



## Preview Form

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This is an example of the application questions with which you will be presented. It is recommended that you compose the answers to the paragraph questions in a word processing program and then cut and paste that text into the online application.

### Contact Information

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**Please update your contact information before submitting your proposal.**

If no contact exists please fill in the appropriate fields.

If one or more contacts already exist, please decide which contact is active for this request. Click on the link to the contact name to verify/update information in the contact profile. Once complete, click 'Save and Proceed' then check the checkbox next to the contact name to proceed with your application.

- |  |   |
|--|---|
| *Salutation<br>(Text)(100 character maximum)   | Instructions:<br><input type="checkbox"/> |
| *First Name<br>(Text)(40 character maximum)  | Instructions:<br><input type="checkbox"/> |
| *Last Name<br>(Text)(40 character maximum)   | Instructions:<br><input type="checkbox"/> |
| *Title<br>(Text)(50 character maximum)   | Instructions:<br><input type="checkbox"/> |
| *Address<br>(Text)(100 character maximum)  | Instructions:<br><input type="checkbox"/> |
| *City<br>(Text)(50 character maximum)  | Instructions:<br><input type="checkbox"/> |
| *State<br>(Single-Select List) <ul style="list-style-type: none"><li>• Massachusetts</li></ul> | Instructions:<br><input type="checkbox"/> |
| *Zip<br>(Text)(20 character maximum)   | Instructions:<br><input type="checkbox"/> |
| *Telephone<br>(Text)(30 character maximum)   | Instructions:<br><input type="checkbox"/> |
| *Telephone Extension<br>(Text)(500 character maximum)  | Instructions:<br><input type="checkbox"/> |
| *E-mail Address<br>(Text)(100 character maximum)   | Instructions:<br><input type="checkbox"/> |

## Organization Information

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**\*Legal Name**  
(Text)(255 character maximum) Instructions:

**\*Address**  
(Text)(100 character maximum) Instructions:

**\*City**  
(Text)(50 character maximum) Instructions:

**\*State**  
(Single-Select List) Instructions:  
• Massachusetts

**\*Zip**  
(Text)(20 character maximum) Instructions:

**\*Telephone**  
(Text)(30 character maximum) Instructions:

**\*Fax**  
(Text)(30 character maximum) Instructions:

**\*Executive Director Name**  
(Text)(500 character maximum) Instructions:

**\*Executive Director Telephone**  
(Text)(500 character maximum) Instructions:

**\*Executive Director Email Address**  
(Text)(500 character maximum) Instructions:

**Website Address**  
(Text)(100 character maximum) Instructions:

**\*Brief description of your organization and provide date founded**  
(Paragraph)(1200 character maximum) Instructions:

## Project Information

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As concisely and clearly as possible, please answer the following questions below.

**\*Application Date**  
(Date) Instructions:

**\*Project Title**  
(Text)(255 character maximum) Instructions:

**\*Amount requested**  
(Currency)(20 character maximum) Instructions:

**\*Year and Amount of last grant awarded from Amelia Peabody Charitable Fund**  
(Paragraph)(500 character maximum) Instructions:  
 Please provide the year, amount and purpose of the last grant awarded by Amelia Peabody Charitable Fund

**\*Briefly describe the project and how the funds will be allocated**  
(Paragraph)(250 character maximum)

Instructions:

In one or two sentences describe the purpose of the project you are requesting funding.

**\*Location of Project**  
(Text)(500 character maximum)

Instructions:

Location of the project for which you are requesting funding

**\*Are there other organizations in your geographic area providing similar services as your organization?**  
(Yes/No)

Instructions:

Other organizations - Please list and explain  
(Paragraph)(4000 character maximum)

Instructions:

**\*How will you measure the Project's success?**  
(Paragraph)(2000 character maximum)

Instructions:

**\*Description of Future Plans**  
(Paragraph)(2000 character maximum)

Instructions:

What is your plan for continuing support of your capital project objectives after funding from the Amelia Peabody Charitable Fund ends?

**\*How did you learn about the Amelia Peabody Charitable Fund?**  
(Checkbox List)

Instructions:

- Prior History
- Research
- APCF Outreach

Please check off the selection(s) that apply to your organization:

**\*In one or two sentences please explain how you learned about the Amelia Peabody Charitable Fund.**  
(Paragraph)(1000 character maximum)

Instructions:

**\*Date Organization Founded**  
(Text)(500 character maximum)

Instructions:

When was your organization founded

**\*Do you own or lease your space?**  
(Single-Select List)

- Own
- Lease

Instructions:

Please explain the terms of your lease.  
(Paragraph)(2000 character maximum)

Instructions:

**\*Total Budget for this Project**  
(Currency)(20 character maximum)

Instructions:

Your committed sources of funding and your anticipated sources of funding should equal your project budget

\*Is this a construction or renovation project requiring permit(s)?  
(Yes/No)

Instructions:

Construction Project - Do you have your permits?  
Please explain.  
(Paragraph)(4000 character maximum)

Instructions:

\*Who will benefit from this project?  
(Paragraph)(500 character maximum)

Instructions:

\*Project Start Date  
(Date)

Instructions:

Project Start Date

\*Project End Date  
(Date)

Instructions:

Project End Date

Instructions:

Please list the names of other funding organizations and/or foundations and the dollar amounts received to-date for this project. Individual contributors need not be named, but please provide dollar amounts received. Please also list the total dollar amount.

\*Committed Sources of Funding for this Project  
(Paragraph)(2000 character maximum)

**For example, please list in columns in the following format:**

**\$Dollar Amount, Organization Name**

**\$Dollar Amount, Organization Name**

**\$TOTAL AMOUNT**

Instructions:

Please enter the sum of the committed sources of funding listed above. Please also list the total dollar amount.

\*Total Committed Sources of Funding  
(Currency)(20 character maximum)

**For example, please list in columns in the following format:**

**\$Dollar Amount, Organization Name**

**\$Dollar Amount, Organization Name**

**\$TOTAL AMOUNT**

Instructions:

Please list all sources of funding approached for this project. Be sure to include the names of the funding organizations and/or foundations and the dollar amounts requested from each. Please also list the total dollar amount.

\*Anticipated Sources of Funding for this Project  
(Paragraph)(2000 character maximum)

**For example, please list in columns in the following format:**

**\$Dollar Amount, Organization Name**

**\$Dollar Amount, Organization Name**

**\$TOTAL AMOUNT**

***PLEASE INCLUDE THIS REQUEST IN YOUR TOTALS***

Instructions:

\*Total Anticipated Sources of Funding  
(Currency)(20 character maximum)

Please enter the sum of the anticipated sources of funding listed above.  
Please also list the total dollar amount.

**For example, please list in columns in the following format:**

**\$Dollar Amount, Organization Name**

**\$Dollar Amount, Organization Name**

**\$TOTAL AMOUNT**

***PLEASE INCLUDE THIS PROPOSAL REQUEST  
IN THE TOTAL***

\*Are members of your organization's Board financially contributing to this project?  
(Yes/No)

Instructions:

How much?  
(Currency)(20 character maximum)

Instructions:

\*What percentage of board support is contributed annually?  
(Number)(15 character maximum)

Instructions:

Please explain.  
(Paragraph)(2000 character maximum)

Instructions:

Instructions:

Please list the names and affiliations

\*Board of Directors/Trustees  
(User-Defined List)

**For example, please list in columns in the following format:**

**Name, Affiliation**

**Name, Affiliation**

\*Executive Director Name and Contact Information  
(Paragraph)(1000 character maximum)

Instructions:

Please provide the name and contact information for your Executive Director

## Upload

\*IRS Letter  
(File Upload)File Upload; 10485760 byte limit

Instructions:

Please upload a copy of your determination letter from the IRS, classifying your organization as a non-profit organization under Section 501(c)(3) and as a public charity under Section 509(a)(1) or 509 (a)(2) of the Internal Revenue Code.

Instructions:

Upload a copy of your letter, dated and signed by the director on your letterhead, affirming that your organization's "determination letter from the IRS continues in full force and effect and that a grant from the Amelia Peabody Charitable Fund as applied would not adversely affect your public charity status."

\*Letter From Director  
(File Upload)File Upload; 10485760 byte limit

\*990 and Schedule A  
(File Upload)File Upload; 10485760 byte limit

Instructions:

Copy of your most recent IRS Form 990 and Schedule A

\*Audited Financial Statements  
(File Upload)File Upload; 10485760 byte limit

Instructions:

Audited financial statement clearly showing all income sources and expenses for your organization for the most recent tax year

\*Project / Organizational Budget  
(File Upload)File Upload; 10485760 byte limit

Instructions:

Please [click here](#) to download the PROJECT / ORGANIZATIONAL Budget from Philanthropy MA Common Proposal Form. Please be sure to completely fill out this form, especially be sure to fill out the first column entitled "This Request" to include a breakdown of expenses you are requesting. Once completed, please upload to this required field.

\*Project Budget and Quotes for Capital Purchases  
(File Upload)File Upload; 10485760 byte limit

Instructions:

Please provide a detailed project budget of your request and include any quotes for capital purchases.