

Choices

All Ethnic Groups Asian African American Caucasian Latino

Native American

Other

Grant Request Purpose

Program/Project Need (Not Applicable if Grant Request \$5,000 or Less)

Elaborate on the reasons why your project or program is important now.

Character Limit: 2000

Request Purpose*

Describe the purpose of your grant request, including overall goal and any specific objectives or activities you plan to accomplish. If your grant request is for general operating, please provide organizational goals you hope to accomplish during the next year. This section expands on your Executive Summary.

Character Limit: 3000

Collaborations*

List specific groups and their roles that your organization may be collaborating with for this funding request.

Character Limit: 2000

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 use pictures and expressions to explain your project/program more effectively than you could with a 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 three minutes (two minutes is recommended). Make sure a password is not required to view.

Link to Video

Character Limit: 2000

Outcomes

Prior to completing this section, please review the chart of Outcomes/Indicators for your program sector. In the space below, discuss how you will report on the indicators required for your sector. For example, if you are applying for a health program, name the HP 2030 Objective you will be using and your baseline number. You may want to discuss the surveys or process you will be using to collect indicator information over the grant period. You will be expected to report on your actual outcome indicators in your progress report.

To see the charts of outcomes/indicators:
Arts & Culture
Athletics
Early Childhood
Education
Environment & Animals
Health
Human Service

Outcomes Narrative (Not Applicable if Grant Request \$5,000 or Less)

Describe how you will measure your expected indicators and describe additional qualitative or quantitative tools you plan to use to measure success.

Character Limit: 2500

Attachments

Project Budget Detail

The Project Budget Form can be found by clicking here or is located on the Foundation's website on the Community Grants page. Only complete if requesting project/program funding, not general operating.

File Size Limit: 1 MB

Current Year Balance Sheet*

If you are part of a larger organization, please only send the portion of your financials that is relevant to your program.

File Size Limit: 2 MB

Current Year Profit & Loss*

If you are part of a larger organization, please only send the portion of your financials that is relevant to your program.

File Size Limit: 2 MB

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Current Year Budget*

File Size Limit: 1 MB

990 Tax Return from Most Recent Year (Not Applicable if Grant Request 5,000 or Less)*

Please submit your entire 990 with schedules, not an abbreviated version (your audit if available.) If not this year's 990 provide the previous year, or most recent that you have.

File Size Limit: 9 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

Scholarship Applications & Criteria (if requesting funding for scholarships)

File Size Limit: 1 MB

Fiscal Sponsorship Agreement (if applicable)

File Size Limit: 1 MB

Child Care Center Quality Documentation (if applicable)

File Size Limit: 1 MB

Other (if applicable)

File Size Limit: 3 MB

Multi Year Funding Form

Prior to completing this form, you should read the multi-year funding criteria in the grant guidelines and discuss your eligibility with Telluride Foundation staff. To access the Multi-Year Funding Form, click here.

File Size Limit: 1 MB

Fiscal Agent Information

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.

Fiscal Agent Organization Name

Character Limit: 250

Fiscal Agent Organization Address

Character Limit: 250

Fiscal Agent City, State, ZIP

Character Limit: 250

Fiscal Agent Contact Person

Character Limit: 250

Fiscal Agent Email

Character Limit: 254

Fiscal Agent Contact Phone

Character Limit: 20