Logo, company name



**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: THF will not consider funding requests for capital campaigns, general operating expenses, or underwriting fundraising events.*

*Applicants who have recently received a grant from the Texas Historical Foundation must wait a minimum of one year between grant requests.*

**Grant applications are due via email by 5:00pm on the deadline date. Hard copy applications are no longer accepted. Email:** [grants@texashistoricalfoundation.org](mailto:grants@texashistoricalfoundation.org)

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 two items in one pdf.

**The following items can be submitted separately or in one pdf. Do not include these items in the same pdf as the grant application and THF budget summary.**

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}***

Copy of articles of incorporation or constitution and bylaws

Listing of officers and directors

Photographs are helpful. When applicable, please include no more than five images

Project timeline

**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:** Click or tap here to enter text.

|  |  |
| --- | --- |
| **Physical Address:** Click or tap here to enter text. | **City:** Click or tap here to enter text. |
| **City Population:** Click or tap here to enter text. | **Zip:** Click or tap here to enter text. |
| **County:** Click or tap here to enter text. | **County Population:** Click or tap here to enter text. |
| **Telephone:** Click or tap here to enter text. | **EIN:** Click or tap here to enter text. |

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

*(Facebook, Instagram, Twitter, LinkedIn)*

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| Click or tap here to enter text. |

1. **Grant contact:** Click or tap here to enter text. **Contact phone number:** Click or tap here to enter text.

**Contact email address:** Click or tap here to enter text.

**Contact mailing address *(if different from physical address)*:** Click or tap here to enter text.

1. **Please provide a brief history of the organization:**

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| Click or tap here to enter text. |

1. **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.* [*https://texashistoricalfoundation.org/how-to-give/join-us.html*](https://texashistoricalfoundation.org/how-to-give/join-us.html)

**INSTITUTIONAL INFORMATION**

|  |  |
| --- | --- |
| **Annual attendance:** Click or tap here to enter text. | **Number served by project:** Click or tap here to enter text. |
| **Number of days per week open to the public:** Click or tap here to enter text. | **Year opened:** Click or tap here to enter text. |

**Number of paid staff members: Full time:** Click or tap here to enter text.

**Part time:** Click or tap here to enter text.

**Number of volunteers:** Click or tap here to enter text.

**PROJECT INFORMATION**

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

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| Click or tap here to enter text. |

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

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| Click or tap here to enter text. |

1. **How will this project relate to Texas Historical Foundation’s mission?**

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| Click or tap here to enter text. |

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

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| --- |
| Click or tap here to enter text. |

1. **What is the project timeline and anticipated completion date?**

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| --- |
| Click or tap here to enter text. |

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

|  |
| --- |
| **Name of group/organization:** Click or tap here to enter text. |
| **Description of role or function:** Click or tap here to enter text. |

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| **Name of group/organization:** Click or tap here to enter text. |
| **Description of role or function:** Click or tap here to enter text. |

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| **Name of group/organization:** Click or tap here to enter text. |
| **Description of role or function:** Click or tap here to enter text. |

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

|  |  |
| --- | --- |
| **Name of consultant/contractor:** | Click or tap here to enter text. |
| **Description of role or function:** | Click or tap here to enter text. |

|  |  |
| --- | --- |
| **Name of consultant/contractor:** | Click or tap here to enter text. |
| **Description of role or function:** | Click or tap here to enter text. |

|  |  |
| --- | --- |
| **Name of consultant/contractor:** | Click or tap here to enter text. |
| **Description of role or function:** | Click or tap here to enter text. |

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

|  |  |  |
| --- | --- | --- |
| **Year** | **Amount Received** | **THF funding was applied to:** |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
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| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |

**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 or event** |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
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| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |

1. **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│RECEIVED/PENDING/DENIED**

|  |  |  |
| --- | --- | --- |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
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1. **If your organization is planning fundraising efforts or campaigns to cover project costs in part, describe those and provide a timeline, when applicable**.

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| Click or tap here to enter text. |

1. **How will THF’s support be acknowledged?**

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| Click or tap here to enter text. |

**FINANCIAL INFORMATION**

**\*\*Please complete the THF Budget Summary (submit on one page only).**

**This document must be completed even when providing a detailed budget.**

1. **Total cost of project:** Click or tap here to enter text.
2. **Amount requested from Texas Historical Foundation:** Click or tap here to enter text.

***Note: Grant requests in the range of $1,000 to $5,000 are suggested.***

1. **Matching funds (if applicable)** Click or tap here to enter text.

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

**Name/Signature:** Click or tap here to enter text.

**Title:** Click or tap here to enter text.

**Date:** Click or tap here to enter text.

**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** | |  |  |
| **Project Description:** | **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 |  |  |  |  |
| **Other:** Please list any expenses that do not fit within the above categories. |  |  |  |  |
| 13. |  |  |  |  |
| 14. |  |  |  |  |
| 15. |  |  |  |  |
| 16. |  |  |  |  |
| 17. |  |  |  |  |
| 18. |  |  |  |  |
| **Total Projected Costs\*** |  |  |  |  |