

Town of New Castle Grant Application

Applicant Organization: _____

Type of organization (please check ONE type of organization in only ONE Grant Category):

Arts and Special Events Grants

- Arts Organizations (performing arts, visual arts, and art-based education)
- Special Events (defined as "town gatherings that are open to the general public")

Community Support Grants

- Service Organizations (human, welfare, and community)
- Athletic Organizations
- Educational Organizations
- Other (please specify) _____

Grant Request = \$ _____

Include the following required items, in this order:

- Completed Application Checklist (*Page 1 of application*);
- Complete Grant Application (*Parts 1 – 4 of application*);
- Letter of Agreement with applicant's umbrella organization (if applicable);
- Most recently filed IRS 990 Form (if applicable). If not applicable, submit a letter indicating non-profit status (*Part 3 of application*);
- Proposed Budget (*Part 3 of application*);
- Financial Statements (Profit & Loss Statement and Balance Sheet) for the current year to date and previous completed fiscal year (*Part 3 of application*)

Keep the instructions for the follow-up report (Part 4 of the application, on Page 8). If you are awarded a grant, you must submit this report to the Town by July 29, 2019.

Please e-mail your completed application **by 5:00 p.m., November 13, 2018** to:
Debbie Nichols at: dnichols@newcastlecolorado.org

Because the Town of New Castle is committed to environmental conservation, we appreciate applications submitted by e-mail. Please feel free to call Debbie at 984-2311 if you require assistance with completing any part of this application.

Part 1: Applicant Information

Name of applicant organization: _____

Name of umbrella organization: _____
[If applicant does not have 501(C)3 or non-profit status]

Applicant contact person: _____

Phone: _____ Fax: _____ E-Mail Address: _____

Mailing address: _____ City: _____

State: _____ Zip: _____ Non-profit tax ID number: _____

List organization's officers, directors, general partners, and managing members:

_____	_____
_____	_____
_____	_____

For how many years has your organization or event been in existence? _____

For Special Events Only: List event dates: _____

Part 2: Grant Request

GRANT REQUEST \$ _____

Please respond to the following in ***no more than 6 pages*** (10-point font minimum). You must follow the format, number system, and headings as presented in the Grant Application. Make sure you include the number and heading for the information requested so Town officials can readily find the various categories as presented in the Grant Application.

1. State:
 - A. Your organization's mission statement, goals, and objectives
 - B. Purpose of requested funds
List budget items for which funds will be expended
 - C. Geographic location where funds will be expended
Quantify the percentage of programs/activities accessible to the community of the following locations (percentages should add up to 100%):

Arts and Special Events Organizations
Town of New Castle

Community Support Organizations
Town of New Castle
Garfield County (outside of New Castle)
Other (outside of Garfield County)
 - D. Why it is critical you receive this funding
2. State how the community will be strengthened by your organization. Include:
 - A. Educational benefits
 - B. Cultural benefits
 - C. Economic benefits
 - D. Other
3. How will community responsiveness to the event/institution be measured?
4. Will your organization charge a fee to participate in your program or event? If so, what types of scholarships or grants are provided to participants who cannot afford to pay this fee?
5. List other funding you are pursuing. Include sources that are:
 - A. National
 - B. State
 - C. County
 - D. Private
 - E. Other local funds

Include name of institution and amounts in narrative, and % of budget you are seeking from each.

6. Describe staffing plan, including volunteers and paid staff.

Part 3: Financial Information

Submit the following for your organization:

1. Most recently filed IRS 990 Form (if applicable). If not applicable, provide a letter stating why your organization does not file a 990 AND submit a letter indicating non-profit status.
2. 2018 budget projection to include at a minimum (2 pages maximum):

Percent of budget you are requesting from the Town

In kind amounts

Salaries

Travel and entertainment

Grants & sponsorships

Contributions

Ticket / admission sales

3. Financial statements (see attached examples on pages 5 through 7):

Profit & Loss Statement (budget vs. actual)

Current year to date

Previous completed fiscal year

Balance Sheets (summary)

Current year to date

Previous completed fiscal year

OR

If these financial statements are not available, explain why.

4. Explain any budget irregularities.

Example of a Profit and Loss Statement

Northwind Traders

Profit and Loss

Date Range: January 1, 2009 - January 29, 2009

Account: All, Report Basis: Accrual, Name: All, Closing Postings: Not Included

Thursday, January 29, 2009

	1/1/09 - 1/29/09
Ordinary Income/Expense	
Income	
4020 - Sales	136,847.43
4025 - Cash Discount Given	(196.47)
Total Income	136,650.96
Cost of Goods Sold	
4510 - Cost of Goods - Materials	92,460.86
4530 - Cash Discount Taken	(153.65)
Total COGS	92,307.21
Gross Profit	44,343.75
Expense	
5710 - Repairs and Maintenance Expenses	47.63
6410 - Freight/Shipping Expenses	87.19
6910 - Rental Expenses	
6915 - Leased Facilities	1,000.00
Total 6910 - Rental Expenses	1,000.00
Total Expense	1,134.82
Net Ordinary Income	43,208.93
Net Income	43,208.93

Example of a Balance Sheet

Northwind Traders

Balance Sheet

As of: 1/29/2009
 Report Basis: Accrual
 Thursday, January 29, 2009

As of 1/29/09

Assets

Current Assets

Cash

1005 - Undeposited Funds	(20,542.14)
1007 - Cash-Petty Cash	352.37
1010 - Checking Account	12,568.95
1115 - Savings	207,455.61

Total Cash	199,834.79
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Accounts Receivable

1210 - Accounts Receivable	102,701.05
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Total Accounts Receivable	102,701.05
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Other Current Assets

1410 - Employee Loans	100.00
1420 - Prepaid Expenses	2,587.50
1425 - Prepaid Insurance	1,000.00

Inventory Assets

1250 - Inventory Asset	48,919.22
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Total Inventory Assets	48,919.22
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Total Other Current Assets	52,606.72
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Total Current Assets	355,142.56
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Fixed Assets

1510 - Property and Equipment	65,000.00
1511 - Accum. Depr. Property and Equipment	(5,000.00)
1520 - Office/Store Furniture and Fixtures	12,000.00
1521 - Accum. Depr. Furniture and Fixtures	(9,000.00)

Total Fixed Assets	63,000.00
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Total Assets	418,142.56
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Liabilities & Equity

Liabilities

Current Liabilities

Accounts Payable

2010 - Accounts Payable	84,937.17
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Total Accounts Payable	84,937.17
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Credit Cards

2610 - Payroll Liability - Other	300.00
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Total Credit Cards	300.00
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Other Current Liabilities

2015 - Pending Item Receipts	347.59
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2200 - Payroll Liabilities

2210 - Federal Tax Liability	834.20
2215 - Federal Tax Liability (FUTA)	145.00
2220 - State Tax Liability	416.00
2230 - 401 (k) Liability	2,000.00
2240 - Payroll Liability - Net Pay	85.00
2250 - Medical/Dental Liability	990.00

Total 2200 - Payroll Liabilities	4,470.20
2300 - Sales Tax Payable	7,433.19
2310 - Other Payables	500.00
2315 - Interest Payable	2,000.00
Total Other Current Liabilities	14,750.98
Total Current Liabilities	99,988.15
Long Term Liabilities	
2710 - Note Payable to Bank	20,000.00
Total Long Term Liabilities	20,000.00
Total Liabilities	119,988.15
Equity	
3015 - Owners' Equity	37,000.00
3020 - Owners' Withdrawals	(11,000.00)
3025 - Retained Earnings	76,484.48
Net Income	195,669.93
Total Equity	298,154.41
Total Liabilities & Equity	418,142.56

Keep this page. If you are awarded a grant, you must submit a follow-up report to the Town by July 29, 2019.

Part 4: Follow-up Report

No more than 2 pages

All grant recipients are required to submit a follow-up report on the Year 2019 event or organization.

Reports should include, but not necessarily be limited to:

- A. Tickets sold/people served
- B. Number of days of event/program
- C. Scholarships awarded
- D. Educational programs provided
- E. Actual use of funds
 - Budget items
 - Geographic location where funds were expended (quantify the percentage of programs/activities accessible to residents of the following locations: Town of New Castle, Garfield County, and outside of Garfield County)
- F. Describe how your event/program benefited the community
- G. Describe any problems with your event, programming, or organization the Town should know about.
- H. Other