

Due by 03/01/2024 11:59 PM CST.

Fields with an asterisk (\*) are required.

Criteria

Are you requesting funding in any of these categories?\*

(These items are ineligible for funding through the WKCF.)

- Grants to individuals
- Capital campaigns
- Medical research
- Internal studies or research (i.e. Studies conducted by the applicant organization are not eligible. Studies conducted by a third-party for the applicant, such as impact studies, or a study to help form a strategic plan, are eligible.)
- Educational scholarships or fellowships
- Membership fees
- Ticket sales for fund-raising efforts
- Religious organizations for religious purposes
- Capital debt reduction, including construction or real estate loan payments
- Political lobbying, advocacy, or legislative activities
- Endowment establishment or enhancement
- Umbrella funding of organizations that would distribute requested funds at their own discretion
- Give-away items for prizes/incentives
- Projects that discriminate on the basis of race, color, national origin, gender, age, physical ability, sexual orientation or identity, or political preference

☐ Yes

☒ No

Is your organization a 501(c)3 entity?\*

The Western Kansas Community Foundation can make grants to organizations with tax-exempt status under section 501(c)3 of the Internal Revenue Service Code, as well as churches, schools, and governmental entities. Please select the response below that best describes your organization:

We have been designated as a 501(c)3 entity by the IRS.

Organization Information

Organization Mission Statement

The mission of the Western Kansas Community Foundation is "Enriching Western Kansas life through philanthropy, leadership, and collaboration."

358 characters left of 500

Project Name\*

The name of the project is attached to each and every form within your process. This is the "identifier" for the request.

(Example Application) Jumpstart

Amount Requested\*

\$ 5,000.00

Total Project Budget\*

\$ 25,600.00

Project Start Date

05/01/2024

Project Completion Date

\*Please note: Regardless of the anticipated project completion date, WKCF grant funding is restricted to a one-year timeframe from the application due date.

05/01/2025

**Briefly describe your agency/organization's purpose:\***

The Western Kansas Community Foundation (WKCF) was established to enrich Western Kansas life through the stewardship of charitable donations.

858 characters left of 1,000

**Project Description\***

Please describe the equipment, project, or event for which you are seeking funding specific to this application.

The WKCF has the opportunity to sponsor nonprofits in a 12-month fundraising coaching program called Jumpstart. Through Jumpstart, nonprofits work with coaches to address specific fundraising needs. The agencies and coaches work together to create a plan for more fundraising opportunities.

1,907 characters left of 2,200

**Focus Area\***

Select the focus area this program addresses.

Community Development ▼

**Population Served\***

Please provide a description of the target population, and number of those who this project will serve.

Nonprofits in Kansas.

978 characters left of 1,000

**Geographic Area Served\***

Please select the counties your project will impact. (Programs taking place outside of these counties are not eligible for funding due to being outside of our service area.)

- ☒ Finney County
- ☐ Grant County
- ☐ Gray County
- ☐ Greeley County
- ☐ Hamilton County
- ☐ Haskell County
- ☐ Kearny County
- ☐ Lane County
- ☐ Meade County
- ☐ Morton County
- ☐ Scott County
- ☐ Seward County
- ☐ Stanton County
- ☐ Stevens County
- ☐ Wichita County

**Project Goals & Anticipated Outcomes\***

Please include a description of program objectives as well as timetable for this request.

Participating nonprofits will participate in the program for 12 months.

1,428 characters left of 1,500

**Goal Measurement\***

Please explain how project goals will be measured and evaluated.

We will have met our goal for the grant funds when the program is paid for.

1,424 characters left of 1,500

How does this program fit your Organization's Mission Statement?\*

This program fits the mission of the WKCF because it's our mission to work with nonprofits.

908 characters left of 1,000

How does this program fit with WKCF's Mission Statement?\*

"Enriching Western Kansas life through philanthropy, leadership and collaboration."

This program fits the mission of the Community Foundation because we will be serving southwest Kansas.

898 characters left of 1,000

How do you plan to acknowledge the WKCF grant, if awarded?\*

We will make a post on Facebook.

466 characters left of 500

If this grant request is NOT funded, explain the implications that will be felt by this program.

If this program was **NOT** funded by the WKCF, please describe your organization's ability to continue the program. If your organization would not be able to continue the program, please describe the repercussions that would have on your organization. Try to be as realistic as possible, explaining known and/or highly feasible outcomes.

This program will not be possible for the WKCF and we will have to stop providing services to nonprofits.

2,895 characters left of 3,000

## Project Budget

List projected costs associated with the full project of which you are requesting funding.

There are a limited number of rows in the table below. If necessary, combine like-items together in a category and utilize the text box below the tables to define specifics of each budget category.

| Budget Category (Ex.: supplies, marketing materials, equipment, etc.) | Amount        |
|---|---------------|
| A* Jumpstart Sponsorship for 4 nonprofits                             | \$* 25,600.00 |
| A   | \$            |
| A   | \$            |
| A   | \$            |
| A   | \$            |
| A   | \$            |
| A   | \$            |
| A   | \$            |
| A   | \$            |
| A   | \$            |
| A   | \$            |
|   | 25600         |

List only the categories from above for which you are requesting funding from the WKCF.

There are a limited number of rows in the table below. If necessary, combine like-items together in a category and utilize the text box below this table to define specifics of each budget category.

| Budget Category (Ex.: supplies, marketing materials, equipment, etc.) | Amount       |
|---|--------------|
| A* Jumpstart sponsorship  | \$* 8,000.00 |
| A   | \$           |
| A   | \$           |
| A   | \$           |
| A   | \$           |
| A   | \$           |
| A   | \$           |
| A   | \$           |
| A   | \$           |
| A   | \$           |
|   | 8000         |

Include a brief explanation of each budget category for which you are requesting funding.

**Example:** Exercise equipment: includes balance balls, hand weights, aerobics steps, and jump ropes.

5,000 characters left of 5,000

Have you asked/received funding from private donors or local funding agencies, aside from the WKCF?\*

This includes contributions to this project or for your organization in general.

☐ Yes

☒ No

## Document Uploads

### Current Balance Sheet.\*

Please upload your current balance sheet, or comparable financial report that shows the total revenues, total expenses/liabilities, and the net activity of the organization. \*\*\*The most current audited financials are preferred.

UPLOAD A FILE [5 MiB allowed]

RBS-Bank-Statement-TemplateLab.com\_.pdf [378.1 KiB]



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### Letter of Recommendation\*

Please upload a letter of recommendation. This letter should speak to the character/quality of the organization and should be written and signed by someone outside of the applying organization.

UPLOAD A FILE [5 MiB allowed]

Letter-of-Support-bad example.pdf [57.1 KiB]



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### Is your organization exempt from paying sales tax?\*

☒ Yes

☐ No

### Additional Files

Please use the next few spaces to upload any additional items you would like included in your application (i.e. a brochure, photos, a flyer, etc.)

UPLOAD A FILE [2 MiB allowed]

### Additional Files

UPLOAD A FILE [2 MiB allowed]

## Sales Tax Exemption

### Please upload proof of sales tax exemption.\*

This document will be from the State of Kansas Department of Revenue, NOT from the IRS.

UPLOAD A FILE [2 MiB allowed]

IRS Det. Letter.pdf [234.0 KiB]



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# Example "Balance Sheet"

CREATED BY  
TemplateLAB



## Statement

SELECT ACCOUNT

Account Number: 1111111

Sort Code: 16-10-00

BIC: RBOSGB2L

IBAN: GB11RBOS 1610 0011 1111 11

MR TEST TESTER  
CURRENT ACCOUNT

| Branch Details | Your Details  | Period           | 22 Oct 2014 to 21 Dec 2014 |
|----------------|---------------|------------------|----------------------------|
| ANY BRACH      | MR T TESTER   | Previous Balance | £1803.90                   |
| ANY STREET     | 1 TEST STREET | Paid Out         | £2,684.10                  |
| ANY TOWN       | TEST TOWN     | Paid In          | £2,180.40                  |
| AN1 TWN        | TE5 7ER       | New Balance      | £300.20                    |

| Date                     | Type             | Description                           | Paid In   | Paid Out  | Balance  |
|--------------------------|------------------|---------------------------------------|-----------|-----------|----------|
| BRIGHT FORWARD           |                  |                                       |           |           | 1803.90  |
| 22 Oct 2014              | AUTOMATED PAY IN | 650274051211-CHB                      |           | 190.40    | 1803.9   |
| 22 Oct 2014              | DIGITAL BANKING  | CALL REF. NO. 3442, FROM A/C 22222222 |           | 140.00    | 1613.5   |
| 24 Oct 2014              | Faster Payment   | Amazon                                |           | 132.30    | 1473.5   |
| 24 Oct 2014              | BACS             | Tebay Trading Co.                     |           | 515.22    | 1341.2   |
| 25 Oct 2014              | Faster Payment   | Morrisons Petrol                      |           | 80.00     | 825.98   |
| 25 Oct 2014              | BACS             | Business Loan                         | 20,000.00 |           | 745.98   |
| 26 Oct 2014              | BACS             | James White Media                     |           | 2,461.55  | 20745.98 |
| 27 Oct 2014              | Faster Payment   | ATM High Street                       |           | 100.00    | 18284.43 |
| 01 Nov 2014              | BACS             | Acorn Advertising Studies             |           | 150.00    | 18184.43 |
| 01 Nov 2014              | BACS             | Marriott Hotel                        |           | 177.00    | 18034.43 |
| 01 Nov 2014              | Faster Payment   | Abellio Scotrail Ltd                  |           | 122.22    | 17857.43 |
| 01 Nov 2014              | CHQ              | Cheque 0000234                        |           | 1,200.00  | 17735.21 |
| 01 Dec 2014              | Int. Bank        | Interest Paid                         | 9.33      |           | 16535.21 |
| 01 Dec 2014              | DD               | OVO Energy                            |           | 2470.00   | 16544.54 |
| 21 Dec 2014              | BACS             | Various Payment                       |           | 10,526.40 | 14074.54 |
| 21 Dec 2014              | BACS             | HMRC                                  |           | 1,000.00  | 3548.14  |
| 21 Dec 2014              | DD               | DVLA                                  |           | 280.00    | 2548.14  |
| Balance Received Forward |                  |                                       |           |           |          |

## Example Poor Recommendation Letter

January 12, 2024

Dear Grant Committee,

I am writing to request support for WKCF and our Jumpstart program. We can attest to the need for this resource for area nonprofits. The team at Bonterra understands the fundraising challenges that nonprofits we serve face every day.

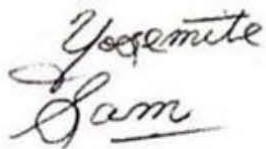
The Jumpstart program has the potential to make a real difference for area nonprofits. By providing one-on-one coaching and personalized fundraising tactics, this project will provide critical support to those in our community who are most in need.

I believe that WKCF is uniquely positioned to execute this project with excellence. The expertise of our staff, their compassion, and dedication to area nonprofits is unparalleled.

I am proud to support the WKCF and their efforts to make our community a better place. I hope that you will join me and the rest of the WKCF Board in supporting this important project.

Thank you for your consideration.

Sincerely,

A handwritten signature in cursive script that reads "Yosemite Sam". The signature is written in black ink and is positioned below the word "Sincerely,".

Yosemite Sam  
WKCF Chairman



INTERNAL REVENUE SERVICE  
DISTRICT DIRECTOR  
1100 COMMERCE STREET  
DALLAS, TX 75242-0000

DEPARTMENT OF THE TREASURY

Date: SEP 20 1996

WESTERN KANSAS COMMUNITY FOUNDATION  
P. O. BOX 1452  
GARDEN CITY, KS 67846

Employer Identification Number:  
48-1184667  
Case Number:  
756228029  
Contact Person:  
ANNETTE SMITH  
Contact Telephone Number:  
(214) 767-6023  
Accounting Period Ending:  
December 31  
Foundation Status Classification:  
509(a)(1)  
Advance Ruling Period Begins:  
May 24, 1996  
Advance Ruling Period Ends:  
December 31, 2000  
Addendum Applies:  
No

Dear Applicant:

Based on information you supplied, and assuming your operations will be as stated in your application for recognition of exemption, we have determined you are exempt from federal income tax under section 501(a) of the Internal Revenue Code as an organization described in section 501(c)(3).

Because you are a newly created organization, we are not now making a final determination of your foundation status under section 509(a) of the Code. However, we have determined that you can reasonably expect to be a publicly supported organization described in sections 509(a)(1) and 170(b)(1)(A)(vi).

Accordingly, during an advance ruling period you will be treated as a publicly supported organization, and not as a private foundation. This advance ruling period begins and ends on the dates shown above.

Within 90 days after the end of your advance ruling period, you must send us the information needed to determine whether you have met the requirements of the applicable support test during the advance ruling period. If you establish that you have been a publicly supported organization, we will classify you as a section 509(a)(1) or 509(a)(2) organization as long as you continue to meet the requirements of the applicable support test. If you do not meet the public support requirements during the advance ruling period, we will classify you as a private foundation for future periods. Also, if we classify you as a private foundation, we will treat you as a private foundation from your beginning date for purposes of section 507(d) and 4940.

Grantors and contributors may rely on our determination that you are not a private foundation until 90 days after the end of your advance ruling period. If you send us the required information within the 90 days, grantors and contributors may continue to rely on the advance determination until we make final determination of your foundation status.

If we publish a notice in the Internal Revenue Bulletin stating that we