



January 1, 2022

Dear Prospective GKWC Grant Applicant,

Thank you for your inquiry about a possible grant from the Greater Keller Women's Club Foundation. Grants will only be awarded to organizations with a 501(c)(3) tax-exempt status as determined by the IRS. Attached are the guidelines, application and checklist for consideration of a grant in 2022. These forms, along with all supporting documentation, should be completed and returned to The Greater Women's Club Foundation, P.O. Box 2365, Keller, Texas 76244. The application must be postmarked no later than **April 1, 2022**.

A committee consisting of The Greater Keller Women's Club members reviews the grant applications and strives to award grants to deserving organizations in the community. There are numerous criteria including, but not limited to, financial need, other forms of support, administration cost and impact in the community. In an effort to award these organizations accordingly, the Foundation has a four-step approval process. We hope you understand the GKWC Foundation strives for excellence in the area of giving and wishes the best for all of our applying organizations.

A letter indicating the status of your application will be mailed immediately following the final approval process on **May 27, 2022**. The Distribution of Funds Dinner will be held on Thursday, June 16th, at The Bowden Event Center.

If you have any questions, or if I may be of assistance, please text or call me at 817-296-3042 or email me at Philanthropy@gkwc.org

Sincerely,

Pat Chisholm
GKWC Philanthropy Chairperson

*P. O. Box 2365 Keller, Texas 76244
www.gkwc.org*

GKWC FOUNDATION'S GUIDELINES FOR THE DISTRIBUTION OF FUNDS FROM GKWC FUNDRAISING ACTIVITIES

MISSION:

To assist in the development of the community by providing educational scholarships to graduating seniors in Keller ISD, and to assist in supporting, organizing and sponsoring various activities for the youth, seniors, and disadvantaged people of Tarrant County.

We are committed to being a partner in diversity, equity, and inclusion to each other, to those we serve, and to our community.

QUALIFYING ORGANIZATIONS:

Health and Human Services
Education
Arts and Culture
Community Improvement

Priority consideration is given to educational programs and to health and human service organizations, particularly with programs that help people gain skills for self-sufficiency.

QUALIFYING CRITERIA:

- Organization is exempt from federal income tax under section 501-C (3) of the Internal Revenue Service code.
- Charitable organization is in full compliance with all federal state, and local laws or regulations.
- Program or project addresses community-related issues.
- Grants generally will not be given to tax-supported organizations or religious groups and churches, except for programs or projects that broadly benefit the community.

GRANT APPLICATION CHECKLIST:

GRANT REQUESTS **MUST INCLUDE** THE FOLLOWING INFORMATION: **PLEASE DOUBLE CHECK YOUR APPLICATION!**

- ◇ Proposal summary: A brief description of the program or project for which funding is being requested, including target population, number of people who will be served and desired impact.
- ◇ Amount of the request: the total fund-raising goal for the project or program.
- ◇ Organization's stated mission.
- ◇ Organization's annual budget. Primary sources of funding.
- ◇ Financial information and budgets for both your agency and the specific program/project including both income and expenses for the prior year, current year, and project year.
- ◇ Others who financially support the organization & contribution levels.
- ◇ Current year list of Board of Directors, including addresses and phone numbers – please attach.
- ◇ Attach a copy of organization's 501-C (3) tax-exempt status determination from the IRS.
- ◇ Attach a copy of organization's W-9 form, form 990, and a financial statement.

- ◇ Completed application; checklist must be returned.
- ◇ **Two signatures** as well as contact information. *Grant will not be considered without this.*

Preparer of this grant application and checklist:

Name: _____ Phone #: _____

Email: _____

Signature: _____

Head of Agency

Name: _____ Phone #: _____

Email: _____

Signature: _____

GRANT APPLICATIONS MUST BE POSTMARKED NO LATER THAN APRIL 1, 2022

MAILING ADDRESS:

GREATER KELLER WOMEN'S CLUB FOUNDATION
PHILANTHROPY COMMITTEE
P. O. BOX 2365
KELLER, TX 76244

GREATER KELLER WOMEN'S CLUB FOUNDATION

GRANT APPLICATION

Date Submitted: _____

| | |
|---------------|----------------------|
| GKWC use only | Date Received: _____ |
|---------------|----------------------|

COMPLETE ALL QUESTIONS:

Are you a _____ New Applicant or is this a _____ repeat application (within the last 3-6 years).

If new applicant, would you welcome a site visit by our representatives? _____ Yes _____ No

Name of Organization: _____

Address: _____

Primary Contact: _____ Title: _____

Email: _____ Fax: _____

Phone: _____ Website: _____

Amount of your grant request \$ _____

Date of your organization/grant's fiscal year: From: _____ To: _____

Will grant be used during current fiscal year? _____ Yes _____ No

If no, when will the funds be used? _____

Brief description of project or program for which funds are being requested [use additional pages if necessary]:

Project/Purpose [use additional pages if necessary]:

Target Population: _____ Number of people served: _____

GREATER KELLER WOMEN'S CLUB FOUNDATION Grant Application, cont'd.

Desired impact:

Include in this grant application, a list of any grants received from the GKWC in the past five (5) years.

BUDGET INFORMATION: DO YOU RECEIVE FUNDS FROM ANY OTHER SOURCES?

Please check all sources that apply.

| Organization | Yes | No | Amount | % of Budget* |
|---------------------------|-----|----|--------|--------------|
| United Way | | | | |
| Government | | | | |
| Corporate Donation/Grants | | | | |
| Other Agencies | | | | |
| Foundation/Churches | | | | |
| Private Donations | | | | |
| Special Events | | | | |
| Other Sources | | | | |

*** if a source category makes up 50% or more of your budget, please identify donors' names of that category.**

2021 ORGANIZATION INFORMATION

Current fiscal year budget: _____
 Administrative Costs \$ _____
 % of total budget: _____
 Campaign fund raising costs: _____
 % of total budget: _____

2021 PROGRAM/PROJECT INFORMATION

Current fiscal year budget: _____
 Administrative Costs \$ _____
 % of total budget: _____
 Campaign fund raising costs: _____
 % of total budget: _____

Explanation of Administrative cost: _____

_____ [use additional pages if necessary]:

2022 PROJECTED YEAR BUDGET OF THE ORGANIZATION

Fiscal year budget: _____
 Administrative Cost \$ _____
 % of total budget: _____
 Campaign fund raising costs: _____
 % of total budget: _____

2022 PROJECTED YEAR BUDGET OF THE PROJECT

Fiscal year budget: _____
 Administrative Costs \$ _____
 % of total budget: _____
 Campaign fund raising costs: _____
 % of total budget: _____