

OTTO BREMER FOUNDATION

Grant Application

The Otto Bremer Foundation grant application consists of three parts: cover sheet, narrative and attachments. Please mail or email your organization's completed application (only *one* copy is necessary) to:

Otto Bremer Foundation
445 Minnesota Street, Suite 2250
St. Paul, MN 55101-2107
apply@ottobremer.org

A. Cover Sheet

Please complete and submit a proposal cover sheet as part of your grant application.

B. Narrative

This portion of the grant application will help us understand how the work you propose will strengthen your community.

Please give us your thoughts about each of the following:

- **Community.** Describe your community's needs and opportunities as they relate to your proposal.
- **Proposed work.** Describe the specific work and activities you propose and how they will move your community forward in ways that complement the Foundation's vision of healthy, vibrant communities as places where basic needs are met, mutual regard is prized and opportunities for economic, civic and social participation are within everyone's reach.
- **Impact.** How will you define and evaluate the success of your work? How will you share your results and lessons with the community and others?
- **Your organization and resources.** Describe your organization in terms of its mission, goals, staffing and stakeholders. What experience, learning, connections or other non-financial resources does your organization bring to the work you propose? What non-financial resources do you need to access or develop for your proposed work to be successful?
- **Partners and networks.** Describe the others you propose to work with to accomplish your goals. What is your organization's history with these partners, and how will they contribute to your work?
- **Looking ahead.** How do you anticipate your community will change in the coming years? How will your work and organization evolve to fit those changes?
- **Anything else.** Is there anything else we should know in order to understand your proposal and its potential impact for your community?

C. Attachments

Please include all of the following attachments with your cover sheet and narrative.

Supporting Materials

- Proof of Tax-Exempt Status.** Please provide the organization's IRS determination letter regarding tax-exempt status as defined under Section 501(c)(3) of the Internal Revenue Code or certification of entity status if a public agency. If the applicant is a religious organization that is not required to have an IRS Sec. 501(c)(3) determination letter, please provide documentation of that status.
- Board List.** List of current board members with names and affiliations.

Financial Information

- Organization's Budgets and Actual Fiscal Performance.** Please submit two sets of numbers. The first should compare your organization's budgeted and actual income and expenses for your last complete fiscal year. The second should show your organization's current fiscal year budget, with year-to-date actual income and expense information.
- Project Budget.** Project budget covering proposed activities (not applicable if requesting general operating support).
- Audit, 990.** Most recent audited financial statement (if your organization was audited) and a copy of most recent IRS Form 990 (if the organization files Forms 990).
- Balance Sheet.** Up-to-date balance sheet showing assets and liabilities.
- Other Sources of Funding.** List of other sources of funding for proposed activities, noting whether approved, pending or declined.

If Applying for a Program-Related Investment

- Pro Forma.** In addition to the above information, we request a pro forma showing the organization's projected revenues and repayment plan.

Date of application: _____ This is an application for a: Grant Program-Related Investment

Contact Information

Legal name of applicant (as it appears on the current 501(c)(3) decision letter)

President/Executive Director Telephone Email

Organization Address

City State Zip Code

Telephone Fax Website

Name/title of contact person regarding proposed work Telephone Email

This organization is: 501(c)(3) nonprofit Public agency/unit of government Religious institution

Sponsored Organization (if applicable)

If the organization above will be acting as a fiscal sponsor, please provide the name of the organization/program that the fiscal sponsor plans to use to accomplish the proposed work.

Contact person

Address

City State Zip Code

Telephone Fax Website

Summary of Proposed Project (brief, one-sentence purpose description)

AAA

Financial Information

Amount requested: \$ _____

Total program cost, including requested amount: \$ _____

Current year total annual organization budget of the applicant: \$ _____

Duration of proposed grant period (start/end dates): _____

Fiscal year start and end: _____

Signature

By signing, I am indicating that I've reviewed this proposal and that all of its contents are true.

Name of board chair or authorized representative Signature