# City of Allentown

## **2024 Funding Application**

#### I. Contact Information

Legal Name of Organization
2. Organization's Alias (if applicable)
3. Name of Executive Director/CEO
4. Federal Tax ID Number (if applicable)
5. Organization's Physical Address
6. Mailing Address (if different from physical address)
7. Organization's telephone number
8. Organization's website (if applicable)
9. Contact Person's Name
10. Contact Person's Title
11. Contact Person's phone number
12. Contact Person's email address

### II. Organization Information

1.	Tax Exemption Status (if applicable)			
2. Geographic Areas Served				
3.	Mission and Primary Purpose			
4.	Date founded:			
5.	Is this organization registered and in good standing ("active" status) with the city, county and current with taxes?			
	Yes No			
	If no, please explain:			
6.	Is this organization currently in good standing and in compliance with all applicable Federal, State and Local Laws?			
	☐ Yes ☐ No			
	If no, please explain:			
7.	Describe the services the organization currently provides to City of Allentown residents.			

8.	Is this a minority owned organization? ☐ Yes ☐ No					
9.	Target populations served: (check all that apply):					
	<ul><li>☐ Youth</li><li>☐ Adults</li><li>☐ Seniors</li></ul>					
	Low-Moderate Income households (defined in Grant Guidelines)					
	LGBTQ+					
	Veterans					
	Persons with Disabilities					
	Black, Indigenous, People of Color (BIPOC)					
	Other (if other please explain).					
10.	O. Approximately how many people do you serve monthly?					
11.	Approximately what percentage of people you serve are residents of Allentown?					
12.	How are the people you serve included in your organization's decision-making process?					
13.	What are your organization's equity priorities?					

### **III. Program Information**

Name of Project, Program, or Request		
Total Amount Requested (Note: The City of Allentown reserves the right to award less funds than requested).		
Please describe in detail the program/project you are requesting to be funded. Include any helpful data, statistics, and narratives, and specify how these dollars will dollars would support this program or assist this agency.		
Please explain how this program/project/request aligns with one of the priority areas specified in the program criteria ( Housing Stock Improvement/Blight remediation, Eviction Prevention and Response, Essential Service Operational Support, Technology Infrastructure, Community Well-Being).		

5.	Is the population served by this project/program comprised of 51% or more Low-Moderate Income individuals.			
	☐ Yes	☐ No		
6.	Indigenous, Pe	on your organization serves comprised of 51% or more BIPOC (Black, cople of Color), LGBTQ+, and/or people with disabilities (as defined by with Disabilities Act?		
	Yes	□ No		
7.	Approximately residents?	what percentage of people served by this program will be Allentown		
8.	How does your	r organization intend to measure the success of this program/project?		
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9.	Have you engaged other community partners in your program/project? List any partners.			
10.		loes this project/program create a systemic and sustainable impact on s and community?		
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## IV. Funding & Budget

1.What is your organization's projected total annual expenses for your upcoming fiscal year?
2. What is the budget for this program/project? (Please include an itemized budget of expenses for this program/project with the completed application)
3. What percentage of the program/project budget will these funds be used to support?
4. What, if any, other funding sources will support this program/project?
5. Have you been awarded other funds specifically for this program?
☐ Yes ☐ No
If applicable, please specify:
6. If this is an ongoing project, how does your organization plan to sustain this project in the future?
7. Does your organization have access to or employ a grant writer?  ☐ Yes ☐ No

### V. Required Supporting Documents

1. Please include the following documents, as applicable.
☐ State Tax Exemption Documentation or Internal Revenue Services (IRS)
Determination
☐ Mission Statement
□ Diversity, Equity and Inclusion Statement
□ Annual Agency Audit
☐ Affirmation Letter of 501(c)(3), 501(c)(6), or 501(c)(19) status
<ul> <li>Articles of Incorporation, bylaws, and current list of board of directors and officers</li> </ul>
☐ Limited liability company certificate of formation
□ Fictitious name registration
☐ Pennsylvania Subsistence Certification.
2. Please include your organization's prior two years of IRS Form 990 and any extension

- 2. Please include your organization's prior two years of IRS Form 990 and any extension documentation.
- 3. Please include your organization's current copy of IRS W9 Form.