

# YELL Grant Application

- P.O. Box 651 Bryan, Ohio 43506
- Phone: 419-633-1156
- Web: [bryanareafoundation.org](http://bryanareafoundation.org)
- Email: [YELL@bryanareafoundation.org](mailto:YELL@bryanareafoundation.org)

## Application Information:

Organization Name:

Mailing Address:

City, State, Zip:

Phone Number:

Web Address:

Contact Person/Title:

Email:

## Project Information:

Summary of Use:

Grant Amount Requested:

Total Cost:

% of Total Cost:

A grant from YELL would?     Advance animal welfare             Increase educational opportunities  
    Promote healthy lifestyles             Improve financial well-being

Is your organization a 501(c) (3) tax-exempt entity?     Yes     No

Please attach IRS Determination Letter to application.

Please provide a brief statement of the mission, objectives, and history of your organization:

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Briefly tell why your organization is requesting this grant and provide any documentation as support:

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How does your organization impact the Bryan community? \_\_\_\_\_

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Do you plan to publicly acknowledge YELL? How? \_\_\_\_\_

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What is the approximate number of individuals/families served by your organization?

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Is there any further information pertinent to this grant request? \_\_\_\_\_

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## **FINANCIAL INFORMATION**

Please submit your organization's current financial statements dated no earlier than 3 months from the date of the grant application. For example, if you submit your BAF application on April 1, your financial statements must be dated no earlier than January 1.

## **990 INFORMATION**

Federal law requires all 501(c) (3) organizations to submit either a 990, 990-EZ, or a 990-N on an annual basis. To demonstrate that your organization is in compliance with this law, the Bryan Area Foundation/YELL requires that each applicant submit a copy of their latest return.

## **REQUESTED SIGNATURES**

**To be signed by the organization's Board President and by the individual to whom future questions and correspondence may be addressed with regard to this application:**

\_\_\_\_\_  
President (or equivalent)                      Date

\_\_\_\_\_  
Contact Person                                      Date