STERLING -TURNER FOUNDATION
REQUIRED APPLICATION FORM 2027

Legal Name: *(as on determination letter)*

Name Doing Business As: *(if not legal name)*

Physical Address:

City: **State: Texas** **Zip:**

Mailing Address: *(if different from physical address)*

City: **State: Texas** **Zip:**

County office and fiscal management are located: *(please select county)*

Tom Green ☐ **Fort Bend** ☐ **Harris** ☐ **Kerr** ☐ **Travis** ☐

County/Counties services are provided: *(please select all appropriate counties)*

Tom Green ☐ **Fort Bend** ☐ **Harris** ☐ **Kerr** ☐ **Travis** ☐

CONTACT INFORMATION

Year organization founded: **Tax Year to be Funded:**

Contact name: *(include Title/Position)*

Telephone: **Extension:** **Fax:**

Email:

Fiscal Manager name: *(include Title/Position)*

Telephone: **Extension:** **Fax:**

Email:

Mailing Address: *(if different from physical address)*

Individual EIN: **Group EIN:**

If under a group ruling, name & address of Group holder: *(as found on IRS letter)*

REQUESTED INFORMATION

Requested Amount:

Briefly describe the need for funding from Sterling Turner Foundation:

MISSION STATEMENT ONLY

ORGANIZATION OPERATING EXPENSE

Total operating expense for year:
Total payroll & related expense:
Total receipts to date:
Emergency funds on hand:

Number of paid employees:
Number of clients served prior year:
Number of volunteers for prior year:
Number of volunteer hours for prior year:

PROJECT BUDGET INFORMATION

Total Cost:
Total Payroll & Related Expenses:
Receipts to date:

Number of volunteers:
Number of person served:

THREE HIGHEST PAID EMPLOYEES

Name & Title
Gross Earnings & Dollar Value of Benefits:
Name & Title:
Gross Earnings & Dollar Value of Benefits:
Name & Title:
Gross Earnings & Dollar Value of Benefits:

PRIOR YEAR'S RECEIPTS

% United Way
% Foundations/Corporations
% Governments Contracts
% Fees, Tuitions, dues & retail sales
(thrift store, ticket sales, gift shops, etc.)

% Church & other faith based organizations
% Earned Income *(investments, endowments, etc.)*
% Individual contributions
% Funds raised through events/galas

BOARD ACTIVITY

What percentage of your Board of Directors made a financial contribution to your organization during the last year? %

What percentage of your Board of Directors volunteered time and/or services to the organization beyond attending Board meetings last year? %



