



Fort Riley Spouses Club
P.O. Box 2254
Fort Riley, KS 66442
www.fortrileyspousesclub.org

2019–2020 Community Grant Application

Name of Organization: _____

Tax ID Number, if applicable: _____

Point of Contact: _____

Telephone Number: _____ Fax: _____

Email: _____ Website: _____

Mailing Address: _____

Check to be issued to: _____



All applying organizations must have an organization bank account. Checks will only be written to organization accounts. Personal accounts are not allowed.

I. Organization Details

Please provide an overview of the purpose of your organization and how it contributes to our community. Provide examples where possible.

What is the total number of individuals or families your organization served in 2019? _____


What percentage of military families were served by your organization in 2019? _____

Please describe any anticipated changes to these numbers in 2020.

II. Grant Request Details

Amount Requested: _____

Please state the specific ways in which the funds will be used, including the quantity and cost of materials, equipment, or services (e.g., purchase 200 meal kits for \$5 each; basic school supplies for 300 children at \$20 each, etc.)

-  Organizations awarded FRSC grants will be required to provide receipts or records as proof that money was spent in accordance with their application request. Organizations will need to provide that information by 31 March of the following year. Failure to do so will result in the organization being ineligible to receive future grants from the FRSC. With questions or concerns, please contact Chrissie Angell at president@fortrileyspousesclub.org.

III. Organizational Funds

If you received a grant from the FRSC in 2019, please list the amount you received and how it was used.

Please provide the following information from your 2019 nonprofit tax forms (IRS Form 990). If you do not file an IRS form 990, please provide information to the best of your ability or explain below.

Total contributions and grants you received (line 8 of Form 990): _____

Revenue less expenses (line 19 of Form 990): _____

Net assets or fund balances (line 22 of Form 990): _____

What additional sources of funding are available for your organization?

Signature: _____ Date: _____

By signing this application, I understand that any money awarded is to be used solely for the purpose listed above.



Please mail your completed application, postmarked no later than Wednesday April 01, 2020, to: Fort Riley Spouses Club, PO Box 2254, Fort Riley, KS 66442
Email submissions must be sent no later than 11:59:59 PM CDT on April 01, 2020.



Any exception to policies must be reviewed and approved by majority vote of the Fort Riley Spouses Club Community Assistance Grant Committee.