



CM CAPITAL
FOUNDATION

C.M. Capital Foundation – Grant Application

(For Grant Requests Less than \$1,000)

1. Organization Name: _____ Date: _____
2. Address: _____
3. City: _____ State: _____ ZIP: _____
4. Contact Person & Title: _____
5. Phone Number: _____ E-Mail Address: _____
6. Date of Incorporation: _____
7. Tax ID Number: _____
8. Amount Requested: _____ Total Agency Budget: _____
9. For entire organization: Fund Raising Costs \$ _____ % _____ of total budget
Administrative Costs \$ _____ % _____ of total budget
10. Projected next year's operating budget for entire organization: \$ _____
11. Type of request:
 General/Operating support Endowment
 Capital Endowment Research
 Program Development Other (Specify: _____)
 Fellowships/Scholarshi

28. Please enclose the following information with this application:

The Foundation considers grant applications only from public charities as defined under the Internal Revenue Code and applicable regulations. An applicant must have obtained a 501(c)(3) determination letter prior to submitting an application and **must include a copy with this application**. If the applicant is not required to have obtained a 501(c)(3) letter, it **must provide a copy of an IRS letter or legal opinion certifying that the applicant is a public charity** as described in Internal Revenue Code Section 509 (a) (1), (2) or (3).

Please complete this Grant Application as thoroughly as possible.

Incomplete Grant Applications may not be considered or may be returned.

Please return Completed application by the dates set forth in the Grant Guidelines.

You may submit your application using either method below:

Mail (paper copy):

C.M. Capital Foundation
525 University Avenue, Suite 200
Palo Alto, California 94301

Email (digital copy):

info@cmcapitalfoundation.org