THE BARGAIN BOX

546 William Hilton Parkway Hilton Head Island, SC 29928

GRANT APPLICATION -2024

Name of Organization:	
Mailing Address:	
Physical Address:	
	E-Mail:
Contact Person:	
	Contact E-Mail:
County(s) where services are provided:	
Are you affiliated with any other organization(s)? Ye	s No
If "Yes", please list other organizations:	
Amount Requested: \$	
Brief Statement of purpose for requested funding:	
Number of people who will directly benefit from fund	ding (est):

Do you receive federal/state/county/local funds? Yes	No
If "Yes", please specify agency(s):	
Please list <u>ALL</u> other funding sources:	

Other Documentation to be Provided:

List of Current Board of Trustees/Directors and Principal Officers

- Proof of Federal Income Tax Exemption status as a 501(c)(3) organization granted by the Department of the Treasury, district director of the Internal Revenue Service.
- _____ Financial Statement for the prior fiscal year showing actual income received and expenses.
- _____Budget for current fiscal year.
- _____Budget for next fiscal year (if available).
- Brief history of your organization, the scope of its activities, and a **detailed description** of the proposed use of the requested funds.

This application and above documentation must be provided **BOTH** electronically/digitally **AND** in hard copy form.

Completed application must be received by June 1, 2024.

Grant decisions will be made at the Bargain Box Board meeting in November. Notice of the decisions of the Board with regard to grant requests will be mailed to grant applicants during the first week of December.

If you have any questions, please contact Grants Chair, Deb Bonser at <u>grants@thebargainboxofhiltonhead.org</u>, or by phone at (301) 580-9026.