

Epperson Family Foundation 2026 Grant Application

Legal Name of Organization:

DBA (if applicable):

Mailing Address:

Phone:

Fax:

EIN:

Website:

Name of CEO or Executive Director:

Phone:

Email:

Application Contact & Title (if *not* the CEO or Executive Director):

Phone:

Email:

Tax Exemption Status:

501(c)(3)

Other than 501(c)(3), describe:

Number of Employees: Full-time:

Part-time:

Grant Request Information

Type of Grant Requested (select one):

Amount of Request:

\$

General Operating Support

Program or Project Support
Name of Program or Project:

Other

PROPOSAL NARRATIVE

*The narrative **should not exceed 2 pages** in length. Please address only the sections and bullets that are applicable to your grant request.*

- I. Organizational Background
 - a. Your organization's history, mission and goals.
 - b. Your organization's current programs, activities and accomplishments.
 - c. The geographic area and target population served.
- II. Purpose of Request
 - a. Briefly describe the specific problem/need or opportunity in your community that this funding request will address.
 - b. Describe how this project relates to your organization's overall mission.
 - c. Summarize the work plan that will be used to accomplish this request.
- III. Evaluation Plan
 - a. Describe your criteria for success.
 - b. What are the short-term changes you want to achieve and the long-term changes you are working toward?
 - c. How will you measure effectiveness?

ATTACHMENTS

- **YEAR-END FINANCIAL STATEMENTS.** Include the most recent fiscal year-end financial statements, audited if available.
- **MOST RECENT 990 (if applicable)**
- **BUDGETS (if available).** The organization's operating budget (revenue and expenses) for the current fiscal year. If available, also include the budget for the upcoming fiscal year.

**COMPLETED APPLICATIONS MUST BE RECEIVED BY
NOVEMBER 1, 2026 TO BE CONSIDERED FOR A 2026 GRANT.
Please send completed applications to lisa.m.garcia@cox.net**