

## Kelly Foundation of Washington

### Application Information

Please read these directions before completing your application. Your grant application consists of two parts: the application form and the documents cited below. You must provide the **completed original form and five (5) complete copies, including cover letter**. Grant applications will be considered at the June and December board meetings. Please have your application submitted by the middle of the prior month.

The following documents must accompany the application:

- A copy of the IRS letter(s) confirming the applicant's 501(c)(3) status and that it is classified under Section 509(a) as "...not a private foundation."
- A budget for the entire project for which the organization seeks support. Please use the budget form provided with the application.
- The resume of the organization's director.
- A current list of the organization's board of directors or trustees.

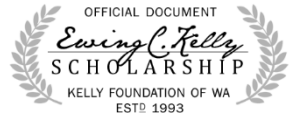
**Attach copies in the order listed to the completed application form and each copy. Also include a copy of cover letter, if any.**

Your response to Item #4, *Statement of Project*, must be limited to the space provided and should include the following information:

- A short history of the organization and its mission.
- Background on the specific needs addressed by the program. Please focus on the needs of the people to be served by the program or facility.
- Program objectives such as an estimate of the number of people who will be helped by the project.
- The total project cost, the amount and use of the requested grant, the plan for raising other needed moneys, and a project timetable.

**P O Box 19208  
Seattle WA 98109-1208 Voice  
Mail (206) 706-8486  
Fax (206) 706-1030**

**[kellyfoundationwashington.org](http://kellyfoundationwashington.org)**



**1. APPLICANT:**

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone (\_\_\_\_\_) \_\_\_\_\_ Ext. \_\_\_\_\_

Email address \_\_\_\_\_

Director's Name \_\_\_\_\_

Director's Title \_\_\_\_\_

Other Contacts \_\_\_\_\_

**2. INTERNAL REVENUE SERVICE TAX EXEMPTION STATUS:**

\*Date of 501(c)(3) \_\_\_\_\_

\*Date of 509(a) \_\_\_\_\_

\*Attach Verification.

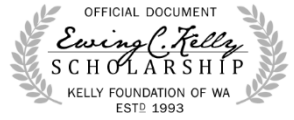
**3. (A) PROJECT TITLE:**

**(B) DESCRIBE BRIEFLY THE PURPOSE OF THE GRANT:**

**Request to KELLY FOUNDATION OF WASHINGTON: \$ \_\_\_\_\_**

**Total Project Budget: \$ \_\_\_\_\_**





**EQUIPMENT ACQUISITION BUDGET**

Total amount to be raised: \$ \_\_\_\_\_

Amount raised to date: \$ \_\_\_\_\_

Amount remaining: \$ \_\_\_\_\_

Please list other donors solicited for this project and amounts requested or given:

Please list the equipment you plan to acquire and its cost:

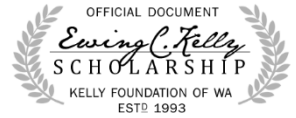
|              |                 |
|--------------|-----------------|
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| _____        | \$ _____        |
| _____        | \$ _____        |
| _____        | \$ _____        |
| <b>TOTAL</b> | <b>\$ _____</b> |

When did you begin raising money for this project? \_\_\_\_\_

When do you plan to complete raising money for this project? \_\_\_\_\_

When do you plan to put this equipment into service? \_\_\_\_\_





**PROGRAM BUDGET**

**REVENUE/SUPPORT**

Contributions \_\_\_\_\_  
Special Events (Net) \_\_\_\_\_  
United Way(s) \_\_\_\_\_

**GOVERNMENT GRANTS**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Government Grants      Total \_\_\_\_\_

**PRIVATE GRANTS**

KELLY FOUNDATION OF WASHINGTON \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Private Grants      Total \_\_\_\_\_

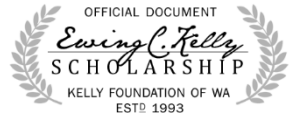
Program Fees \_\_\_\_\_  
Miscellaneous \_\_\_\_\_  
Revenue/Support Grand Total \_\_\_\_\_

**EXPENDITURES**

Salaries of Ex Director \_\_\_\_\_  
  Other top-paid personnel \_\_\_\_\_  
  
Employee Benefits of Ex Director \_\_\_\_\_  
  Other top-paid personnel \_\_\_\_\_  
  
Payroll Taxes (as above) \_\_\_\_\_  
\_\_\_\_\_  
  
Professional Fees \_\_\_\_\_  
Supplies \_\_\_\_\_  
Telephone \_\_\_\_\_  
Postage/Shipping \_\_\_\_\_  
Occupancy \_\_\_\_\_  
Equipment \_\_\_\_\_  
Miscellaneous \_\_\_\_\_  
  
Expenditures Total \_\_\_\_\_

Project budget for the period of \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_





**CAPITAL BUDGET**

**GRANTS/DONATIONS**

Campaign goal \_\_\_\_\_

Amount raised as of \_\_\_\_/\_\_\_\_/\_\_\_\_ \_\_\_\_\_

Amount remaining to be raised \_\_\_\_\_

Sources of funding received or applied for:

**EXPENDITURES**

Property Acquisition \_\_\_\_\_

Site Preparation \_\_\_\_\_

Site Improvements \_\_\_\_\_

Professional Fees \_\_\_\_\_

Construction \_\_\_\_\_

Landscaping \_\_\_\_\_

Equipment/Furnishings \_\_\_\_\_

Taxes \_\_\_\_\_

Fees \_\_\_\_\_

Miscellaneous \_\_\_\_\_

\_\_\_\_\_

**TOTAL** \_\_\_\_\_

Capital Campaign \_\_\_\_\_ to \_\_\_\_\_

Construction Timetable \_\_\_\_\_ to \_\_\_\_\_

Occupancy Date \_\_\_\_\_

Equipment Acquisition \_\_\_\_\_