The Ralph M. Parsons Foundation
Grant Proposal Application

Please note that this is a preview of the questions which are asked in our online Grant Proposal Application. To submit a Grant Proposal, you must first begin with a Letter of Inquiry. For more information, please visit www.rmpf.org.

Introduction

Please note that some of the application fields are pre-populated with information submitted through your Letter of Inquiry. You are welcome to review and edit these fields as needed.

Should you have any questions about completing your proposal, we encourage you to visit the FAQs page of our website (www.rmpf.org). As a reminder, your completed grant proposal must be received by the deadline that was sent to you via email. If it is received after this date, the Foundation will be unable to consider your request and your organization will be eligible to re-apply for funding in one year.

Helpful Tips

- Please limit your use of bullets and other formatting, as these features typically do not present correctly once the application is submitted.
- Save your work often while working so that information is not lost.
- Prepare answers ahead of time in a Word document and copy and paste as needed.
- You may view a "printer friendly" version of your application at any time by selecting that option in the upper-right corner of the screen.
- You may email a draft of the application by clicking on the option in the upper-right corner of the screen.
- Add mail@grantapplication.com to your safe senders list to ensure you receive all system communications.

Organization Information

General Information

Organization Name

Legal Name
Or fiscal sponsor, if applicable

Tax ID
Please format as follows: xx-xxxxxxx

Mailing Street Address

City

State

Zip Code

Website Address

Office Telephone
Please format as follows: xxx-xxx-xxxx

Office E-mail Address
E.g., info@yourorganization.org

Annual Operating Budget
Please enter your organization's total operating expenses for the most recently completed fiscal year

Contact Information

Organization Primary Contact (President/CEO/Executive Director)
Prefix

First Name

Last Name

Suffix

Title

Office Phone

Extension

E-mail

Request Primary Contact (If same as above, please check box below and do not enter information a second time.)
☐ Same as Organization Primary Contact

Prefix

First Name

Last Name

Suffix

Title

Office Phone

Extension

E-mail

Organizational Overview

Organizational Overview

Concise narrative of your organization's history, including year founded
(Approximately one half type-written page or 250 words)

Concise summary of current programs, activities and accomplishments of organization
(Approximately one half type-written page or 250 words)

Target population and geographic area served across all programs
(Approximately one half type-written page or 250 words)

Proposed Grant Activity

Request Information

Amount requested

Intended purpose/project title
A short phrase, such as "for general support of arts education for children" or "to construct a new science building"

Type of support requested
Please select from the following options:

- *General support is unrestricted funding.*
- *Capital support can fund construction, renovation or equipment.*
- *Program support can fund specific projects/programs, salaries, or leadership development.*

Problem statement
Statement of needs/problems to be addressed. (Approximately one type-written page or 500 words)

Description of activity for which grant funds are being sought
(Approximately one type-written page or 500 words)

Goals of proposed activity: anticipated outputs, outcomes, and impact
(Approximately one type-written page or 500 words)

Plans for evaluating the impact or success of the proposed activity
(Approximately one type-written page or 500 words)

Plans for administration and operation of proposed activity
(Approximately one type-written page or 500 words)

Timeline for carrying out proposed activity
If your timeline is best presented in graphic format, please type "See attachment" and then upload your timeline in the appropriate section under Attachments

Please select the age ranges for the individuals this activity would serve. Select all that apply.

- ☐ Birth to 5 years of age
- ☐ 6 to 12 years of age
- ☐ 13 to 17 years of age
- ☐ 18 to 24 years of age
- ☐ 25 to 64 years of age
- ☐ 65+ years of age

Please select the Service Planning Areas (SPAs) of Los Angeles County that this activity would serve. Select all that apply.

- ☐ SPA 1
- ☐ SPA 2
- ☐ SPA 3
- ☐ SPA 4
- ☐ SPA 5
- ☐ SPA 6
- ☐ SPA 7
- ☐ SPA 8

Attachments

Required Attachments

There is no need to re-submit any materials, e.g. financial documents, that accompanied your Letter of Inquiry, unless they are more recent than those previously submitted.

After you choose your file, immediately click "Upload" to attach the document to your application. Collectively, your attachments are limited to 25MB. Please contact us if your files are too large for this application.

1a. Board of Directors
Names of Board of Directors and their business affiliations

2a. IRS Form 990
IRS Form 990 for most recent fiscal year, with all schedules/attachments, including Schedule B

3a. Audited Financial Statement
Audited financial statement for the most recent fiscal year (organizations with less than $1 million in revenue or expenses may submit an accountant's review or compilation, or an in-house financial statement)

4. Biographies
Resume or bio of executive director/chief executive officer and key staff involved in the scope of work

5. Supporters
List of foundation supporters, including amounts contributed, for the current and most recent fiscal years

6. Board Meeting Schedule
Frequency of Board meetings and description of standing committees, if any

7. IRS Determination Letter
Current/final 501(c)3 IRS determination letter

8. Operating Budget
Current operating budget for the organization as a whole, with revenues and expenses itemized

9. Year-to-Date Financial Statements
Year-to-date statement of financial position (balance sheet) and statement of activities (income and expense statement)

10. Fiscal Sponsorship Acknowledgment Letter
If applicable

11. Itemized Project Budget
Please include confirmed and prospective sources of income. For capital and project-specific requests only, not for general support requests

12. Organization Logo
If you are awarded a grant, this logo may be featured on our website

Optional Attachments
Please use discretion in limiting additional attachments.

13. Timeline
(If not included in Proposed Grant Activity section on the previous tab)

14. Letters of support

15a. Brochures, studies, newspaper articles, or other descriptive information

15b. Brochures, studies, newspaper articles, or other descriptive information

16. Other
Please use this for any additional item or message that you have not been able to include elsewhere.

Feedback & Next Steps

We Welcome Your Feedback (Optional)

Overall, please rate your experience with our online full proposal process.

Is there any other feedback that you would like to share?

Please review your completed application before submitting. You will receive an automated confirmation email upon submission, which will include a copy of your completed application. Please allow up to four months before a funding decision is made, due to the large number of requests awaiting consideration. During the review process, you may be contacted for further information and/or a site visit may be requested.

Thank you again for your interest. We look forward to reviewing your proposal.