

## Arizona Women's Partnership, Inc. 2020 Grant Application Form

The Arizona Women's Partnership, Inc. is an ALL volunteer philanthropic 501 c (3) non-profit organization dedicated to promoting the status of Arizona women and empowering women's grass roots organizations through mini grants and publicity. AZWP is non-political, non-sectarian, and is sensitive to the needs of **underserved and disadvantaged women and youth at risk in Arizona**. Proceeds are generated from fundraisers, corporate sponsorships and private donations.

**DEADLINE.... MUST be POSTMARKED by March 31, 2020 ..... PLEASE do NOT e-mail or send via FedEx or Priority Mail**

**GRANT REQUEST must be for/or under \$2,000. Grants will be made available to 501 c (3) non-profits that assist underserved women and/or youth at risk in Arizona, whose TOTAL Annual Operating Budget is UNDER \$450,000, are in GOOD financial standing, are NON-SECTARIAN (non-religious), NON-POLITICAL, NOT a School District Foundation, NON-DISEASE (medical) related, NOT for scholarships. You may NOT use the 501 c (3) of another non-profit or be Chapters of national organizations. It MUST be YOUR OWN AZ based 501 c (3). Visit [www.azwp.org](http://www.azwp.org) for more info and past grant recipients' profiles.**

**\*\*\* Grant Recipients will be notified by e-mail and checks will be mailed by June 30th\*\*\***

**PLEASE TYPE or PRINT CLEARLY – LEGIBLY (Save this as a Word doc for your files)**

**Name of Organization:** \_\_\_\_\_

**Key Contact Person:** \_\_\_\_\_ **Title:** \_\_\_\_\_

**Mailing address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Tel: W: (\_\_\_\_) \_\_\_\_\_ H: (\_\_\_\_) \_\_\_\_\_ Cell: (\_\_\_\_) \_\_\_\_\_**

**e-mail address:** \_\_\_\_\_ **Website:** \_\_\_\_\_

**Alternate Contact Person:** \_\_\_\_\_ **Tel: (\_\_\_\_) \_\_\_\_\_ e-mail:** \_\_\_\_\_

**Organization's Mission Statement (please state in the space provided):**

Does your organization have **Your Own AZ based 501 c (3) non-profit status?** \_\_\_\_\_ **Year established** \_\_\_\_\_

**REQUIRED ATTACHMENTS:** • Copy of **IRS letter** • Copy of the **last 990 IRS filing - FIRST two pages ONLY**  
• **ANNUAL INCOME & EXPENSE Latest Statement detailed** • **Population served yearly (numbers & % of ethnic/racial mix)**  
• **Brochure** • **List of Board Members (contact info)** • **Minutes from your last Board meeting (include latest Treasurer's report)**  
• **Explain SALARIES – to Whom / Amount of Salary**

**If selected, you will be asked to help publicize the Arizona Women's Partnership, Inc.**

Amount of your request: \$ \_\_\_\_\_ How many do you serve annually? \_\_\_\_\_ Date of this application: \_\_\_\_\_

**Please state how the money will be used**

**\*If selected, you are required to submit a brief ONE-PAGE report AFTER the completion of your project(s)- DUE by January 31st**

**\*Signature of Executive Director** \_\_\_\_\_ **Date:** \_\_\_\_\_

**\*Signature of Board President or Treasurer** \_\_\_\_\_ **Date:** \_\_\_\_\_

**The Arizona Women's Partnership, Inc. is a non-discriminatory non-profit organization.**

**Mail (via Post) with attachments - POSTMARKED by March 31, 2020 (and then the FINAL REPORT) to:**

**Paula Cullison - Arizona Women's Partnership, Inc.  
13058 N. Surrey Circle  
Phoenix, AZ 85029**

**Questions via e-mail: [azwpinc@aol.com](mailto:azwpinc@aol.com) ... No Phone Calls**

**\*Incomplete applications will NOT be accepted\* ... THANK YOU**