Baltimore Women’s Giving Circle Grant Application

Part I. Organization Information

*Note: required questions are marked with \**

## Organization’s Name\*

Character Limit: 100

## Mailing Address

## Address 1\*

## Character Limit: 50

## Address 2\*

## Character Limit: 50

## City\*

## Character Limit: 50

State\*

Character Limit: 2

Zip\*

Character Limit: 10

## Contact Information

Please provide the name of the Executive Director, CEO or President who is authorized to sign a grant agreement.

Executive’s Name\*

Character Limit: 100

Executive’s Email\*

Character Limit: 100

Executive’s Phone Number \*

(use this format XXX-XXX-XXXX ext. XXX)

Character Limit: 50

Preferred Contact Person in addition to the Executive

This could be the program director or staff member who is completing this application.

Preferred Contact Person Name\*

Character Limit: 100

Preferred Contact Person Position\*

Character Limit: 100

Preferred Contact Person Email\*

Character Limit: 100

## Preferred Contact Person Phone Number(s)\*

## (use this format XXX-XXX-XXXX ext. XXX)

Character Limit: 50

Applicant’s Nonprofit Status

The **applicant** is the organization delivering services and programs in Baltimore City and/or Baltimore County and is applying for the grant. The applicant may or may not be the organization that holds the IRS 501(c)(3) Letter of Determination.

Please identify your organization’s Federal tax-exempt status by choosing one of the following options.

Does your organization:

* Have your own IRS 501(c)(3) Letter of Determination?
* Use a Fiscal Sponsor that holds the IRS 501(c)(3) Letter of Determination?
* Operate as a local chapter of a national or state nonprofit organization of the same name and mission which holds the IRS 501(c)(3) Letter of Determination?

***Note: Applicants should complete Parts I-III from their own perspective.***

Organization’s Mission\*

This statement will be used to introduce your organization to our members.

Character Limit: 750

Brief Organizational History\*

Character Limit: 2000

Organization Website url \*

Character Limit: 200

## Organization’s Preferred Social Media Handles

* Instagram
* Facebook
* YouTube
* LinkedIn
* Other:

## Applicant Organization’s Current Fiscal Year Budget \*

### Choose One

* Up to $500,000
* Up to $1 million
* Up to $5 million
* Over $5 million

## Number of Years in Operation\*

How many years has your organization been operating? If you have your own 501(c)(3) now, but previously used a fiscal sponsor, include that time as well.

### Choices

* Less than 1 year
* 1 - 3 years
* 3 - 5 years
* 5 – 10 years
* More than 10 years

## Category of Funding Support\*

We understand that many organizations provide services for several of the following categories. Please select ONE category that best describes the work that would be funded by this grant.

* Advocacy
* Case Management/Referral
* Domestic/Sexual Violence
* Drug/Alcohol/Mental Health
* Education (includes adult literacy)
* Emergency Grants
* Financial Literacy
* Food & Hunger Services
* Health Services
* Housing
* Legal Services
* Life Skills
* Mentoring
* Parenting Skills
* Senior Services
* Workforce Development

## Other**:** please specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Character Limit: 50

## Population Served\*

### Choices

* Women only
* Women and Children/Adolescents
* Children/Adolescents only
* Other: please explain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Character Limit: 50

## Geographic Area Served\*

### Choices

* Baltimore City
* Baltimore County
* Both Baltimore City and Baltimore County

## Part II. Grant Request

## Type of Funds Requested

## A. Choices**\***

* Unrestricted General Operating
* New Project
* Continuing Project

*Note: Applicant organizations with budgets of $5 million or more may apply only for project funding.*

## B. Project Name

## If you are requesting funds for a new or continuing project, what is the name of the project? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Character Limit: 200

## Amount Requested\*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *Reminder - maximum grant $25,000*

Character Limit: 20

## Grant Request Summary\*

In one or two sentences, briefly describe how you plan to use the funds you are requesting and their importance to the success of your organization’s mission or your project objective.

Character Limit: 500

Part III. Applicant Narrative

Please use this section to tell us your story about your organization or project. The prompts in italics are provided as a guide for you to include in your narrative, if applicable or appropriate. Feel free to use bullet points. The final, *optional* question is open ended so that you can include additional information that you think is particularly important to your funding request.

1. **W****hat community issue does your organization/project address and how do you address it?\***

*Please describe the programs, services, or projects, emphasizing the activities that your organization offers to women and their families. Tell us about your community partners with whom you collaborate, if any. Feel free to elaborate to help us appreciate your passion and purpose.*

Character Limit: 2500

1. **How do you know that your work is making a difference?*\****

*Please describe how you evaluate the impact of your work (be specific, for example, documented outcomes or impactful stories from your participants). How do you apply what you learn to making improvements to your program offerings?*

Character Limit: 2500

1. **How does your organization’s leadership engage women and their families in the work of the organization?\***

*How are the individuals being served provided opportunities to actively participate in program development, delivery, or governance? How does the staff's first-hand experience with the community issue shape the organization's efforts and initiatives? How does the leadership involve residents within the geographic service area who have first-hand experience with the addressed issue, where applicable?*

Character Limit: 2500

1. **What else would you like to tell us that we haven’t asked?**

*You are welcome to include links to other information. This question is optional.*

Character Limit: 3000

Part IV. Financial Information

Complete the following questions:

**Annual Budget:\***

What is the applicant’s current total fiscal year annual budget amount? $\_\_\_\_\_\_\_\_\_\_

*The answers to the following questions are for the organization providing the IRS 501(c)(3) Determination Letter to be submitted in Part V.*

**Employer Identification Number\***

What is the organization’s Employer Identification Number (EIN)?\_\_\_\_\_\_\_\_\_\_\_\_

**Audited Financial Statements**

What are the dates for the fiscal year covered in the most recent Audited Financial Statements, if applicable? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Form 990\***

What are the dates for the fiscal year covered in the most recent IRS Form 990, Form 990-EZ or 990-N? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Part V. Required Attachments

Please read the instructions in this section carefully. The required financial reports are not the same for all organizations. You determine the applicable documents based on the instructions provided under each document listing (Items #1-7).

If the appropriate financial documents are not submitted, your submission is incomplete and will not be eligible for funding.

Items #1-3 are for the organization which holds the IRS 501(c)(3) Determination Letter.

Items #4-7 are for the organization applying for the grant, defined as the “applicant.”

Response to Items #5-7 will depend on the type of funding you are requesting.

For all documents, the file name should include the name of the organization and the type of document.

1. **IRS Documentation\***

Upload the Determination Letter confirming your organization’s federal tax-exempt status under section 501(c)(3). This letter may be for your organization, your fiscal sponsor, or the national or state organization that has the same name and mission as the applicant.

***Upload a file*** **[1MB allowed]**

1. **Audited Financial Statement**

If available, upload the most recent audited financial statement for the organization providing the IRS 501(c)(3) Letter of Determination.

***Upload a file [5MB allowed]***

1. **IRS Form 990**

If you do not have audited financial statements, upload the most recently filed IRS Form 990, 990-EZ or 990-N for the organization providing the IRS 501(c)(3) Letter of Determination.

***Upload a file [1MB allowed]***

1. **Financial Statement for Prior Fiscal Year**

The financial statement should include a revenue and expense statement and a balance sheet, if available. The financial statement should be for the applicant. Applicants with a budget of $5 million or more may skip this step.

***Upload a file [1MB allowed]***

1. **Budget and Financial Statement for the Current Fiscal Year**

If you are requesting **unrestricted general operating funds**, upload your current fiscal year annual budget and most recent revenue and expense statement. The budget and financial statement should be for the applicant. If you are not requesting operating funds, you may skip this question.

***Remember operating funds may not be requested by applicants with budgets of $5 million or more***

***Upload a file [2MB allowed]***

1. **Project Budget for New or Continuing Projects**

If you are requesting **project funds** for a **new or continuing project** upload a project budget indicating the expected sources of revenue and projected expenses for July 1, 2025 - June 30, 2026.

***Upload a file [1MB allowed]***

1. **Current Project Budget and Financials for Continuing Project**

If you are requesting **project funds** for a **continuing** **project,** upload a project budget for the current fiscal year, with revenues and expenses through September 2024. Please indicate the dates of your fiscal year.

***Upload a file [1MB allowed]***

***Note:*** *If you do not have a template for financial statements (FS) or for a project budget (PB), the templates,* ***BWGC FS*** *and* ***BWGC PB***,*have been provided for your use. After you have completed the template, save it with your organization’s name in the title, then upload the saved file.*

*If you have your own budget or revenue and expense statement form, please compare its format with our template to make sure you have included all applicable income and expenses categories.*

***If you cannot provide the financial information required for your type of funding request, please attach a Word or PDF document that explains when you will be able to provide the requested information.***

*If your file is too large to be uploaded, please convert it to a PDF and try again. Still too large? Compress the PDF to a ZIP file. If that fails too, please contact grants@thebwgc.org.*