

**ARKANSAS COMMUNITY FOUNDATION
CONWAY COUNTY LEGAL BEVERAGE ASSOCIATION FUND
APPLICATION**

General Guidelines:

Conway County Legal Beverage Association Fund will distribute \$50,000 each year in Conway County. Approximately \$49,000 is available for grants to community organizations; \$1,000 is earmarked for administrative expenses.

The Advisory Board to the fund is interested in requests which meet pressing needs in Conway County, and which leverage other funds. The Board prefers providing matching funds, challenge grants, projects which make innovative use of funding, or which serve many people. **Eligible recipients are 501©3 nonprofits and public agencies.**

The Fund is managed by Arkansas Community Foundation and grantees must meet the requirements of the foundation for support. A copy of any report or publication produced with support from the fund should be provided to Arkansas Community Foundation at the end of the project. **Project reports are due from all organizations receiving grants.** The application, including attachments, should not exceed 5 pages. *Please don't staple the application but rather use paper clips or binders.*

Name of Organization: _____

Address: _____

City: _____ Zip: _____

Phone: _____ FEIN*: _____

(*A federal employer identification number is now required.)

Contact Person: _____ Telephone: _____

Email Address: _____

Project Title: _____

Description of the Project: _____

Amount Requested: _____ Total Budget for Project: _____

Project will begin on: _____ Project will end on: _____

Background information on the organization: _____

Is the applicant a 501©3 tax-exempt organization or public agency? _____ Please attach **IRS letter on status** if you have not received a grant in the past. Only applicants with official IRS status as ©3 organizations or public agencies are eligible for grants.

What will be accomplished by the project? Please list specific objectives including number of people to be served:

What activities will you undertake to reach your objectives:

What other sources of support are available for the project? _____

Project Budget

Item or Category		Amount	Amount requested from CCLBA Fund
TOTAL			

If you do not receive the amount requested from the Legal Beverage Fund, will you be able to complete all or part of your project? _____ Please comment: _____

Please attach the following:

- A list of the organization's board of directors with their addresses.
- A copy of your 501©3 IRS Determination Letter; if applicable.

Proposals should be mailed or hand-delivered (no faxes) by May 1 to:

Conway County Legal Beverage Association Fund
c/o Arkansas Community Foundation
5 Allied Drive, Suite 5110
Little Rock, AR 72202