
LAREDO AREA COMMUNITY FOUNDATION

Inspired by Generosity, Empowered by Giving

LACF GRANT OPPORTUNITY

Christine Holliday Cerda
President

To All Non-Profit Organizations

Alexandra C. Solis
Vice – President

The Laredo Area Community Foundation Board of Directors will be accepting grant applications from 501(c) 3 organizations located in Laredo and surrounding areas. We will be disbursing \$5,000 from each of our five areas of interest that include the Arts, Education, Environment, Health, and Social Services.

Jennifer Beckelhymer
Secretary

Juan M. Caballero
Treasurer

Please complete the application and provide all the requested information.

Directors:

Deadline: Sunday, October 15, 2023 at 5:00 p.m.

Juan J. Castillo

Matias de Llano, III

Roy S. Franklin

If you have a valid Gmail email address, please go to our website at <https://laredofoundation.org/grants/> to access the Google Form electronic application. This is our preferred method to receive applications.

William B. Green

Candy Hein
Past-President

You may also:

Ricardo E. Morales

Diana Ortiz

- (1) Email application and required documents to:
admin@laredofoundation.org
with subject line: Outreach Grant Application

Jeremy Peters

Mario Rullan

Gerry Salinas

Or

- (2) Mail application and required documents to:
LACF
P.O. Box 450223
Laredo, TX 78045

**Mailed applications must be received by the deadline. No exceptions.
All documents must be one-sided.**

Please direct all questions to our Operations Manager, Cynthia Villafranca at (956) 326-2845.

Serving Laredo and South Texas since 2005

LAREDO AREA COMMUNITY FOUNDATION

Inspired by Generosity, Empowered by Giving

INSTRUCTIONS

To be considered, all fields of the application must be completed and all required documents must be submitted.

Organization Information

- Date Founded: Date organization was founded
- EIN: IRS Assigned Number
- IRS Determination: Enter type of organization 501(c)3, etc.
- Name: Name of organization
- Address: Enter mailing address
- City, State, Zip Code: Enter requested information
- Phone Number: Enter requested information
- Fax Number: Enter requested information
- Website: Enter the organizations website
- Social Media account names: include Facebook Instagram, X (formerly Twitter), and/or LinkedIn
- Current Operating Budget: Current year operating budget for organization
- Fiscal Year Observed: Specify if organization observes January-December or another time frame
- # of Employees: Number of full/time employees and number of part-time employees
- Key Contact Information: Name of main contact for organization and their contact information
- Board President Information: Name and contact information for organizations board president.
- Mission Statement: Enter the organizations mission statement
- Vision: Enter the organizations overall vision

Grant Request

- Date: Date request is being made
- Amount of Request: Amount being requested with this grant application
- Area of Interest: Category your request for this grant applies to
- Type of Funding: Select the type of funding being requested
- Project Name: Name of project funds are being requested
- Project Budget: Enter the complete budget for this project/program
- Project Geographical Area Served: Geographical area that will be served by this program/project.
- Project Description: Enter a complete description of the program/project the funds are being requested.
- Detailed Budget: Attach the complete budget for this program/project in detail.

Required Documents *(all must be submitted)*

- ___ Complete organization information form
- ___ Complete grant request form
- ___ Detailed Budget (*Attach your detailed budget for this project. Include all sources of funding for this project, internal, government grants, other external funding.*)
- ___ Previous Year 990 (*if your 2022 990 has not been filed, then a copy of your most recently filed 990*)
- ___ Organization's W9 Form
- ___ Organization Logo JPEG file

LAREDO AREA COMMUNITY FOUNDATION

Inspired by Generosity, Empowered by Giving

Organization Information

Grant Applying for: Community Outreach Grant *Arts* *Education* *Environment* *Health* *Social Services*

Date Founded: _____ EIN: _____ IRS Determination: _____

Name: _____

Address: _____

City, State, Zip Code: _____

Phone Number: _____ Fax Number: _____

Website: _____

Social Media Account Names: _____

Current Operating Budget: _____ Fiscal Year Observed: _____

of Employees: F/T _____ P/T _____

Key Contact: _____ Title: _____

Phone: _____ Email: _____

Board President: _____

Address: _____

City, State, Zip Code: _____

Phone: _____ Email: _____

Mission Statement:

Vision:

LAREDO AREA COMMUNITY FOUNDATION

Inspired by Generosity, Empowered by Giving

Grant Request

Date: _____

Amount of Request: _____

Area of Interest: Arts Education Environment Health Social Services

Type of Funding: Pilot Program Project Support General Operations Capital Other

Project Name (if applicable) _____ Project Budget: _____

Project Geographical Area Served: _____

Project Description:

Detailed Budget: Attach your detailed budget for this project. Include all sources of funding for this project, internal, government grants, other external funding.