



Opportunity180°

Grant Cover Page 2017

Date: \_\_\_\_\_

Name of Organization: \_\_\_\_\_

Tax ID#: \_\_\_\_\_

Fiscal Agent (if different from your organization): \_\_\_\_\_

Tax Status?	501(c) (3)
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Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Website: \_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Contact person: \_\_\_\_\_

Title: \_\_\_\_\_

Program Name (if applicable): \_\_\_\_\_

### Program Summary:

[illegible]

Grant Amount Requested: \_\_\_\_\_

For: ☐ General Operating ☐ Program Support ☐ Restricted \_\_\_\_\_

Charitable nature of program:

Timing of funding requested: \_\_\_\_\_

\_\_\_\_\_

Have you received any prior grants from Opportunity 180?   ☐ Yes   ☐ No

Please attach the following information:

1. Description of the proposed program.
  - a. Include goals, objectives, timeline, anticipated results, possible obstacles and collaborating partners (if applicable).
    - i. Include program description, enrollment plan, hiring plan, and operations plan
  - b. Reporting timeline and expectations

**The following documents need to accompany the proposal**

1. Copy of currently effective IRS determination letter.
2. Form 990 (or Form 990PF) for latest two years, including all schedules.
  - a. If you do not have a Form 990, please include a bank statement with operating budget
3. Would any portion of the proposed grant be used to pay, or count toward the computation of, any (a) commission or fee to any fundraiser whether employed by your organization or retained as an outside fundraiser, and/or (b) bonus or incentive compensation to any officer, director or employee of your organization? If so, please give details.
4. List of current board members
5. Current fiscal year operating budget
6. Five year operating budget
7. Certification form signed by the President or other authorized senior executive officer of your organization.

### CERTIFICATION

The organization requesting a grant herein hereby certifies that it is and continues to be exempt under Internal Revenue Code section 501(c)(3); is as of the date hereof classified as a public charity pursuant to Internal Revenue Code section 509(a)(1), (2) or (3), as set forth above, and is aware of no facts or information that may cause the organization to lose its status as a public charity during the term of the grant; the making of the requested grant by Opportunity 180 to the organization will not adversely affect the organization's public status as a publicly supported charity; it will inform Opportunity 180 promptly if there is a change in its tax status; and the information furnished to Opportunity 180 in furtherance of this grant request is complete and accurate. Further, you recognize and agree on behalf of your organization that any grant to your organization by Opportunity 180 will be expended for an educational, scientific or other charitable purpose, and will not be used to influence legislation, to influence the outcome of any election, to carry on any voter registration drive, or for any other non-charitable purpose, nor will the funds be used to pay any part of a legally binding pledge or other personal financial obligation on behalf of the named donors. Finally, any funds not expended for the purposes for which the grant is being made shall be returned to us. Please signify your organization's acceptance of the terms of this Certification by signing a copy of this Request for Grant in the space provided below as of the date first written above and returning it to us.

Name of Organization: \_\_\_\_\_

Signature of authorized officer:

By: \_\_\_\_\_

Print Name: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_

**PLEASE RETURN YOUR COMPLETED REQUEST FOR GRANT AND ASSOCIATED  
INFORMATION TO ALLISON@OPPORTUNITY180.ORG**