

CHECKLIST

This checklist is designed to ensure that all information required by the Thomas L. Cline Foundation to make a determination is submitted by your organization. It is not necessary to submit the checklist itself.

Submission of Application: A PDF document that includes the following information must be submitted to info@clinefoundations.org. Receipt of the application will be acknowledged by email.

- Section I: Cover Letter (one page)**
Include the purpose of the grant request and a brief description of how the request fits with your organization's mission and priorities.
- Section II: Summary Sheet Form**
Use the 2-page template provided.
- Section III: Narrative**
- Section IV: Attachments**
Financial Attachments
 - 1(a). Organization budget
 - 1(b). Program or project budget, if applicable
 - 2. Current (year-to-date) financial statements
 - 3. Year-end financial statements, audit, and Sources of Income Table
 - 4. Major contributors
 - 5. In-kind contributions
 - Explanation of items in financial attachments, if applicable
- Other Attachments
 - 6. Board of directors list
 - 7. Proof of IRS federal tax-exempt status, dated within the last five years
 - 8. Anti-discrimination statement adopted by the board of directors
 - 9. Key staff
 - 10. Annual report, if available
 - 11. Evaluation results (optional): Provide the organization's most recent evaluation results, relevant to this request.

SUMMARY SHEET FORM

Cline Family Foundations Grant Application For:

- TL Cline Fdn. MT. Cline Fdn. TW & MS Cline Fdn. Sharon Cline Magraw Fdn.

Legal Name of Organization:

DBA (if applicable):

Mailing Address (and Physical Address if it is different and not confidential):

Phone:

Fax:

EIN:

Website:

Organization Email Address:

Name of CEO or Executive Director:

Phone:

Email:

Application Contact & Title (if *not* the CEO or Executive Director):

Phone:

Email:

Organization Information

Year Founded:

Mission Statement:

Geographic Area Served (specific to this proposal):

Tax Exemption Status:

- 501(c)(3)
- Using a fiscal agent/fiscal sponsor

Name of fiscal agent/sponsor:

- Other than 501(c)(3), describe:

Number of Employees: Full-time:

Part-time:

Grant Request Information

Type of Grant Requested (select one):

Amount of Request: \$

- General Operating Support

- Program or Project Support
Name of Program or Project:

- Capital Request (Check with the grantmaker as to whether they prefer the CGA-Capital)

- Other

Describe what the grant will be used for:

Financial Information Budget numbers should match the numbers presented in Attachments 1(a) & (b).

Organization's Current Budget for Fiscal Year Ending:

Income:

Expenses:

AND, if other than a general operating request,

Program or Project Budget:

Dates: from: to:

Income:

Expenses:

By signing below, I certify that the information contained in this application is true and correct to the best of my knowledge.

CEO/Executive Director

Date

NARRATIVE – Limited to 5 pages

- 1. ORGANIZATION BACKGROUND.** Discuss the founding and development of the organization. Explain the original issue and/or opportunity the organization was founded to address and how that may have changed over time.
- 2. GOALS.** Describe the organization’s current goals.
- 3. CURRENT PROGRAMS.** Provide a brief description of the organization’s current programs. Include population and numbers served, as well as expected results. *If this request is for a specific program, describe the organization’s **other** programs here. Describe the program for which you are seeking funding in Question 4.*
- 4. PROGRAM OR PROJECT REQUESTS ONLY.**
 - a) Provide a summary of the plan for the program or project request. Include the issue and/or opportunity addressed, goals and objectives, activities, and timeline.
 - b) Explain why the organization is approaching the issue and/or opportunity in this way.
- 5. EVALUATION.** *Respond to (a) AND (b), then respond to (c) OR (d) as relates to your specific request.*
 - a) Describe the organization’s overall approach to evaluation.
 - b) Describe how the organization measures impact. If this is a program request, describe how impact is measured for the program that is the subject of this proposal.
Respond to (c) OR (d). This information captures results from the past:
 - c) For general operating or capital requests: Summarize key evaluation results or findings that demonstrate the organization’s impact. Indicate the time frame for the results or findings.
 - d) For program or project requests: Summarize key evaluation results or findings that demonstrate the program or project impact. Indicate the time frame for the results or findings.
- 6. COLLABORATION.** Describe the organization’s most significant interactions with other organizations and efforts. For program and project requests, address this question with respect to that program or project only.
- 7. INCLUSIVENESS.** Describe how the organization strives to be inclusive in its programs, staff, board, and volunteers, and describe the progress to date.
- 8. BOARD/GOVERNANCE.** Describe the role of the board of directors in advancing the mission of the organization. Include the key issues related to board effectiveness that are being addressed this year, the organization’s policy regarding board terms, and the percentage of the board that contributes financially to the organization.
- 9. VOLUNTEERS.** Describe how the organization involves volunteers and unpaid personnel (other than the board of directors) within a typical 12-month time period. Include number of volunteers and hours (if tracked by the organization).

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- 10. PLANNING.** Describe the challenges and opportunities facing the organization in the next three to five years. Additionally, describe how the organization engages in planning and describe the focus of any current planning efforts.
- 11. OPTIONAL.** If there is additional information that is vital to convey in this proposal, do so here.

ATTACHMENTS

Label each attachment and provide in the order listed.

Financial Attachments

Note: Provide explanations for items that may raise questions in any of the attached financial documents. The explanations can be written onto the documents themselves or included as an additional page.

1. **BUDGETS.** Include revenues and expenses.
 - a) The organization’s operating budget for the current fiscal year. If available, also include the budget for the upcoming fiscal year.
 - b) Program or project budget for the program period.

2. **CURRENT (YEAR-TO-DATE) FINANCIAL STATEMENTS.** Include a Statement of Financial Position (Balance Sheet) and Statement of Activities (Income and Expense Statement) through the most recently completed operating month available (must be within the past three months). Provide the Statement of Activities in a budget-to-actual format if the organization uses that format.

3. **YEAR-END FINANCIAL STATEMENTS, AUDIT, AND SOURCES OF INCOME.** Include the most recent fiscal year-end financial statements, audited if available. If the organization has an audit, but it is not available for the most recent fiscal year-end, also include the most recent audit.

Sources of Income Table Complete the table below for the organization as a whole, based on the most recently completed fiscal year. Categories may be modified to fit your organization’s funding sources.

Percentage	Funding Source
%	Government grants (federal, state, county, local)
%	Government contracts
%	Foundations
%	Business
%	Events (include event sponsorships)
%	Individual contributions
%	Fees/earned income
%	Workplace giving campaigns
%	In-kind contributions (optional)
%	Other
%	TOTAL (must equal 100%.)

4. **MAJOR CONTRIBUTORS.** For the previous two fiscal years, list major contributors (foundations, businesses, government, individuals) with amounts. Do not include names of individual donors.
5. **IN-KIND CONTRIBUTIONS.** Summary of significant in-kind donations (donated goods and professional services) received by the organization for the last fiscal year.

Other Attachments

6. **BOARD OF DIRECTORS LIST.** Include the following information for each board member:
 - Position(s) on the board (officer and committee positions)
 - Occupation and name of employer and/or affiliation(s)
 - City or county of residence
7. **PROOF OF IRS FEDERAL TAX-EXEMPT STATUS,** also called a Letter of Determination. This letter must be dated within the last five years.
8. **ANTI-DISCRIMINATION STATEMENT** adopted by the board of directors.
9. **LIST OF NAMES AND QUALIFICATIONS OF KEY STAFF,** including length of service with the organization. *Do not* include job descriptions or resumes.
10. **ANNUAL REPORT,** if available.
11. **EVALUATION RESULTS (optional):** Provide the organization's most recent evaluation results or findings, relevant to this request.