



Grant Application

Organization Name: _____

IRS Federal tax-exempt ID Number: _____
(Attach a copy of IRS (501(c)(3) determination letter of federal tax-exempt non-profit status.)

Organization Contact Name & Phone #: _____

Organization Mailing Address: _____

Organization Contact E-mail address: _____

Organization Website address: _____

Vet Reference and Phone #: _____

Requesting (Check One): Spay/Neuter Med. Emergency/Treatment Costs

Amount of financial request: \$ _____

Mission and History of Organization: Attach a description of the organization's mission, focus areas, history, and other accomplishments. ***If you have received funding from Gracie's Fund within the past two years, a brief summary of any changes in your mission, focus areas and recent accomplishments will be sufficient.*

Purpose of Request: Attach a detailed description of the project including a project budget as well as a list of other funding sources for the project. ***If you are requesting funding for Medical Emergency/Treatment costs, please refer to additional instructions on page 2 of this application.*

Financials: Attach a copy of your organization's most recent Operating Budget and your most recently filed Form 990.

Gracie's Fund grants will be awarded twice a year (except Med. Emergency/Treatment Costs funding requests) to **non-profit animal welfare organizations in South Carolina**. Your organization will be notified in July or January of your application status. Applications for funding must be received in the mail by the following deadlines to be considered for funding. Organizations can only receive funding once per calendar year.

Deadlines for submitting applications: **June 30th** **December 31st**

Mail all applications to: Gracie's Fund
 Grant Application
 186 Goss Lane
 Barnwell, SC 29812

Medical Emergency/Treatment Costs and Adoption Programs:

In exceptional cases, Gracie's Fund may provide at least partial funding for medical emergencies/treatments. Certification of the condition for which funding is requested and total costs must be provided by the veterinarian providing the service in addition to the above required information and documents. Funding requests for medical emergencies/treatment may be submitted at any time. The above referenced deadlines DO NOT apply; however, applications must be received no later than 3 months following the date of intake of the animal(s). Funding to any one organization is limited to once per fiscal year.

Please note that our primary mission is spay/neuter. Requests for medical emergencies/treatment must be exceptional.

Support of any program is not a guarantee of continued or future support by Gracie's Fund.

Grantee agrees to the following:

- 1. Grantee is obligated to use the grant funds only for the purpose for which the grant is made.***
- 2. Grantee will provide a written report within six (6) months of receiving funding concerning the use of grant funds and an accounting of how grant funds were used.***
- 3. Grantee acknowledges Gracie's Fund's authority to withhold and/or recover grant funds in case such funds are, or appear to be, misused.***

Authorized Signature and Title

Date

Checklist:

- Completed Grant Application
- IRS determination letter of federal tax-exempt non-profit status under Section 501(c)(3)
- Mission and History of Organization Statement
- Purpose of Request Statement including a project budget and other funding sources
- Most recent Operating Budget
- Most recently filed Form 990

If applying for a Medical Emergency/Treatment Costs grant:

- Veterinary certification of condition and total costs
- Date of intake

PLEASE MAKE CERTAIN THAT THE ABOVE REFERENCED DOCUMENTS ARE INCLUDED OR YOUR APPLICATION WILL BE CONSIDERED INCOMPLETE AND YOUR FUNDING REQUEST DENIED.