



THE LUTHERAN
FOUNDATION

Soli Deo Gloria
TO GOD ALONE BE THE GLORY

Regular Grant Application For Non-profit Organizations (Other Than Member Lutheran Congregations)

Thank you for your interest in The Lutheran Foundation. If you are considering submitting a grant application to The Lutheran Foundation we strongly encourage you to call well in advance of a grant cycle deadline. We can answer any questions you have about applying and can also assist you in determining which grant cycle the Foundation may consider your request.

Clearly label all exhibits. Print on one side only, then paper clip pages together. Do not send applications and/or exhibits that have been stapled, three-hole punched, taped, bound or provided in any other format other than what is outlined in these instructions. Please do not send videos, photos or DVDs.

An application is considered complete when the application and exhibits are received and postmarked by the dates listed below or delivered to the Foundation no later than 3:00 p.m.

If an application deadline is on a weekend, the application must be postmarked by the deadline date or delivered to the Foundation no later than 3:00 p.m. on Friday.

Focus Area/Regular Grant Cycles	Application Deadline	Decision Date
Building a Healthier Community	March 1	End of June
Community Outreach	August 1	Early December
Lutheran Education	December 1	End of March

If you have any questions please contact the Foundation at 260.458.2112 or email grants@thelutheranfoundation.org.

Submit one copy of completed application to:

The Lutheran Foundation
3024 Fairfield Avenue
Fort Wayne, IN 46807

In addition, email the application and exhibits to grants@thelutheranfoundation.org.

Organization's Legal Name		
Street Address	City, State	Zip
Website	Phone	County
Organization's Primary Contact and Title		
Brief Description of Organization and Mission		
Contact Person for Grant and Title		
Email	Phone	
Purpose of Request		
This grant request is for: 1-year 2-years 3-years		Amount Requested \$
This grant request is for: a new project/program operational support an existing program a capital project expansion of an existing program		How many clients will this project/program serve?
The amount requested is what percentage of the budget? • If for operational support – percentage of total operation budget • If for project/program or capital – percentage of total project/program or capital budget		%
Year Organization was Founded	Fiscal Year (mm/dd-mm/dd)	Current Operating Budget \$
# of Clients Served per Year	# of Staff (full-time equivalents)	# of Volunteers

Working Mission

The Lutheran Foundation seeks to make Christ known by strengthening Lutheran congregations and ministries and to demonstrate His compassion by supporting social ministries that nurture body, mind and spirit.

Does your organization have a formal statement of your faith relationship with your clients found either in your mission statement or your strategic plan?

- Yes
- No

If yes, please state where it is found and provide your organization's formal statement of faith here.

Is your organization overtly faith-based?

- Yes
- No

If yes, explain how your organization shares that Christian faith in day-to-day interactions with clients.

In two sentences, explain how the funding you are seeking will further The Lutheran Foundation's working mission?

1.

2.

What critical need will be fulfilled by the program and what are the goals of the work to be funded (immediate and long-term)?

What is the implementation plan to achieve the goals?

What is the impact on the communities involved; what will have changed as a result of the grant?

List any other organizations in the community that are also working on the same issues and how you are coordinating with them.

How will you measure these changes?

Tell us how you will determine whether or not you have been successful.

What is your timetable for implementation?

List secured sources of funding for your project/program (list source and amount).

List pending sources of funding for your project/program (list source and amount).

If funded, what plans do you have for the future financial needs of the project/program?

Additional comments or information that may help us understand why The Lutheran Foundation should consider your request.

Total Sources of Income for current fiscal year	% of Income (should total 100%)
1.	
2.	
3.	
4.	
5.	
All Others	
	%

Required Signatures:

CEO, President, Executive Director

Printed Name

Board Chairman or Board President

Printed Name

Exhibits

Clearly label all exhibits. Print on one side only, then paper clip pages together. Do not send applications and/or exhibits that have been stapled, three-hole punched, taped, bound or provided in any other format other than what is outlined in these instructions. Please do not send videos, photos or DVDs. Include the following exhibits with the application you have just completed.

Include the following exhibits with the application you have just completed:

1. IRS letter determining 501(c)(3) nonprofit status.
2. Current board of directors listing business addresses and occupations (please indicate all officers). Also list how frequently your Board of Directors meets.
3. A complete copy of your organization's most recent federal tax return (IRS Form 990).
4. A complete copy of your organization's most recent audit report including a copy of the management letter. Please provide an explanation if an audit and/or management letter is not attached.
5. A copy of your organization's general operating budget for your **current** fiscal year.
6. Discuss your income and expense trends. Please elaborate on the factors impacting these increase(s) or decrease(s).

If you reported an operating deficit for the most recent year, please discuss the key factors contributing to the deficit. Please explain what actions the board of directors and management has taken to address the deficit.

7. A copy of your organization's proposed general operating budget for your future fiscal year for which you have requested funding under this grant application.
8. The project/program or capital budget including income and expenses.
9. List sources of income for your **future** fiscal year operating budget. Use same form found on page 4.
10. Please list the amount of any long-term debt or mortgage and corresponding monthly payment.
11. Please list the amount of each endowment your organization has and any restrictions.