



GRANT APPLICATION

200 Anchor Drive, Suite B, Key Largo, FL 33037
Telephone: (305) 367-4707 • Fax: (305) 367-6327
Web: www.orfound.org • E-Mail: foundation@oceanreef.com

Applying organization must be classified as a tax-exempt entity under Section 501 (c) (3) of the IRS code guidelines.

Organization Name: _____

Street Address: _____

City, State and Zip Code: _____

Phone: _____ Fax: _____ Website: _____

Grant Amount Requested: _____ For Fiscal Year: _____

Total Project Budget: \$ _____ Amount Requested from Other Sources: \$ _____

Please indicate if you have applied to the following Ocean Reef organizations for this project:

Keys Children's Foundation – Amount Requested/Granted _____

Ocean Reef Rod & Gun Club – Amount Requested/Granted _____

Contact Name: _____ Title: _____

Phone: _____ Fax: _____ E-Mail: _____

1. a) State below the major goals of your organization and describe the population served:

b) Actual number of clients served in the past fiscal year: _____

For the project for which funds are being requested: _____

2. a) State the need to be addressed:

b) State the proposed solution to the need, the time frame for it to be operative, and indicate how the grant will assist the solution:

c) Does the population to be served work with you, and to what extent?

3. Please give the following fiscal information:

a) The current actual sources of funding and the amount:

SOURCE

AMOUNT

b) The sources of funding sought but not yet received, and the amount:

SOURCE	AMOUNT
_____	_____
_____	_____
_____	_____

Attachments

Attach the following required items to this application:

1. Income/Expense budget for the fiscal year for which funds are being requested and Income/Expense report for the immediate past two years.
2. A copy of the latest annual auditors report or financial statement.
3. A copy of the last IRS Form 990 filed.
4. Copy of Organization's IRS Exempt Approval Letter

Optional Attachments: Mission Statement, Brochure, other Printed Materials

I certify that all information submitted in this application for funds from the Ocean Reef Foundation, Inc. is accurate.

NAME: _____ TITLE: _____

SIGNATURE: _____ DATE: _____

**ANNUAL GRANT DEADLINE:
January 31st
(Grants awarded each spring)**

*Grant Applications should be postmarked by the deadline above.
For application assistance, please contact Administrator Yurianna Mikolay
at ymikolay@oceanreef.com or (305) 367-4707.*