

2024 Telluride Foundation Community Grant: CAPITAL PROJECTS

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](#).

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

Did You Receive a Grant Last Year from the Telluride Foundation?*

Choices

Yes

No

Received a Grant Last Year

Purpose of Last Years Grant?*

Please provide a brief executive summary of your last year's grant purpose (e.g. general operating or to fund the XXX program).

Character Limit: 700

Amount Received?*

What was your last year's grant award?

Character Limit: 100

Expenditure of Grant Funds*

Please summarize how grant funds were spent.

Character Limit: 1000

Impact of Last Year's Grant Funding*

What was the impact of the grant funding you last received from the Foundation. How did you evaluate success, what were the outcomes, if you measured specific metrics for your program or organization, please provide them.

Character Limit: 2000

Constituents Served*

How did you ensure that you reached the constituents/participants you intended to serve?

Character Limit: 1000

Example or Story Illustrating Success*

Please provide an example illustrating the need for or the impact/success of the work funded through your grant?

Character Limit: 2000

Optional Video

If you would like to share a short video, illustrating the success or impact of your program, please upload a link (YouTube, Vimeo, your website etc)

Character Limit: 2000

Other Comments

Please share with us any recommendations or comments if you would like.

Character Limit: 1500

Executive Summary

Project Name*

Name of Project

Character Limit: 100

Funding Amount Requested*

Whole dollar amounts only; no commas or \$ signs

Character Limit: 6

Grant Request Executive Summary*

Please state what the grant will be used for in no more than one sentence.

Character Limit: 200

Organization Information

Mission Statement*

Character Limit: 700

Organization Programs, Activities, Accomplishments*

Please provide a brief list or summary

Character Limit: 2000

Equity and Inclusion*

We value organizations' commitment to serving their constituents and making them all feel welcome despite differences in race, ethnicity, gender, religion, and/or lived experiences. Please share any example(s) of how your organization has promoted community or constituent involvement that reflects equitable and inclusive practices.

Character Limit: 1500

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

Total Capital Budget*

Character Limit: 100

Amount Committed/Raised to Date*

Character Limit: 100

Program Area*

Please select one that best reflects the category your capital project relates to.

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 counties
San Miguel County
San Miguel, Ouray & West Montrose counties
Telluride
West Montrose County

Grant Request Purpose

Request Purpose*

Describe your capital project. This section expands on your Executive Summary.

Character Limit: 2500

Program/Project Need*

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

Character Limit: 1500

Program Impact*

Please elaborate on the impact your program/organization. For example, number of people served, proven results, cost/benefit, etc.

Character Limit: 1500

Describe Your Fundraising Plan*

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

Outcome

Evaluation*

Please describe how you plan to measure the success of your capital project. What outcomes or deliverables will you strive to achieve and what metrics and/or quantitative information will you collect?

Character Limit: 1500

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

Attachments

Capital Project Budget Detail*

A Capital Project Budget Form is required. Do not provide attachments, other than Capital Project Budget if you are submitting another Community Grants application. The Project Budget Form can be found by clicking [here](#) or is located on the Foundation's website on the Community Grants page.

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

Current Year Budget*

File Size Limit: 1 MB

990 Tax Return from Most Recent Year

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: 3 MB

Other (if applicable)

File Size Limit: 3 MB