

The Allyn Foundation, Inc.

Grant Application

A family foundation improving communities in Central New York

Name of Organization: _____

Address: _____

Contact person: _____ Position: _____

Phone: _____ Email address: _____

Amount requested: _____ Total cost of project: _____

Briefly explain the mission of your agency:

Please describe the geographic area in which you serve:

Describe the need or problem that your proposal seeks to address

Describe the project or program and its objectives.

Outline your plan for evaluating the proposed project and its expected outcomes.

Describe the sustainability of this project, if it is not a one-time grant. How will you sustain the project after Allyn funding has ended?

Last year, how much did you raise in private funds (excluding United Way money): _____

Number of donors to your agency: _____

Describe other sources of funding you may have to secure financing for this project:

Please include with this grant statement the following:

- A one page line item budget reflecting all expenses and income for the project
- List of Board of Directors
- A copy of your 501(c)(3) IRS Determination Letter
- A copy of your most recent audited financial statement

You may include with this grant application any relevant materials including annual reports, campaign brochures, etc. In an effort to conserve paper, please do not submit a customized grant proposal.

Submit your grant application to: The Allyn Foundation
P. O. Box 22
Skaneateles, New York 13152

Questions? Call 685-5059