

**CITY OF CARROLLTON
COMMUNITY FUNDING ASSISTANCE
APPLICATION FISCAL YEAR 2020-2021**

Briefly describe the goals and objectives, or mission, of your organization. _____

II. Financial Information

Amount of funding requested: \$ _____ (Maximum allowable: the greater of \$10,000 or 10% of operating revenues)

Intended Use for Funds (provide details) _____

Describe the impact on services if only partial funding level is available _____

	Fiscal Year 2020 (Budgeted)	Fiscal Year 2021 (Projected)
Total Operating Revenues:	\$ _____	\$ _____
Total Operating Expenses:	\$ _____	\$ _____
Total Operating Fund	\$ _____	\$ _____

What percentage of the organization's annual revenues does this funding request represent? ___%

Is/has the organization receiving/received any support in the form of in-kind services (i.e. event support) from the City of Carrollton? Yes ___ No ___ If yes, provide detail: _____

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III. Scope of Service/Community Involvement

How many Carrollton residents did you directly provide services to in the past year? _____

What services does your organization provide to Carrollton residents? _____

Explain how the grant funding will specifically benefit Carrollton residents. _____

IF ADDITIONAL SPACE IS NEEDED, PLEASE PROVIDE ANSWERS ON A SEPARATE PAGE

IV. Insurance Information

Will your agency be able to provide proof of the required insurance as noted in Article 4 of the funding contract? Yes _____ No _____

V. Signature/Certification:

- Recipient is subject to all Community Service Funding Program requirements including submittal deadlines and payment disbursement requirements.
- Every Community Service Funding application is considered individually and on its own merit.
- Awards will be given to organizations and activities that directly benefit the residents of Carrollton.
- Funding is not immediately available to the recipient; and requires completion of a contract upon approval. Please allow time for checks to be processed.
- The awarding of Community Service Funding does not constitute an automatic annual allocation.
- The recognition for Community Service Funding should accrue to the City of Carrollton.

I hereby certify the information contained in this application is true to the best of my knowledge and belief.

Name and Title (Please print)

Date

Signature

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GUIDELINES FOR SUBMITTING FUNDING ASSISTANCE REQUEST

Please complete the application form and attach the following information:

- Literature about the organization
- Annual budget and operating report (summary of funding sources, services and activities)
- Audit report or financial statements containing statement of assets, liabilities and fund balances
- A copy of all state and/or federal tax exemptions
- A copy of the first page of the most recent IRS Form 990. IRS Form 990 is a public record.
- Print out of Status Verification from Internal Revenue Service's website <http://apps.irs.gov/app/eos/>
- List of board of directors, officers and staff
- List of top five funding sources

One (1) copy of the completed application form and all attachments are requested. Please submit double-sided copies when possible.

Application packets must be submitted by May 31, 2020.

City of Carrollton
Budget & Management Analysis
Attn: Melissa Everett
P.O. Box 110535
Carrollton, Texas 75011-0535

For questions, please contact:

Budget & Management Analysis
(972) 466-3526 phone
(972) 466-3535 fax

ManagementAnalysis@cityofcarrollton.com

Thank you for your interest and cooperation.