

Please return to:



**Variety – the Children’s Charity**  
505 5th Avenue, Suite 310  
Des Moines, IA 50309  
Phone: (515) 243-4660  
[stateoffice@varietyiowa.com](mailto:stateoffice@varietyiowa.com)  
Varietyiowa.com

<b>Variety Office Use Only: 2020</b>	
Date Received: _____	Board of Dir: _____
SubCommittee: _____	W9 Form: _____
501(c)(3): _____	Date of 990: _____
Area: _____	Date of Audit: _____
Grant Report Included: _____	

## 2020 GENERAL FUNDING GRANT APPLICATION

Please read the guidelines carefully as the application requirements have changed from last year.

### SECTION I

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Name of Organization: (DBA) \_\_\_\_\_

Organization’s Legal Name (if different than above): \_\_\_\_\_

Executive Director/CEO/President: \_\_\_\_\_

Contact Name for this application: \_\_\_\_\_ Title: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

E-mail: \_\_\_\_\_ Website: \_\_\_\_\_

Federal Tax I.D. Number: \_\_\_\_\_ Year Founded: \_\_\_\_\_

Grant amount requested from Variety (in whole dollars): \$ \_\_\_\_\_

Total budget of the project or program that your grant request is for: \$ \_\_\_\_\_

Grant would fund (in 20 words or less): \_\_\_\_\_

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How many children does your organization serve?

Daily Basis: \_\_\_\_\_ **OR** Annual Basis: \_\_\_\_\_

Please estimate the ethnic breakdown of the children your organization serves by percent.

\_\_\_\_\_ Asian \_\_\_\_\_ Pacific Islander \_\_\_\_\_ Hispanic/Latino \_\_\_\_\_ Caucasian  
\_\_\_\_\_ African American \_\_\_\_\_ American Indian/Alaska Native \_\_\_\_\_ Other

What percentage are Female? \_\_\_\_\_ Male? \_\_\_\_\_

How many children will this specific grant impact? Daily Basis: \_\_\_\_\_ **OR** Annual Basis: \_\_\_\_\_

What is the age range of the children this grant will serve? \_\_\_\_\_

What special needs or physical challenges do the children this grant will serve have? \_\_\_\_\_

How will this grant specifically impact your program and the children you provide services to? \_\_\_\_\_

\_\_\_\_\_

If applicable, what year did you last receive a grant from Variety? \_\_\_\_\_

What was the grant used for in that year? \_\_\_\_\_

\_\_\_\_\_

Amount Requested: \_\_\_\_\_ Amount Granted: \_\_\_\_\_

Below, please show us how your organization is supported annually.

Please indicate the source for this information:

(i.e. audit, 990, budget or other with explanation) \_\_\_\_\_

And the time period covered:

Calendar year \_\_\_\_\_ or fiscal year beginning \_\_\_\_\_ and ending \_\_\_\_\_

**INCOME**

Percentage:

City Grants \$ \_\_\_\_\_ \_\_\_\_\_

County Grants \$ \_\_\_\_\_ \_\_\_\_\_

State Grants \$ \_\_\_\_\_ \_\_\_\_\_

Federal Grants \$ \_\_\_\_\_ \_\_\_\_\_

United Way \$ \_\_\_\_\_ \_\_\_\_\_

Title 19 or 20 \$ \_\_\_\_\_ \_\_\_\_\_

Fees/Private Pay \$ \_\_\_\_\_ \_\_\_\_\_

Corporate Gifts \$ \_\_\_\_\_ \_\_\_\_\_

Individual Gifts \$ \_\_\_\_\_ \_\_\_\_\_

Foundation Gifts \$ \_\_\_\_\_ \_\_\_\_\_

Other (Explain) \_\_\_\_\_ \$ \_\_\_\_\_ \_\_\_\_\_

**Total Income** \$ \_\_\_\_\_ 100 %

**EXPENSE**

Please show the expenses your organization incurs annually:

Administrative	\$ _____	_____
Fundraising	\$ _____	_____
Programs	\$ _____	_____
Dues to National/Int'l Affiliation	\$ _____	_____
Other (Explain) _____	\$ _____	_____
<b>Total Expense</b>	\$ _____	_____ 100 %

Does your organization have an endowment? \_\_\_\_\_

If so, what is the current balance? \_\_\_\_\_

What is the purpose for the endowment? \_\_\_\_\_

Does your organization have reserve dollars set aside? \_\_\_\_\_

If so, what is the current balance? \_\_\_\_\_

What is the purpose for these reserve dollars? \_\_\_\_\_

If awarded a Variety grant, how will your organization recognize this award? \_\_\_\_\_

What will you do if you're unable to receive the requested funding? \_\_\_\_\_

**The information provided in this application is true to the best of my knowledge.**

Signature \_\_\_\_\_ Date \_\_\_\_\_

Title \_\_\_\_\_

## ATTACHMENTS

Attachments A, B, C and D should be collated together with each copy of the Grant Application (for a total of **3** collated hard copies). Do not include brochures, DVDs, CDs, or additional marketing materials unless they are 8 ½ x 11. If this is your first request, include a hard copy of Attachments E, F, G and H.

All submitted materials should be 3-hole punched and should fit easily into a 3-ring binder. Do not put your submitted materials in folders, binders, plastic covers, etc. Keep documents in order and do not use staples. Paperclips and rubber bands are acceptable. Documents may be two-sided. There is no need to put cover sheets in front of various attachments – save paper!

**ADDITIONALLY**, you are required to email a completed Application, Attachment A, B, C, D, E, F, G, H and a digital photo of the children you serve that may be published to [stateoffice@varietyiowa.com](mailto:stateoffice@varietyiowa.com) by the due date/time. If you are unable to submit a photo due to privacy reasons, please specify in the email.

**Proposal Checklist** (all items must be included for consideration) Email items to [stateoffice@varietyiowa.com](mailto:stateoffice@varietyiowa.com)

\_\_\_\_\_ COMPLETED GRANT APPLICATION FORM (**3 hard copies plus email**).

\_\_\_\_\_ ATTACHMENT A: OVERVIEW (**3 hard copies plus email**).

Please attach an overview of your organization and the services you provide.

\_\_\_\_\_ ATTACHMENT B: PROJECT DESCRIPTION (**3 hard copies plus email**).

Please attach a summary that addresses the following categories: project description, what the funds would purchase, needs statement, who will benefit, total project budget, and project timeline.

\_\_\_\_\_ ATTACHMENT C: BOARD OF DIRECTORS/GOVERNING BODY (**3 hard copies plus email**).

\_\_\_\_\_ ATTACHMENT D: COMPLETED GRANT REPORTING FORM (**3 hard copies**).

If applicable, please include a copy of your completed Grant Reporting Form from 2019. If your grant was for a van, you do not need to include the Van Status Report.

\_\_\_\_\_ ATTACHMENT E: 501(c)(3) DESIGNATION letter from the IRS (**email only if you've applied before**). If you are unsure if you are a 501(c)(3) contact the office at 515-243-4660.

\_\_\_\_\_ ATTACHMENT F: Submit a signed and current W9 FORM (**email only if you've applied before**).

\_\_\_\_\_ ATTACHMENT G: Most recent AUDIT (**email only if you've applied before**). If you do not have an AUDIT performed, please attach your most recent internal financials for the last 2 FULL years (balance sheet and statement of activities).

\_\_\_\_\_ ATTACHMENT H: Most recent 990 (**email only if you've applied before**).

\_\_\_\_\_ Digital photo of the children you serve that we may publicize (**email only if you've applied before**).

**Hard copies and emailed copies of the complete application must be RECEIVED (not postmarked) by the Variety office no later than NOON on Friday, May 22, 2020.**

Please refer to the "General Grant Funding Guidelines" for additional information.