

**2019 IMPACT 100 Letter of Intent and Grant - Grant Example | Example, Grant Program Name :The Little School House**

**Applicant View**

**Letter of Intent**

IMPACT 100 Letter of Intent to Apply	
For details on the IMPACT 100 grant process, including eligibility requirements, FAQ, and important dates, visit <a href="http://impact100pensacola.org/grant-info/grant-process">http://impact100pensacola.org/grant-info/grant-process</a>	
In preparing to submit your LOI, please have available your Department of Treasury letter affirming your organization's status as a tax-exempt public charity under IRS Code Section 501(c)(3). Additionally, your organization should have filed the latest Annual Report with the Florida Department of State, Division of Corporations, and registered with the Florida Department of Agriculture and Consumer Services. At any time, should you need to exit this application, you may save your data and return to complete.	
*Is your Organization a local chapter of a larger Organization that holds your 501(c)(3)?	Yes
<b>Parent Organization Information</b>	
*Parent Organization's Legal Name:	ABC Services, Inc.
Parent Organization's Doing Business As (DBA) Name (if applicable):	
*Parent Organization Federal Employer Identification Number (EIN):	12-3456789
Group Federal Employer Identification Number (EIN) if Parent organization EIN is different from Group EIN:	
*Parent Mailing Address:	2270 Elementary Drive
*Parent City:	Cleveland
*Parent State:	OH
*Parent Zip Code:	44101
Parent Organization's Phone Number:	216-222-2222
Parent Organization Website (if available):	www.abcs.com
Please confirm the following for your organization:(Note: Underlined links to verification websites are provided below the question and allow you to check your status while still in the form.)	
1. Current status as a 501(c)(3) public charity (PC or Group) as listed on Internal Revenue Service website:(Verify status at <a href="#">IRS Exempt Organization Check</a> )	Current (PC)
*Please attach a copy of the Department of Treasury Letter affirming your organization's not-for-profit status under Internal Revenue Code Section 501(c)(3).	Sample Treasury Letter-ABC.pdf
Visit <a href="https://www.irs.gov/charities-non-profits/eo-operational-requirements-obtaining-copies-of-exemption-determination-letter-from-irs">https://www.irs.gov/charities-non-profits/eo-operational-requirements-obtaining-copies-of-exemption-determination-letter-from-irs</a> for information on requesting a copy of your letter, if needed.	
2. Annual Report for 2019 has been filed and is reflected on the Florida Sunbiz website.The State of Florida requires nonprofits based in Florida and outside of Florida to register annually if doing business in Florida.	Completed
(Confirm submission by clicking link: <a href="#">Florida Sunbiz Organization Check</a> . To register as a nonprofit in Florida, visit <a href="#">Florida Sunbiz Registration</a> . If annual report needs to be filed go to <a href="#">Florida Annual Report Filing</a> ).	
*3. Annual registration with the Florida Department of Agriculture and Consumer Services is complete. To confirm registration, select <a href="#">FDACS Organization Check</a> . To register, visit <a href="#">FDACS Annual Registration</a> .	Completed
FDACS Charity Number:(This is your Registration Number that begins with "CH".)	CH12345
*FDACS Expiration Date:	12/31/2019
<b>Executive Director and Chairman of the Board Contact Information</b>	
*Executive Director (ED)/President:	Betty Bet
*ED Email:	bettybetsemail@gmail.com
*ED Phone:	216-123-4567
ED Cell Phone (if different than phone # provided above):	
*Chairman of Board (Chair):	Mary Mar
*Chair Email:	mar@gmail.com
*Chair Phone:	216-987-6543

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Chair Cell Phone (if different than phone # provided above):	
<b>Local Organization Information</b>	
*Local Organization's Legal Name:	Little Alpha, Inc.
Local Organization's Doing Business As (DBA) Name (if applicable):	
Local Organization Federal Employer Identification Number (EIN):	98-7654321
Group Federal Employer Identification Number (EIN) if Local organization EIN is different from Group EIN:	
*Local Mailing Address:	123 Elm Street
*Local City:	Pensacola
*Local State:	FL
*Local Zip Code:	32501
Local Organization's Phone Number:	850-123-4567
Local Organization Website (if available):	www.littlealpha.com
Please confirm the following for your Local organization:(Note: Underlined links to verification websites are provided below the question and allow you to check your status while still in the form.)	
1. Annual Report for 2019 has been filed and is reflected on the Florida Sunbiz website. The State of Florida requires nonprofits based in Florida and outside of Florida to register annually if doing business in Florida.	Completed by Local
2. Local Annual registration with the Florida Department of Agriculture and Consumer Services is complete. To confirm registration, select FDACS Organization Check. To register, visit FDACS Annual Registration.	Completed by Local
FDACS Local Charity Number:(This is your Registration Number that begins with "CH".)	CH98765
*FDACS Local Expiration Date:	12/31/2019
<b>Executive Director and Chairman of the Board Contact Information</b>	
*Local Executive Director (ED)/President/CEO:	Wally Waters
*Local ED Email:	ww@gmail.com
*Local ED Phone:	850-123-4567
Local ED Cell Phone (if different than phone # provided above):	
*Local Chairman of Board (Chair):	Wally Waters
*Local Chair Email:	ww@gmail.com
*Local Chair Phone:	850-123-4567
Local Chair Cell Phone (if different than phone # provided above):	
This year's site visits will be scheduled beginning on 7/15/19 and our goal is to be completed by 8/2/19. Site visits will take place on business days between the hours of 9:00 am and 5:00 pm.	
By entering my name on the signature line below, I certify that all the information provided is accurate and verifiable.	
*Signature:	Betty Bet
*Title:	Executive Director
*Date	4/14/2019

### Summary Sheet

<b>Project Focus Area</b>	
Each grant applicant must select only one focus area under which it wishes to be considered. IMPACT 100 does not provide guidance as to which focus area is appropriate. Arts & Culture Initiatives that cultivate, develop, and enhance the cultural and artistic climate of the Pensacola Bay area. Education Initiatives that further the educational process or improve access to education for children and/or adults in the Pensacola Bay area. Environment, Recreation & Preservation Initiatives that will restore, preserve, revitalize or enhance the facilities, surroundings, and/or recreational opportunities of the Pensacola Bay Area. Family Initiatives that strengthen and enhance the lives of children and families living in the Pensacola Bay area. Health & Wellness Initiatives that improve the mental and/or physical well-being of people living in the Pensacola Bay area.	
*Project Focus Area:	Education
*Project Title:	The Little School House
*Is your organization a local chapter of a larger organization that holds your 501(c)(3)?	Yes

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Site Visit Information:	
This year's site visits will be scheduled beginning on 7/15/19 and our goal is to be completed by 8/2/19. Site visits will take place on business days between the hours of 9:00 am and 5:00 pm.	
Please check the days of the week that are most convenient for your organization.	Tuesday
We appreciate you making this information available and will try to meet your requests, however we can't make any guarantees.	
*Site Visit Street Address:	123 Elm Street, Pensacola, FL 32501
*Who is the Primary Contact (PC) for the site visit?	Wally Waters
*PC Email:	ww@gmail.com
*PC Preferred Phone:	850-123-4567
Certification and Signatures	
Our organization and its Board of Directors authorize submission of this funding proposal. Our tax exempt status under Internal Revenue Code Section 501(c)(3) has not been revoked or modified. We understand that if selected to receive funding, we must furnish a report showing how funds were spent and that the funds were spent solely for the purpose for which the grant is sought. We certify that to the best of our knowledge, the statements contained in this application are true, correct and complete.	
NOTE: If Executive Director/President and Chair of the Board are the same person, please have another member of the board also certify and electronically sign (printed name) from each organization.	
*Executive Director/President Name	Betty Bets
*Chairman of the Board Name	Mary Mar
Date	5/03/2019

### Organization Information Parent and Child

Parent Organization's Information	
*Parent Organization Legal Name	ABC Services, Inc.
Parent Organization Doing Business As (DBA) Name (if applicable):	
*Parent Organization Federal Employer Identification Number (EIN):	12-3456789
Parent Organization Website (if available):	www.abc.com
*Parent Organization Street:	123 Elm Street
*Parent Organization City:	Pensacola
*Parent Organization State:	FL
*Parent Organization Zip Code:	32501
*Parent Organization Year Founded:	2015
*Number of Full Time Employees in Parent Organization (if none enter 0):	10
*Number of Part Time Employees in Parent Organization (if none enter 0):	2
*Approximate Number of Volunteers in Parent Organization (if none enter 0):	25
*Brief Summary of Parent Organization's History (1,000 words or less):	
ABC Services was established in 2015. Our goal is to provide additional education or tutoring to local middle school students and to help prepare them for high school and then college.	
*Parent Organization's Mission Statement (150 words or less):	
Our mission is to help the teachers, parents, and students by preparing the students for academic success to face the challenges of the future.	
*Geographic Area Served by Parent Organization (1,000 words or less):	
We are currently working with Northside Middle School which is located in Northern Escambia County.	
*Parent Organization's Current Program and Projects (2,000 words or less):	

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Currently, we provide academic instruction, various sport opportunities and numerous clubs for students to participate. We are ready to move ahead with a separate building on a large lot to provide this service to more than one middle school in the Northern Escambia County area.	
*Total number of board members for your parent organization:	5
*How many of your board members have contributed financially or in-kind to your parent organization in the last 12 months?	5
*Litigation against the parent organization:	None
*Parent Organization Executive Director/President/CEO:	Betty Bets
*Email:	bettybetsemail@gmail.com
*Phone:	850-123-4567
Executive Director's Cell Phone (if different than phone # provided above):	
*Chairman of Board for the Parent Organization:	Mary Mar
*Chair Email:	mar@gmail.com
*Chair Phone:	850-987-6543
Board Chair cell phone (if different than phone # provided above):	
*Who is the primary contact for your organization and this grant?	Wally Waters
*What is the preferred phone number for the primary point of contact?	850-390-1439
<b>Parent Organization Board of Directors</b>	
*Parent Organization Board Member 1 Full Name:	Mary Mar
*Profession:	Attorney
*County and State of Residence:	Escambia County, FL
*Position on Board:	Chairman of the Board/President
*Parent Organization Board Member 2 Full Name:	Jane Doe
*Profession:	Teacher
*County and State of Residence:	Escambia County, FL
*Position on Board:	Vlce President/President Elect
*Parent Organization Board Member 3 Full Name:	John Smith
*Profession:	CPA
*County and State of Residence:	Santa Rosa County, FL
*Position on Board:	Treasurer
*Parent Organization Board Member 4 Full Name:	Ann Brown
*Profession:	Retired Professor
*County and State of Residence:	Escambia County, FL
*Position on Board:	Secretary
*Parent Organization Board Member 5 Full Name:	Pat Adams
*Profession:	Coach at both schools and recreational sports
*County and State of Residence:	Escambia County, FL
*Position on Board:	Board Member
<b>Local Organization's Mailing Address</b>	
*Local Organization Legal Name	Little Alpha, Inc.
Local Organization Doing Business As (DBA) Name (if applicable):	
*Local Organization Federal Employer Identification Number (EIN):	98-7654321
Local Organization Website (if available):	www.littlealpha.com
*Local Organization Street:	125 Elm Street
*Local Organization City:	Pensacola
*Local Organization State:	FL
*Local Organization Zip Code:	32501
*Local Organization Year Founded:	2016
*Number of Full Time Employees in Local Organization (if none enter 0):	3
*Number of Part Time Employees in Local Organization (if none enter 0):	2

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*Approximate Number of Volunteers in Local Organization (if none enter 0):	10
*Brief Summary of Local Organization's History (1,000 words or less):	
Founded to implement ABC Service's projects.	
*Local Organization's Mission Statement (150 words or less):	
To be the little sprout of the big company	
*Geographic Area Served by Local Organization (1,000 words or less):	
Geographic Area Served by Local Organization (1,000 words or less):	
*Local Organization's Current Program and Projects (2,000 words or less):	
Local Organization's Current Program and Projects (2,000 words or less):	
*Total number of board members for your local organization:	1
*How many of your board members have contributed financially or in-kind to your local organization in the last 12 months?	1
*Litigation against the local organization:	None
*Local Organization Executive Director/President/CEO:	Wally Waters
*Email:	ww@gmail.com
*Phone:	850-123-4567
Executive Director's Cell Phone (if different than phone # provided above):	
*Chairman of Board for the Local Organization:	Wally Waters
*Chair Email:	ww@gmail.com
*Chair Phone:	850-123-4567
Board Chair cell phone (if different than phone # provided above):	
Who is the primary contact for your local organization and this grant if different than previously noted?	
What is the preferred phone number for the primary point of contact if different than previously noted?	
Local Organization Board of Directors	
*Local Organization Board Member 1 Full Name:	Wally Waters - Advisory Board
*Profession:	Professor, Retired
*County and State of Residence:	Escambia County, FL
*Position on Board:	President of Advisory Board

### Project Narrative

Project Information	
*Project Title:	The Little School House
*Project Start Date (no earlier than October 14, 2019):	10/14/2019
*Project End Date (no later than Oct 1, 2021):	6/30/2020
*Project Summary (150 words or less):	
The Little School House (LSH) will be a location that not only the children at Northside Middle School can attend after school for tutoring and coaching but also will provide the same options for the children attending William Middle School and S.A. Middle School by being located in a central location. The LSH will provide free after school and summer tutoring in academics as well as coaching for those children interested in sports.	
*Describe how your project fulfills the goals of your chosen focus area (150 words or less):	
The education focus area was the most natural choice and the best fit. This project will be directly effecting and working with middle school students to increase their desire to learn which will help them be more prepared and confident with high school and its requirements.	
Target Population	
*Describe the target population. Include demographics on population and geographic area to be served (250 words or less):	

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<p>Northside Middle School has 276 students of which 59 have been determined to be at risk in their reading performance for a variety of reasons including learning disabilities such as ADD or dyslexia, or other economic difficulties. William Middle School has a total of 325 students of which 76 are scored with below normal reading ability. S.A. Middle School, has a total of 197 students of which 47 are below average readers.</p>	
<p><b>*Describe the specific need for your project in the community (250 words or less):</b></p>	
<p>Education success is dependent on reading abilities. Studies have shown that poor readers, who are reading at a grade level or more behind are more likely to be disruptive in the classroom, truant from school not interested in becoming a team sport player and at risk of dropping out of high school.</p>	
<p><b>Goals</b></p>	
<p><b>*Describe what you hope to accomplish through the proposed project (250 words or less):</b></p>	
<p>The objective is that by building the LSH, ABC Services will be able to offer more students the needed assistance through tutoring to build their confidence in reading, understanding of other class subjects and importance of being involved with others through any sport. Having a space to include all 3 local schools, who will all feed into the same high school, will also allow the students to make friends and know more of the other students when they all merge together at Baker High School in 9th grade.</p>	
<p><b>*Describe how or why you selected this issue (200 words or less):</b></p>	
<p>Grades indicate that while our students scored above the 50th percentile nationally in mathematics in 2010 and 2011, they scored below the 50th percentile both in reading and language. We believe this is in part due to the fact that children have not been provided the opportunity for after school tutoring or coaching to help get them excited about learning and to also increase their confidence.</p>	
<p><b>*What is the expected impact on the target population and the overall community (250 words or less):</b></p>	
<p>Northside Middle School has been a "C" school since FCAT testing has been used. Williams Middle School a "D" school and S.A. Middle School a "B" school. The Florida School Recognition Program provides public recognition and financial awards to schools that have sustained high student performance or schools that demonstrate substantial improvement in student performance. Schools qualify for the award if they receive an "A" or improve more than one letter grade and sustain the improvement the following school year, or are redesignated as Alternative School and receive a school improvement rating of "Improving" or improve at least one level. We expect that all 3 schools will move up at least one letter grade after only two years of instituting the LSH.</p>	
<p><b>* Describe how this project fits into your organization's mission/vision(250 words or less):</b></p>	
<p>It directly ties to our mission to prepare students for academic success and to face the challenges of the future, particularly with regard to high school success. This project will ensure many more students achieve success in taking a role in society as productive citizens and help develop a personal commitment to learning by improving their reading skills.</p>	
<p><b>Management</b></p>	
<p><b>*Describe how you will accomplish your goals (250 words or less):</b></p>	
<p>Standardized reading tests will be conducted at the start of each school year for all those who register to attend the Little School House. This will happen again at the end of each semester to determine any increases in reading speed and comprehension.</p>	
<p><b>*Describe the specific activities and services that will be provided through this project (250 words or less):</b></p>	
<p>1. Providing a measurable increase in reading speed, comprehension, and reading attention span. The objective is that the students will double their reading speed and increase their reading skills by one to two grade levels by the end of the school year. 2. Enabling poor readers to access the general curriculum through the use of assistive reading technology to scan and read their textbooks and other classroom materials. 3. Providing learning disabled students with a multi-sensory reading alternative that will help them increase their reading speed to the point they can read on their own. 4. Helping learning and reading disabled students succeed in their regular classroom with their peers, so they can continue learning in a less restrictive environment.</p>	
<p><b>*Do you anticipate grant funds to be paid directly to your provider or will your organization be reimbursed for expenditures or will there be a combination of both (150 words or less)?</b></p>	
<p>We expect most of the funds to be paid directly to our providers, especially the land and building purchase. For smaller items like landscaping and signage, we will purchase and file for reimbursement.</p>	
<p><b>*Who will have the authorization to sign draw requests for your organization?</b></p>	<p>Betty Bets</p>
<p><b>*Who in your organization will be responsible for submitting quarterly reports? Final report?</b></p>	<p>Betty Bets</p>
<p><b>Does your project include construction?</b></p>	<p>Yes</p>

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*If your project includes construction, please select all that apply.	Erecting a fabricated structure
*Briefly describe your construction plans.(250 words or less)	
We will purchase the lot. Order the prefabricated building and then have the building erected and connected to be ready to go.	
Which construction related expenses are included in your project budget?	Permitting Building Land Acquisition Materials Labor Other Construction
*How many bids do you have for your construction project? Note: While 2 bids are recommended to ensure project budget is based on realistic costs, a minimum of 1 bid must be submitted.	1
*Check which Construction-related Supporting Documents will be provided. Note: If work is being done on a site that is not owned by the organization, evidence of a lease for at least 5 years is required.	Permits Builder's County and/or City License Builder's Certificate of Insurance
Briefly, describe all estimates you are attaching to this application. Construction related documents can be uploaded in the "Construction Info" section of your Dashboard, while other supporting documents can be uploaded in the "Project Supporting Documents" section (1,000 words or less).	
We are attaching copies of the cost estimates, a letter of commitment, permit application, and builders certificate of insurance and license. Also attached is the lot plan and the blue prints for the prefabricated school house.	
<b>Evaluation</b>	
*Describe how you will know when you have accomplished your goals (250 words or less).	
The first goal will be accomplished when we purchase the land and install the building. The 2nd goal will be accomplished when we have students from all 3 middle schools register for sessions, instead of just Northside Middle School. The 3rd goal will be accomplished when we have 3 semesters of reading ability tests that show consistent improvement over all 3 semesters.	
* Describe how you plan to measure impact and results (250 words or less):	
Results for building will be completion. Results for expanding will be registrations from all 3 schools. Results from student test scores will be the measurable impact for the actual goal of assisting these student through to being more confident and better prepared for the world to come.	
<b>Other Funding Sources</b>	
If you have applied for other grants for this project, please describe (200 words or less):	
We have a 10,000 foundation grant from XXXFoundation that we have already received.	
If your project cost exceeds the IMPACT grant amount, please describe the other funding sources your organization has available to complete this project (200 words or less):	
We have a 10,000 foundation donation that has already been deposited in our savings account and is for this project only.	
<b>Timeline</b>	
* Describe the anticipated timeline for execution of the project, and supporting fund distribution for each stage (300 words or less):	
The land purchase will be initiated as soon as grant has been acknowledged. Hopefully to close by 11/15/2019. Then as soon as that is closed, we will order the prefab school house and begin leveling the property. As soon as the school house is built and open for occupancy, we will do the landscaping and the signage. We anticipate all this to be done by 6/30/2020. This will allow us to start opening the LSH to those interested on 7/15/2019 so that they can have a 2 week session before school starts.	
<b>Sustainability</b>	
*Describe your plans for sustainability of this project, including personnel, funding, maintenance and any other applicable resources (300 words or less):	
Once the school house is built, the City of Pensacola will take over paying the staff and the utilities to keep it running. It will be the property of ABC Services and the employees will be the staff and the volunteers will be managed from their as well. However since this is a service provided to children in Pensacola, the City will provide the salary and the utilities and the upkeep for as long as the school is there.	

### Project Budget

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Project Revenues	
Please round to whole numbers.	
IF the total project expense exceeds the amount of the IMPACT 100 grant, details must be provided about the additional project funds, such as other grants received, federal funding, lines of credit, etc	
IMPACT 100 Grant:	\$106,000
Government Grants:	\$0
Government Contracts:	\$0
Foundations:	\$10,000
*Details of Foundations:(100 words or less):	
The XXXFoundation has donated \$10,000 for this project. The funds are available immediately and are already deposited in our organizations savings account.	
Corporations/Businesses:	\$0
Civic or Community Groups:	\$0
United Way:	\$0
Arts Council:	\$0
Individual Contributions:	\$0
Fundraising Activity (events):	\$0
Membership Income:	\$0
In-Kind Support:	\$0
Investment Income:	\$0
Endowment Earnings:	\$0
Earned Income:	\$0
Other Project Revenue:	\$0
*Total Project Revenue:	116000
Total Project Expenses	
Please round to whole numbers.	
Complete the detail box for all line items included in your project budget Please itemize in as much detail as possible, line item expenses that exceed \$10,000.	
Project Payroll Costs (Salary & Fringe):	\$0
Consultants and Professional Fees:	\$8,000
*Details of Consultants and Professional Fees (100 words or less):	
Contractor fees.	
Land/Property Acquisition:	\$35,000
*Details of Land/Property Acquisition (100 words or less):	
Purchase of the lot on the corner of Oak Drive and Pine Street. See the attached buyers agreement.	
Construction Permits:	\$1,000
*Details of Construction Permits (100 words or less):	
Construction permits.	
Construction Material:	\$45,000
*Details of Construction Material (100 words or less):	
Completely built building, foundation, delivery, and materials to complete building to ready to be used.	
Construction Labor:	\$9,095
Details of Construction Labor (100 words or less):	
Labor to compete the prefab building installation.	
Construction Site Preparation:	\$14,569
*Details of Construction Site Preparation (100 words or less):	
Clearing of site and leveling of land.	
Construction Concrete/Wood/Metal Structure:	\$2,500
*Details of Construction Concrete/Wood/Metal Structure (100 words or less):	



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Foundation for building.	
Construction Other Costs:	\$586
*Details of Construction Other Costs (100 words or less):	
Landscaping for the lot and around the building.	
Vehicle:	\$0
Equipment, Machinery:	\$0
Office Furniture/Fixtures:	\$0
Fundraising Costs:	\$0
Travel:	\$0
Printing, Copying and Supply:	\$0
Postage and Delivery:	\$0
Rent and Utilities:	\$0
Marketing and Promotion:	\$0
IMPACT 100 Logo Expense:	\$250
*Details of IMPACT 100 Logo Expense (100 words or less):	
Production of sign to be displayed over the front door of the building.	
Other Project Expenses:	\$0
*Total Project Expenses:	116000
TOTAL REVENUES AND TOTAL EXPENSES MUST AGREE AND MUST EQUAL OR EXCEED AMOUNT OF IMPACT 100 GRANT.	
*Project Total Revenues equals Project Total Expenses?	Yes
Expenses Covered By IMPACT 100 Grant	
The line items for "Expenses Covered by IMPACT 100 Grant" are the same as those for "Total Project Expenses" above. For each item below, the IMPACT 100 funded expenses must be equal to or less than the same line item in "Total Project Expenses". (Please round to whole numbers.) If the line item expense covered by the IMPACT 100 grant is equivalent to the line item project expense above, you must still indicate how the IMPACT 100 funds will be used (you may opt to copy and paste in these cases). Where the line item expense covered by the IMPACT 100 grant is less than the line item project expense, please indicate both how the IMPACT 100 funds will be used as well as how the expense difference will be covered.	
Project Payroll Expenses (Salary & Fringe):	\$0
Consultants and Professional Fees:	\$8,000
*Details of Consultants and Professional Fees covered by the IMPACT grant (100 words or less):	
Contractor fees.	
Land/Property Acquisition:	\$35,000
*Details of Land/Property Acquisition covered by the IMPACT grant (100 words or less):	
Purchase of the lot on the corner of Oak Drive and Pine Street. See the attached buyers agreement.	
Construction Permits:	\$1,000
*Details of Construction Permits covered by the IMPACT grant (100 words or less):	
Construction permits.	
Construction Material:	\$45,000
*Details of Construction Material covered by the IMPACT grant (100 words or less):	
Completely built building, foundation, delivery, and materials to complete building to ready to be used.	
Construction Labor:	\$9,095
*Details of Construction Labor covered by the IMPACT grant (100 words or less):	
Labor to complete the prefab building installation.	
Construction Site Preparation:	\$4,569
*Details of Construction Site Preparation covered by the IMPACT grant (100 words or less):	
Part of the \$14,569 to prepare the site for the building. The additional \$10,000 will be paid for by the XXX Foundation. The money is available and ready to disperse from our savings.	
Construction Concrete/Wood/Metal Structure:	\$2,500

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*Details of Construction Concrete/Wood/Metal Structure covered by the IMPACT grant (100 words or less):	
Foundation for building.	
Construction Other Costs:	\$586
*Details of Construction Other Costs covered by the IMPACT grant (100 words or less):	
Landscaping for the lot and around the building.	
Vehicle:	\$0
Equipment and Machinery:	\$0
Office Furniture/Fixture:	\$0
Fundraising:	\$0
Travel:	\$0
Printing, Copying and Supply:	\$0
Postage and Delivery:	\$0
Rent and Utilities:	\$0
Marketing and Promotion:	\$0
IMPACT 100 Logo Expense:	\$250
*Details of IMPACT 100 Logo Expense (100 words or less):	
Production of sign to be displayed over the front door of the building.	
Other:	\$0
*Total IMPACT 100 Grant Expenses:(MUST EQUAL \$106,000)	106000
<b>TOTAL REVENUES AND TOTAL EXPENSES MUST AGREE AND MUST EQUAL OR EXCEED AMOUNT OF IMPACT GRANT.</b>	
*Total IMPACT 100 Grant Expenses equals \$106,000?	Yes

### 2019 Financial Information

*Is your organization a local chapter of a parent organization that files the 990 forms?	No
*Which tax return does your organization file?	990 or 990EZ
*What month and day each year does your organization's fiscal year end (i.e. 6/30, 12/31)?	12/31
Did your organization file an extension in 2018?	No
*Upload your organization's most recent 990 (please format as organization_year_990).	990 - ABC - 20XX-1st page only.pdf
*Upload your organization's previous 990 (please format as organization_year_990).	990 - ABC - 20PY-1st page only.pdf
*Upload your organization's Profit and Loss Statement from the date of your most recent filing through April 30, 2019 (please format as organization_2019PandL).	ABC_profitandloss_0430 current year.pdf
*Upload your organization's Balance Sheet as of April 30, 2019 (please format as organization_2019balancesheet).	ABC_balancesheet_0430 current year.pdf
If you have a current audited financial statement or report, please upload it here.	

### Project Supporting Documents

Project Supporting Documentation	
*This application will include (please check all that apply):	Cost Estimates Drawings
Before uploading a file, please save it as a PDF and title it your NonprofitName_CostEstimate, or your NonprofitName_Drawings, etc.	
Upload first supporting document (if applicable):	
Upload second supporting document (if applicable):	
Upload third supporting document (if applicable):	
Upload fourth supporting document (if applicable):	
Upload fifth supporting document (if applicable):	
Upload sixth supporting document (if applicable):	
Upload seventh supporting document (if applicable):	
Upload eighth supporting document (if applicable):	

## 2019 IMPACT 100 Letter of Intent and Grant - Grant Example | Example, Grant

Upload ninth supporting document (if applicable):	
Upload tenth supporting document (if applicable):	

### Construction Info

Construction Supporting Documents	
*Briefly describe your construction plans.(250 words or less)	
We will purchase the lot. Order the prefabricated building and then have the building erected and connected to be ready to go.	
Which construction related expenses are included in your project budget?	Permitting Building Land Acquisition Materials Labor Other Construction
*How many bids do you have for your construction project? Note: While 2 bids are recommended to ensure project budget is based on realistic costs, a minimum of 1 bid must be submitted.	1
*Check which Construction-related Supporting Documents will be provided. Note: If work is being done on a site that is not owned by the organization, evidence of a lease for at least 5 years is required.	Permits Builder's County and/or City License Builder's Certificate of Insurance
*Bid #1: Upload Builder/Contractor License to do business in the county or city where the construction will be done.	4.Sample Construction Estimate Template Pdf Download 2.pdf
Bid #1: Upload builder/contractor's certificate of insurance	4.Sample Construction Estimate Template Pdf Download 2.pdf
Bid #1: Permit(s)	
Bid #1: Upload Site Plan	
Bid #1: Upload Bid	
Bid #1: Upload Cost Estimates	
Bid #1: Upload Drawings	
Bid #1: Upload Contracts	
Bid #1: Upload Leases	
Bid #1: Upload Letter of Commitment	
Bid #1: Other (please specify)	
Bid #1: Upload Other Supporting Construction Document	

2019 IMPACT 100 Letter of Intent and Grant - Grant Example | Example, Grant

INTERNAL REVENUE SERVICE  
P. O. BOX 2508  
CINCINNATI, OH 45201

DEPARTMENT OF THE TREASURY

Date:

**AUG 14 2007**

ABC SERVICES  
123 ELM ST  
PENSACOLA, FL 32501

Employer Identification Number:  
12-3456789

DLN:  
9876543210000

Contact Person:  
John Smith ID#: 76543

Contact Telephone Number:  
(877) 123-4567

Accounting Period Ending:  
June 30

Effective Date of Exemption:  
August 8, 2007

Dear Applicant:

We are pleased to inform you that upon review of your application for tax exempt status we have determined that you are exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code. Contributions to you are deductible under section 170 of the Code. You are also qualified to receive tax deductible bequests, devises, transfers or gifts under section 2055, 2106 or 2522 of the Code. Because this letter could help resolve any questions regarding your exempt status, you should keep it in your permanent records.

Organizations exempt under section 501(c)(3) of the Code are further classified as either public charities or private foundations. During your advance ruling period, you will be treated as a public charity. Your advance ruling period begins with the effective date of your exemption and ends with advance ruling ending date shown in the heading of the letter.

Shortly before the end of your advance ruling period, we will send you Form 8734, Support Schedule for Advance Ruling Period. You will have 90 days after the end of your advance ruling period to return the completed form. We will then notify you, in writing, about your public charity status.

Please see enclosed Information for Exempt Organizations Under Section 501(c)(3) for some helpful information about your responsibilities as an exempt organization.

Sincerely,



Director

2019 IMPACT 100 Letter of Intent and Grant - Grant Example | Example, Grant

Form **990**

**Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

**20XX**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public.

▶ Information about Form 990 and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

**A** For the 2015 calendar year, or tax year beginning , 2015, and ending , 20

**B** Check if applicable:  
 Address change  
 Name change  
 Initial return  
 Final return/terminated  
 Amended return  
 Application pending

**C** Name of organization  
 Doing business as  
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite  
 City or town, state or province, country, and ZIP or foreign postal code

**D** Employer identification number  
**E** Telephone number  
**G** Gross receipts \$

**F** Name and address of principal officer:  
**H(a)** Is this a group return for subordinates?  Yes  No  
**H(b)** Are all subordinates included?  Yes  No  
 If "No," attach a list. (see instructions)  
**H(c)** Group exemption number ▶

**I** Tax-exempt status:  501(c)(3)  501(c) ( ) ◀ (insert no.)  4947(a)(1) or  527

**J** Website: ▶

**K** Form of organization:  Corporation  Trust  Association  Other ▶ **L** Year of formation: **M** State of legal domicile:

**Part I Summary**

**1** Briefly describe the organization's mission or most significant activities: \_\_\_\_\_

**2** Check this box  if the organization discontinued its operations or disposed of more than 25% of its net assets.

**3** Number of voting members of the governing body (Part VI, line 1a) . . . . . **3**

**4** Number of independent voting members of the governing body (Part VI, line 1b) . . . . . **4**

**5** Total number of individuals employed in calendar year 2015 (Part V, line 2a) . . . . . **5**

**6** Total number of volunteers (estimate if necessary) . . . . . **6**

**7a** Total unrelated business revenue from Part VIII, column (C), line 12 . . . . . **7a**

**b** Net unrelated business taxable income from Form 990-T, line 34 . . . . . **7b**

	Prior Year	Current Year
<b>8</b> Contributions and grants (Part VIII, line 1h) . . . . .		
<b>9</b> Program service revenue (Part VIII, line 2g) . . . . .		
<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . . . .		
<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . . . .		
<b>12</b> Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)		
<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1–3) . . . . .		
<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4) . . . . .		
<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)		
<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e) . . . . .		
<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶		
<b>17</b> Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e) . . . . .		
<b>18</b> Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) . . . . .		
<b>19</b> Revenue less expenses. Subtract line 18 from line 12 . . . . .		

	Beginning of Current Year	End of Year
<b>20</b> Total assets (Part X, line 16) . . . . .		
<b>21</b> Total liabilities (Part X, line 26) . . . . .		
<b>22</b> Net assets or fund balances. Subtract line 21 from line 20 . . . . .		

**Part II Signature Block**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

**Sign Here**

Signature of officer \_\_\_\_\_ Date \_\_\_\_\_

Type or print name and title \_\_\_\_\_

**Paid Preparer Use Only**

Print/Type preparer's name \_\_\_\_\_ Preparer's signature \_\_\_\_\_ Date \_\_\_\_\_ Check  if self-employed PTIN \_\_\_\_\_

Firm's name ▶ \_\_\_\_\_ Firm's EIN ▶ \_\_\_\_\_

Firm's address ▶ \_\_\_\_\_ Phone no. \_\_\_\_\_

May the IRS discuss this return with the preparer shown above? (see instructions) . . . . .  Yes  No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat. No. 11282Y

2019 IMPACT 100 Letter of Intent and Grant - Grant Example | Example, Grant

Form **990**

**Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

**20PY**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public.

▶ Information about Form 990 and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

**A** For the 2015 calendar year, or tax year beginning , 2015, and ending , 20

**B** Check if applicable:  
 Address change  
 Name change  
 Initial return  
 Final return/terminated  
 Amended return  
 Application pending

**C** Name of organization  
 Doing business as  
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite  
 City or town, state or province, country, and ZIP or foreign postal code

**D** Employer identification number  
**E** Telephone number  
**G** Gross receipts \$

**F** Name and address of principal officer:  
**H(a)** Is this a group return for subordinates?  Yes  No  
**H(b)** Are all subordinates included?  Yes  No  
 If "No," attach a list. (see instructions)  
**H(c)** Group exemption number ▶

**I** Tax-exempt status:  501(c)(3)  501(c) ( ) ◀ (insert no.)  4947(a)(1) or  527

**J** Website: ▶

**K** Form of organization:  Corporation  Trust  Association  Other ▶ **L** Year of formation: **M** State of legal domicile:

**Part I Summary**

**1** Briefly describe the organization's mission or most significant activities: \_\_\_\_\_

**2** Check this box  if the organization discontinued its operations or disposed of more than 25% of its net assets.

**3** Number of voting members of the governing body (Part VI, line 1a) . . . . . **3**

**4** Number of independent voting members of the governing body (Part VI, line 1b) . . . . . **4**

**5** Total number of individuals employed in calendar year 2015 (Part V, line 2a) . . . . . **5**

**6** Total number of volunteers (estimate if necessary) . . . . . **6**

**7a** Total unrelated business revenue from Part VIII, column (C), line 12 . . . . . **7a**

**b** Net unrelated business taxable income from Form 990-T, line 34 . . . . . **7b**

	Prior Year	Current Year
<b>8</b> Contributions and grants (Part VIII, line 1h) . . . . .		
<b>9</b> Program service revenue (Part VIII, line 2g) . . . . .		
<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . . . .		
<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . . . .		
<b>12</b> Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)		
<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1–3) . . . . .		
<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4) . . . . .		
<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)		
<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e) . . . . .		
<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶		
<b>17</b> Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e) . . . . .		
<b>18</b> Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) . . . . .		
<b>19</b> Revenue less expenses. Subtract line 18 from line 12 . . . . .		

	Beginning of Current Year	End of Year
<b>20</b> Total assets (Part X, line 16) . . . . .		
<b>21</b> Total liabilities (Part X, line 26) . . . . .		
<b>22</b> Net assets or fund balances. Subtract line 21 from line 20 . . . . .		

**Part II Signature Block**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

**Sign Here**

Signature of officer \_\_\_\_\_ Date \_\_\_\_\_

Type or print name and title \_\_\_\_\_

**Paid Preparer Use Only**

Print/Type preparer's name \_\_\_\_\_ Preparer's signature \_\_\_\_\_ Date \_\_\_\_\_ Check  if self-employed PTIN \_\_\_\_\_

Firm's name ▶ \_\_\_\_\_ Firm's EIN ▶ \_\_\_\_\_

Firm's address ▶ \_\_\_\_\_ Phone no. \_\_\_\_\_

May the IRS discuss this return with the preparer shown above? (see instructions) . . . . .  Yes  No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat. No. 11282Y

**ABC Services  
Profit & Loss**

Cash Basis

As of April 30, 20XX (current year)

	<u>Apr 30, 20XX</u>
<b>Ordinary Income/Expense</b>	
<b>Income</b>	
Discount	0.80
Sales	27,500.00
Sales Income	<u>4,333.79</u>
<b>Total Income</b>	61,834.59
<b>Cost of Goods Sold</b>	
*Cost of Goods Sold	2,309.99
Production & Sale Materials	<u>75.84</u>
<b>Total COGS</b>	<u>2,385.83</u>
<b>Gross Profit</b>	29,448.76
<b>Expense</b>	
Adobe Systems	599.88
Advertising and Promotion	353.90
Bank Service Charges	240.58
Commissions charged	112.16
Computer and Internet Expenses	77.36
Legalzoom	119.00
Licenses	143.75
Misc	-0.26
Office Supplies	
Checks	<u>22.00</u>
<b>Total Office Supplies</b>	22.00
Professional Fees	
Font Fee	35.00
Government	<u>130.00</u>
<b>Total Professional Fees</b>	165.00
Website hosting	<u>348.62</u>
<b>Total Expense</b>	<u>2,181.99</u>
<b>Net Ordinary Income</b>	<u>27,266.77</u>
<b>Net Income</b>	<u><u>27,266.77</u></u>

**ABC Services  
Balance Sheet**

As of April 30, 20XX (current year)

Cash Basis

	<u>Apr 30, 20XX (current year)</u>
<b>ASSETS</b>	
Current Assets	
Checking/Savings	
BOA - Orange Works	27,500.00
Total Checking/Savings	27,500.00
Other Current Assets	
*Inventory Asset	1,118.20
Total Other Current Assets	1,118.20
Total Current Assets	28,618.20
<b>TOTAL ASSETS</b>	<b><u>28,618.20</u></b>
<b>LIABILITIES &amp; EQUITY</b>	
Equity	
Members Draw	-648.56
Members Equity	27,266.76
Opening Balance Equity	2,000.00
Total Equity	28,618.20
<b>TOTAL LIABILITIES &amp; EQUITY</b>	<b><u>28,618.20</u></b>



<b>CONSTRUCTION COSTS - ESTIMATES and ACTUAL</b>				
<b>Job Name:</b> _____				<b>Date</b> _____
<b>No.</b>	<b>Item</b>	<b>Size or Qty.</b>	<b>Estimate</b>	<b>Actual</b>
1	Land			
	Property Taxes/FCHA dues			
2	Survey			
	Appraisal			
3	Attorney			
4	Plans			
5	Loan Origination Fee			
	Zoning Permit			
6	Septic Permit			
7	Building Permit			
	Contractors License Renewal			
	Workmen's Comp & General Liability			
8	Builders Risk Insurance			
10	Water/Well			
	Electricity & Gas			
11	Sewer (septic)			
12	Pipe under Driveway			
13	Clear Lot			
14	Gravel			
15	Excavate (crawl space/basement)			
16	Footings - Material			
17	Footings - Labor			
18	Foundation - Material			
19	Foundation - Labor			
20	Concrete Floors (basement/garage/porch)			
21	Steel			
22	Waterproofing			
23	Drainage System			
24	Termite Treatment			
25	Framing - Material (to complete dry-in)			
26	Framing - Dry in Labor			
27	Windows			
28	Exterior Doors			
29	Roofing - Material			
30	Roofing - Labor			
31	Brick - Material			
32	Brick - Labor			
33	Fireplace - material & labor			
34	Stucco			
35	Siding - material			
	Siding - Labor			
36	Boxing			
37	Exterior Millwork - Material			
38	Exterior Millwork - Labor			
39	HVAC			
40	Electrical			

**2019 IMPACT 100 Letter of Intent and Grant - Grant Example | Example, Grant**

41	Plumbing Rough In				
42	Plumbing Fixtures & Toilets				
43	Tubs, Showers & Sinks				
44	Insulation				
45	Drywall - Material				
46	Drywall - Hang & finish				
47	Interior Millwork - Material				
48	Interior Millwork - Labor				
50	Hardward Floor				
51	Cabinets				
52	Countertops - Bathrooms				
53	Countertops - All Others				
54	Door Hardware (lock, handles, hinges				
55	Painting				
56	Appliances				
57	Light Fixtures				
58	Carpet and Vinyl				
59	Ceramic tile				
60	Closet Shelving				
61	Mirrors				
	Glass				
63	Intercom				
64	Bathroom Hardware				
65	Wallpaper				
66	Front Porch				
67	Deck				
68	Garage Doors & Openers				
69	Gutters				
70	Cleaning - Interior & Exterior				
72	Driveway				
73	Landscaping				
	Retaining Wall				
74	Extras				
75	Miscellaneous				
76	Trash Removal				
77	Attic Fan				
78	Ventilator				
79	Hookups				
80	Sanitation				
81	Construction Loan Interest				
82	General contractor fee				
83	<b>Subtotal</b>				
84	Real Estate Fee				
85	Closing Costs				
86	<b>Total Selling Price</b>				
87					
88					
89					
90					

<b>CONSTRUCTION COSTS - ESTIMATES and ACTUAL</b>				
<b>Job Name:</b> _____				<b>Date</b> _____
<b>No.</b>	<b>Item</b>	<b>Size or Qty.</b>	<b>Estimate</b>	<b>Actual</b>
1	Land			
	Property Taxes/FCHA dues			
2	Survey			
	Appraisal			
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4	Plans			
5	Loan Origination Fee			
	Zoning Permit			
6	Septic Permit			
7	Building Permit			
	Contractors License Renewal			
	Workmen's Comp & General Liability			
8	Builders Risk Insurance			
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	Electricity & Gas			
11	Sewer (septic)			
12	Pipe under Driveway			
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19	Foundation - Labor			
20	Concrete Floors (basement/garage/porch)			
21	Steel			
22	Waterproofing			
23	Drainage System			
24	Termite Treatment			
25	Framing - Material (to complete dry-in)			
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27	Windows			
28	Exterior Doors			
29	Roofing - Material			
30	Roofing - Labor			
31	Brick - Material			
32	Brick - Labor			
33	Fireplace - material & labor			
34	Stucco			
35	Siding - material			
	Siding - Labor			
36	Boxing			
37	Exterior Millwork - Material			
38	Exterior Millwork - Labor			
39	HVAC			
40	Electrical			

**2019 IMPACT 100 Letter of Intent and Grant - Grant Example | Example, Grant**

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81	Construction Loan Interest				
82	General contractor fee				
83	<b>Subtotal</b>				
84	Real Estate Fee				
85	Closing Costs				
86	<b>Total Selling Price</b>				
87					
88					
89					
90					