

## TEXAS HISTORICAL FOUNDATION GRANT APPLICATION

The Texas Historical Foundation considers proposals for the following types of projects: historic property restoration, event or program promoting Texas history to the general public, preservation of artifacts or archival materials, Texas history education in classrooms, and archeological projects.

## Grant requests in the range of \$1,000 to \$5,000 are suggested.

NOTE: <u>THF will not consider funding requests for capital campaigns, general operating expenses, or</u> <u>underwriting fundraising events</u>. <u>Applicants who have recently received a grant from the Texas Historical</u> <u>Foundation must wait a minimum of one year between grant requests</u>.

Grant applications are due via email by 5:00pm on the deadline date. <u>Hard-copy applications are</u> <u>no longer accepted</u>. Email: <u>grants@texashistoricalfoundation.org</u>

Please provide the following items with your THF grant application. **These forms must be submitted with your application to be considered complete.** 

## **ITEMS TO BE SUBMITTED:**

□ Completed and signed THF grant application and THF budget summary. Please submit these items in one pdf.

Please compile the following documents into a PDF file in the order listed below, clearly labeling each item wherever possible. Please do not combine this document with the completed application.

*If you must exceed the allotted space for a question, please attach your clearly labeled response in an additional page at the end of the completed application document.* 

- Copy of the current exemption letter from the Internal Revenue Service indicating 501(c)(3) status.
  *{Note: Applicant must have 501(c)(3) status to apply}*
- $\hfill\square$  Copy of articles of incorporation or constitution and by laws
- □ List of officers and directors
- □ Project timeline
- □ Up to 5 photographs

### FINANCIAL ITEMS TO BE SUBMITTED:

- □ Organization budgets of current and preceding fiscal year
- □ Detailed budget for this specific project
- □ Most recent audit report (if no audit report, then organization's most recent annual profit and loss statement may be substituted)

## **APPLICANT INFORMATION**

## **1. Organization Name:**

Physical Address:	City:
City Population:	Zip:
County:	County Population:
Telephone:	EIN:

If applicable, please include your social media sites so we can connect with you.

(Facebook, Instagram, Twitter, LinkedIn)

## 2. Grant Contact:

**Contact phone number:** 

Contact email address:

Mailing address (if different from physical address):

### 3. Please provide a brief history of the organization:

## 4. Are you currently a member of the Texas Historical Foundation? Yes No

If you are not a member of the Texas Historical Foundation, please consider joining the organization. Membership is not required, but a show of support for THF's mission and programs is appreciated. <u>https://texashistoricalfoundation.org/how-to-give/join-us.html</u>

## **INSTITUTIONAL INFORMATION**

Annual attendance:	Number served by project:
Days per week open to the public:	Year opened:

Number of paid staff members:

Full Time:
Part Time:
Number of Volunteers:

# **PROJECT INFORMATION**

1. A. Give a brief description of the project and explain how THF grant funds will be applied to the project budget.

B. <u>If the proposed project will preserve, restore, or rehabilitate a structure</u>, how does your organization plan to comply with the Secretary of Interior's Standards for the Treatment of Historic Properties? (Download the Standards a <u>https://www.nps.gov/tps/standards/treatment-guidelines-2017.pdf</u>

If applying for an architectural grant, please send pertinent photographs of all exterior sides (elevations) of the structure or relevant inside photos of the proposed work. No more than five images.

2. How will this project relate to Texas Historical Foundation's mission?

3. Who and how many will be served or will benefit from the project, and how will this be accomplished?

4. What is the project timeline and anticipated completion date?

5. If other groups will be participating in the project, list and explain their role or function.

Name of group/organization:

Description of role or function:

Name of group/organization:

Description of role or function:

Name of group/organization:

Description of role or function:

6. If consultants or contractors will be participating in the project, list and explain their role or function.

Name of consultant/contractor:	
Description of role or function:	

Name of consultant/contractor:	
Description of role or function:	

Name of consultant/contractor:	
Description of role or function:	

7. A. If your organization has received <u>past THF funding for the proposed project</u>, <u>such as a</u> <u>previous phase of a multi-phased effort or an annual/biannual event or heritage</u> <u>celebration</u>, please list that information below:

YEAR	AMOUNT RECEIVED	THF FUNDING WAS APPLIED TO			

## B. Please list below ALL past THF grants received by your organization for other projects,

**events, and/or celebrations**. If you recently received a grant from THF, there is a minimum of a one year waiting period between requests.

YEAR	AMOUNT RECEIVED	BRIEF DESCRIPTION OF PROJECT/EVENT			

8. If funding requests have been made to other organizations for this project, list below and indicate whether grant funds have been received or the proposal is pending a decision.

ORGANIZATION NAME	AMOUNT REQUESTED	<b>RECEIVED/PENDING/DENIED</b>

9. If your organization is planning fundraising efforts or campaigns to cover project costs in part, describe those and include in timeline attachment when applicable.

10. How will THF's support be acknowledged?

## **FINANCIAL INFORMATION**

#### **\*\*Please complete the THF Budget Summary (submit on one page only).** THIS DOCUMENT MUST BE COMPLETED, EVEN WHEN PROVIDING A DETAILED BUDGET.

Total cost of project:

Amount requested from Texas Historical Foundation:

*Note: Grant requests in the range of \$1,000 to \$5,000 are suggested.* **Matching funds (if applicable)** 

### **NAME/SIGNATURE OF AUTHORIZING OFFICIAL** (Electronic signature is acceptable)

Signature:

Name:

Date:

Title:

# **SAMPLE**

## THF BUDGET SUMMARY

INSTRUCTIONS: Please provide a general project description (examples: restoration/rehabilitation, special event/seminar, archeology, classroom/public education, artifact preservation/restoration, museum program/ exhibit) then fill in expenses and indicate where THF funds would be applied. Use blank spaces for expenses that fall outside of existing categories.

SUBMIT ON SINGLE PAGE ONLY

	Cost Sharing			
<b>Project Description:</b> 5fh]ZJVM/idfYgYfjUh]cb#fYghcfUh]cb	Cash	In -Kind	THF Funds	Totals*
1. Personnel				
2. Honoraria				
3. Travel				
4. Supplies				
5. Printing/Publication				
6. Promotion/Advertising				
7. Equipment				
8. Facilities Rental				
9. Labor				
10. Construction Materials				
11. Fixtures/Furnishings				
12. Consultant/Professional Fees	HIV			
<b>Other:</b> Please list any expenses that do not fit within the above categories.				
13. : ]`a ˈhfubgZYf. G, ˈubX %* a a	\$1,059.45		\$5,000.00	\$6,059.45
<b>14.</b> J]XYc'hfUbgZYf. Gcbm9=5>	\$706.50			\$706.50
15. G\]dd]b[ 'fc' J YbXcf	\$80.00			\$80.00
16.				
17.				
18.				
Total Projected Costs*	\$1,845.95		\$5,000.00	\$6,845.95

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15.				
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18.				
Total Projected Costs*				