

**STERLING-TURNER FOUNDATION  
REQUIRED APPLICATION FORM 2018**

**Legal Name (as found on determination letter):**

**Name Doing Business As (if different from legal name):**

**Physical Address:**

**City:** \_\_\_\_\_ **State:** Texas **Zip code:** \_\_\_\_\_

**Mailing Address (if different from physical address):**

**City:** \_\_\_\_\_ **State:** Texas **Zip code:** \_\_\_\_\_

**County office/ services and fiscal management are located**

**Website:**

**Year organization was founded:** \_\_\_\_\_ **Tax year:** \_\_\_\_\_

**Contact name:**

**Title or Position:**

**Telephone:**

**Fax:**

**Contact email:**

**Tax ID/EIN of Individual Holder:**

**If under a group ruling, name of group holder:**

**Tax ID/EIN of Group Holder:**

**Mission Statement of organization requesting:**

**REQUEST INFORMATION**

**Briefly describe need for funding from Sterling-Turner Foundation:**

**Requested Amount: \$**

### **ORGANIZATION OPERATING EXPENSES**

**Total estimated expenses of organization for year requesting:**

**Total payroll and related expenses for year:**

**Number of paid employees:**

**Total receipts for year at the time of submission:**

**Number of clients served prior year:**

**Emergency funding on hand:**

**Number of volunteers for prior year:**

**Number of volunteer hours for prior year:**

### **THREE HIGHEST PAID EMPLOYEES**

**Name & Title:**

**Gross Earnings & Dollar Value of Benefits:**

**Name & Title:**

**Gross Earnings & Dollar Value of Benefits:**

**Name & Title:**

**Gross Earnings & Dollar Value of Benefits:**

### **PRIOR YEAR'S RECEIPTS**

**% United Way**

**% Foundations/Corporations**

**% Government Contracts**

**% Fees, tuition, dues & retail sales (thrift stores,  
ticket sales, gift shops, etc.)**

**% Churches & other faith based organizations**

**% Earned income (investments, endowments, etc.)**

**% Individual contributions**

**% Funds raised through events/galas**

### **PROJECT BUDGET INFORMATION**

**Total cost:**

**Total payroll related expenses:**

**Number of persons served:**

**Number of volunteers:**

**Receipts to date:**

**Number of volunteer hours:**

### **BOARD ACTIVITY**

**What percentage of your Board of Directors made a financial contribution to your organization during the last year? %**

**What percentage of your Board of Directors volunteered time and/or services to the organization beyond attending Board meetings last year? %**