



Eligibility Quiz

Apply

* Have you reviewed our guidelines for applying for a grant?

* Please select the classification that best describes your organization:

* For organizations serving the Metro Denver area, is this funding request for healthcare, primary or secondary education, or a capital project?

* Is this funding request for a special event, promotion, or conference?

* Is your organization's annual operating budget \$10 million or more?

* Is this funding request for an arts and culture program or organization?

* Which best describes your organization's current leadership:

* Is this grant for programming, general operating support or services provided in Colorado?

* Have you received funding from the Foundation in BOTH 2022 AND 2023 calendar years?

* Have you submitted a final report for the last grant received from the Foundation?

Next

Instructions for Starting an Application

- Click on the **Apply** button to start a new application.
- If you have already started an application, click on the **My Grant Applications and LOIs** tab across the top to find your in-progress application.
- To preview a copy of our grant application, click [here](#)

Questions? Contact Megan Maes, Grants Manager, at info@anschutzfamily.org or 303-293-2338



Instructions for Submitting Your Application

- **Application Preview:** To preview a copy of our grant application, click [here](#)
- **Leadership Contact Details:** Click the Leadership Contact Details tab to add details for your organization's CEO/Executive Director. This is required in order to submit your application.
- **Save and Return:** To save your application and finish later, click the save button and exit your web browser.
- **Attachments:** Please upload your attachments as the final step of your application submission process. If you use the save and return feature, your attachments WILL NOT be saved.

Apply **Leadership Contact Details**

Please provide the details for your organization's CEO or Executive Director. This information is **Required** in order to submit a grant application.

- Click the **'New'** button below.
- On the new Funding Request Role screen: Type the name of your CEO or Executive Director in the contact field search box. If they do not exist, please click the **+ New Contact** button to create a new contact.
- Please complete all fields. Once the new contact is created, set the role to **'CEO/Executive Director'** and status to **'Current'** and click **'Save'**.
- If you are a CEO/Executive Director applying, add yourself as the contact.
- Once your CEO/Executive Director contact has been added, click the **Apply** tab to continue with your grant application.

 Funding Request Roles (0) [New](#)

Sections

Organization Details

Proposal Summary

Financial Information

Attachments

Review and Submit

Organization Information

Organizational Details

EIN:

* Legal Name of Organization as noted on IRS Determination Letter

* DBA. If no DBA (doing business as), re-enter Legal Name. For organizations with a fiscal sponsor, enter your project name

* Tax Exemption Status

Using a Fiscal Sponsor

Organization Mailing Address

* Mailing Street

* Mailing City

* Mailing State

Colorado

* Mailing Zip Code

Physical Address is the Same as Mailing Address

Organization Physical Address

* Physical Street

* Physical City

* Physical State

Colorado

* Physical Zip Code

[THIS SECTION FOR FISCALLY-SPONSORED PROJECTS ONLY]

Fiscal Sponsor Address

* Fiscal Sponsor Name

* Fiscal Sponsor EIN

* Fiscal Sponsor Mailing Street

* Fiscal Sponsor Mailing City

* Fiscal Sponsor Mailing State

* Fiscal Sponsor Mailing Zip Code

Organizational Details

* County Where Organization is Headquartered

* Organization Phone

* Organization Email

Organization Website

* Year Founded (example "2002")

* Mission Statement

Application Contact

If you need to update the first or last name fields, please contact Roberta Sladovnik, Grants Manager, at info@anschutzfamily.org or 303-293-2338

* Prefix

Name

* Title

* Email Address

* Phone

Save

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Proposal Summary

* Type of Grant

* Program Area - Select the program area that best matches the purpose of this proposal

* Program Area Sub-Category

* Name of Program

* Amount Requested

* In one or two sentences, describe what the grant will be used for

* Number of Unduplicated Individuals Served Directly by the Organization Last Year

* Number of Full-Time Employees

* Number of Part-Time Employees

* Estimated Number of Volunteers Last Year

* Year the CEO/Executive Director Started

* To what extent are veterans and/or their families a primary focus of your organization?

* Counties Served Specific to this Proposal - hold down 'CTRL' to select more than one option

Save

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Financial Information

* Organization's Current Fiscal Year End Date ⓘ

Complete this field.

* Organization's Budgeted Income

* Organization's Budgeted Expenses

* Program Budgeted Income

* Program Budgeted Expenses

Save

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Review and Submit

Attachments

Please read instructions before uploading attachments

- Please upload your attachments as the **final step** before submitting your application. If you use the save and return feature, your attachments **WILL NOT** be saved and you will have to re-upload.
- To upload an attachment, click Upload Files to select a file from your desktop or drag and drop the files from your desktop directly into the Upload Files box.

* Proposal Narrative

 Or drop files
[Download](#) and complete attachment

* Current Fiscal Year Organizational Budget

 Or drop files
* Program Budget **[FOR PROJECT-SPECIFIC REQUESTS ONLY]**

A Balance Sheet as of 11/30/2023 or later is preferred.

* Current Balance Sheet ⓘ

 Or drop files

An Income Statement from the start of your fiscal year through 11/30/2023 or later is preferred.

* Current (Year-to-Date) Income & Expense Statement ⓘ

 Or drop files

* Year-End Balance Sheet

 Or drop files

* Year-End Income & Expense Statement

 Or drop files

If your organization does not have either, please upload a document letting us know

* Most Recently Completed Audit or Financial Review ⓘ

 Upload Files

Revenue should reflect the total actual revenue received by the org as a whole for the most recently completed fiscal year

* Sources of Income Table ⓘ

 Upload Files Or drop files

[Download](#) and complete attachment

* Major Contributors List

 Upload Files Or drop files

[Download](#) and complete attachment

* Board of Directors List ⓘ

Include board positions, occupation, name of employer/affiliation, city or county of residence, and term end date

 Upload Files Or drop files

* IRS Determination Letter

 Upload Files Or drop files

Dated and adopted by the Board of Directors

* Anti-Discrimination Statement ⓘ

 Upload Files Or drop files

* Key Staff List ⓘ

Include brief qualifications for each employee and the year they started with the organization

 Upload Files Or drop files

Annual Report - Optional

 Upload Files Or drop files

Evaluation Results - Optional

Or drop files

If there are significant annual fluctuations, an operating deficit, and/or anything else to note.

Explanation of Financial- Optional ⓘ

Or drop files

* Fiscal Sponsor Agreement [FOR FISCALLY-SPONSORED PROJECTS ONLY]

Or drop files

Cover Letter - Optional

Or drop files

Approximately how many hours did it take to complete this application?

* example: type "4" for 4 hours.

Save

Sections

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Review and Submit

Review and Submit

Please review and certify your application. To officially submit your application, please click the **Submit Application** button.

* Do you certify that the information contained in this application is true and correct to the best of your knowledge and that you are authorized to submit a grant request on behalf of the organization?

Yes

Submit Application

Once your application has been submitted, you should receive the following submission confirmation notice. If you do not receive this notice, then your application has not yet been submitted.

