

Please return to:



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

<b>Variety Office Use Only: 2024</b>		
Date Received: _____	501(c)(3): _____	_____
Attachment A: _____	W9 Form: _____	_____
Attachment B: _____	990: _____	_____
Attachment C: _____	Audit: _____	_____
Attachment D: _____	Photo: _____	_____
Emailed Copy: _____		
Subcommittee: _____	Area: _____	_____

## 2024 GENERAL FUNDING GRANT APP

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

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

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

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

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

Phone Number: \_\_\_\_\_ E-mail: \_\_\_\_\_

Website: \_\_\_\_\_ EIN (Tax #): \_\_\_\_\_ 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): \_\_\_\_\_

How many children does your organization serve on an annual basis? \_\_\_\_\_

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

\_\_\_\_\_ Asian \_\_\_\_\_ Hispanic \_\_\_\_\_ Caucasian \_\_\_\_\_ African American \_\_\_\_\_ Other

Estimate what percentage are Female: \_\_\_\_\_ Male: \_\_\_\_\_

How many children will this specific grant impact on an annual basis? \_\_\_\_\_

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

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

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

**Below, please show us how your organization is supported annually. Variety is requesting local financial information, not national or international financials.**

**Please indicate the source for this information:** \_\_\_\_\_  
(i.e., audit, 990, budget or other with explanation)

**Time period covered:** Calendar year \_\_\_\_\_ or fiscal year beginning \_\_\_\_\_ and ending \_\_\_\_\_

**INCOME (list dollar amount and percentage)**

City/County Grants	\$ _____	_____ %
State Grants	\$ _____	_____ %
Federal Grants	\$ _____	_____ %
United Way	\$ _____	_____ %
Title 19 or 20	\$ _____	_____ %
Fees/Private Pay	\$ _____	_____ %
Corporate Gifts	\$ _____	_____ %
Individual Gifts	\$ _____	_____ %
Foundation Gifts	\$ _____	_____ %
Other (Explain) _____	\$ _____	_____ %
<b>Total Income</b>	\$ _____	<b>100 %</b>

**DONORS**

Please list your top three donors and/or grants with amounts

Donor: \_\_\_\_\_ \$ \_\_\_\_\_

Donor: \_\_\_\_\_ \$ \_\_\_\_\_

Donor: \_\_\_\_\_ \$ \_\_\_\_\_

**EXPENSE**

Please show the expenses your organization incurs annually:

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

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? \_\_\_\_\_

Do you foresee any challenges for the upcoming year? If so, what is your plan to address the challenge(s)?

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 **two** collated hard copies). Do not include brochures, DVDs, CDs, flash drives or other materials unless they are 8½ x 11.

All submitted materials should be three-hole punched and should fit easily into a three-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. Please do not use cover sheets in front of various attachments.

Emailed files should be labeled as listed below. Submit each PDF as an individual attachment. (Do not scan all attachments as one document.)

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

Email	Hard Copy	
<u>1</u>	<u>2</u>	COMPLETED GRANT APPLICATION FORM
<u>1</u>	<u>2</u>	ATTACHMENT A: OVERVIEW Provide an overview of your organization and the services you provide.
<u>1</u>	<u>2</u>	ATTACHMENT B: PROJECT DESCRIPTION Provide 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.
<u>1</u>	<u>2</u>	ATTACHMENT C: BOARD OF DIRECTORS/GOVERNING BODY
<u>1</u>	<u>2</u>	ATTACHMENT D: COMPLETED GRANT REPORTING FORM If applicable, please include a copy of your completed Grant Reporting Form from 2023. If your grant was for a van, you do not need to include the Van Status Report.
<u>1</u>	<u>N/A</u>	ATTACHMENT E: 501(c)(3) DESIGNATION LETTER FROM THE IRS If you are unsure if you are a 501(c)(3) contact the office at 515-243-4660.
<u>1</u>	<u>N/A</u>	ATTACHMENT F: SIGNED AND CURRENT W9 FORM
<u>1</u>	<u>N/A</u>	ATTACHMENT G: MOST RECENT AUDIT If you do not have an AUDIT performed, please attach your most recent internal financials for the last two FULL years (balance sheet and statement of activities).
<u>1</u>	<u>N/A</u>	ATTACHMENT H: MOST RECENT 990
<u>1</u>	<u>N/A</u>	Digital photo of the children you serve that we may publicize

**Hard copies and emailed copy of the complete application must be RECEIVED (not postmarked) by the Variety office no later than NOON on Friday, May 24, 2024. For emailed copy, please label attachments as listed above.**

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