THE BROOKVILLE FOUNDATION ANNUAL GRANTS

Applications for grants form The Brookville Foundation this year must be made by the second Monday in August. The foundation supports philanthropic organizations and activities in the Franklin County Community. It makes limited grants for extraordinary purposes, which increase the efficiency of new or existing programs. Often its grants are "challenge" grants, encouraging the raising of matching funds.

It is policy of The Brookville Foundation not to grant funds to individuals, to organizations for sectarian or religious purposes, or to private or sectarian primary or secondary schools, or to sectarian pre-school or day care centers.

Upon reviewing applications, The Brookville Foundation will make grants to facilitate projects for the benefit of the citizens of Franklin County and qualified entities providing services to Franklin County Citizens. The Board of Trustees of The Brookville Foundation encourages all qualified entities to "dream" big and submit applications for assistance for projects, which service our community.

Application forms are available July 1 at the Brookville Town-Township Library, 919 Main Street, Brookville, Indiana 47012, and on our website and should include the following:

- 1. Evidence that applying organization has the proper tax exemption with statement to this effect from the Internal Revenue Service;
- 2. A detailed budget justifying the amount requested, and except for new programs, an accurate operating statement for the prior period;
- 3. Verification that the request is made by action of the organization's governing body;
- 4. Qualifications of the key personnel and the names and identification of the members of the governing body; and

The Foundation expects all grant recipients, at the completion of the project, submit an accounting of all disbursements.

Complete application forms consisting of the original and one copy should be sent to: The Brookville Foundation, P.O. Box 184, Brookville, Indiana 47012 by the second Monday in August.

Art Hildebrand, President The Brookville Foundation

THE BROOKVILLE FOUNDATION

GRANT APPLICATION FORM

Please check one of the following: □Nonprofit Building and Program Support □Health and Medical Related Service □Franklin County Cultural Field								
FROM:								
(Name	e of Applicant)							
(Stree	t Address)							
(City,	State, and Zip Code)							
PART	1INFORMATION ABOUT THE APPLICANT							
1.	Is the applicant organized as a non-profit organization under Indiana laws governing charitable organizations?	()Yes)No					
2.	Has the applicant received a ruling or determination letter from the Internal Revenue Service?	()Yes)No					
	If "Yes" please attach a photocopy of such letter. If "No" please explain.							
3.	Describe the applicant's purposes and activities in genera	al.						

GRANT APPLICATION

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4.	Is the applicant controlled by, related to, connected with, or sponsored by another organization?				
	If "Yes" id relationsh	entify the organization and explain the ip.			
5.	-	oplicant(or any organization listed in 4 er applied for or received a grant from ation?	()Yes)No	
	If "Yes" pl	ease give details.			
6.	Have you	enclosed the following information?	()Yes)No	
	a)	Applicant's budget for the year in which the grant funds are to be used.			
	b)	Budget for project for which grant is being sou	ıght	•	
	c)	Name, address, and titles of each member of the Applicant's governing board.	the		

PART II.- USE OF REQUESTED GRANT

1. Explain the purpose of the grant request, show the amount requested and explain in detail how it will be used.

GRANT APPLICATION

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PART II.- USE OF REQUESTED GRANT (continued)

Person to contact who will be administering the proposed program and/or who may be contacted for further information.					
(Name)	(Title)				
(Address)	(Telephone Number)				
(City, State, Zip Code)					
Describe this person's experience and qual	ifications to administer the program and funds.				
PART 111. – AUTHORIZATION					
From my own knowledge, I certify that the in application has been authorized by the govern	nformation given in Parts I and II is correct. This ning board.				
(Name of Governing Board Member)					
(Title of Governing Board Member)					
(Date)					