



GENERAL SUPPORT APPLICATION

Date: _____

Name of Organization: _____

Mailing Address: _____ Email Address: _____

Telephone: _____ Website: _____

Contact Person: _____ Contact Person's Phone: _____
(If different)

- Tax Status: ___ 501(c)(3) organization as recognized by the IRS
 ___ 501(c)(4) organization as recognized by the IRS
 ___ Federally recognized American Indian tribal government
 ___ Sponsored by a 501(c)(3), 501(c)(4), or federally recognized tribal government

If your organization is tax exempt, please attach a copy of your federal IRS notification letter. Please note that neither your state tax exemption nor your employer identification number will meet this requirement.

If you are sponsored by a 501(c)(3), a 501(c)(4), or a federally recognized tribal government, please fill in the name and address of that organization and include their IRS notification letter with this application.

Fiscal Conduit: _____

Mailing Address: _____

Please list any projects for which you have applied for funding from The Fringe Foundation in the past. Include projects/years for which you did not receive funding. If your organization applied under a different name, include that application as well.

Application Date	Organization/Project	Award Amount
_____	_____	_____
_____	_____	_____
_____	_____	_____

Please list all grants your organization has received from other foundations **within the past two years**. Also, list any other partner organizations with whom you have worked closely.

Application Date	Grant-Giving Organization	Award Amount
------------------	---------------------------	--------------

REQUEST FOR FUNDING (OVERVIEW)

- 1. Please provide a one-sentence description of your organization.

- 2. Please provide a one-sentence description of your philosophy of social change. What is your organization's view of how best to achieve social change in the current political climate?

- 3. Please provide a brief overview of how the funds would be used if you were to receive this grant.

PROJECT SPECIFICS

4. Please provide concrete details about how your work during the coming year will address the specific social problems your organization tackles. (1 page limit)

RECENT WORK

5. Explain your organization's most significant accomplishments and challenges over the past few years. If you are a new group, please use this opportunity to elaborate on your hopes for the future impact of your organization. (1 page limit)

ORGANIZATIONAL STRUCTURE AND OPERATIONS

6. How has your organization evolved in its structure and/or operations over the past two years? What (if any) changes have you made to improve the efficiency of your work and/or the ways you organize your leaders and members? If you are a new group, please share your group's origin story and how/why you determined your organizational structure.

REPRESENTATION

7. How does your organization involve the people most affected by the issues you address? How does the makeup of your organization, including leadership staff, reflect the makeup of the community around it?

COLLABORATION

8. In what ways does your organization collaborate with other organizations?

FISCAL MANAGEMENT

9. Explain how you keep track of your income and expenses.

LOBBYING

10. If your organization plans to engage in lobbying during the coming year, please estimate the costs below.

\$_____ Direct Lobbying

\$_____ Grassroots Lobbying

FINANCIAL INFORMATION

11. Please complete the chart on the following page. If your group prepares organizational or project budgets, you may submit your budget in its original format. If doing so, **please include your budget within your application as a single file; please do not send multiple attachments.**

If your organizational budget is over \$1,000,000, you are not eligible for funding. If it is close to \$1,000,000, contact us before applying.

FINANCIAL INFORMATION	Financial Statement (last year's actual income & expenditures)	Annual Budget (current year)
Fiscal Year-End Date:		
INCOME		
Request		
Individual Contributions		
Foundation Grants		
Government Contracts		
Membership Dues		
Special Events/Sales Income		
In-Kind Contributions		
Carry-Over from Prior Fiscal Year		
Other		
Total Income		
EXPENSES		
Salaries		
Benefits		
Professional Fees		
Occupancy (rent, utilities)		
Insurance		
Telephone		
Postage/Shipping		
Copying/Printing		
Supplies		
Major Equipment		
Travel/Transportation		
Fundraising		
Promotion/Publicity/Outreach		
Training/Technical Assistance		
Other _____		
Total Expenses		
BALANCE		

ADDITIONAL NOTES

12. Is there anything else you would like us to know about your team or your work? Please share thoughts or images in the space below.