



FALL 2022 & SPRING 2023 GRANT CYCLES
FUNDING ELIGIBILITY & GUIDELINES

FUNDING CYCLE DEADLINES

2022 FALL FUNDING GRANT CYCLE

Application process opens	Application submission deadline	Thunderbirds Charities notifies applicant regarding funding decisions
August 1, 2022	September 1, 2022	Early December 2022

2023 SPRING FUNDING GRANT CYCLE

Application process opens	Application submission deadline	Thunderbirds Charities notifies applicant regarding funding decisions
February 1, 2023	March 1, 2023	Early June 2023

Thunderbirds Charities accepts proposals on or before the due date and appreciates those organizations that submit prior to the deadline. All materials must be received online no later than 5:00pm MST the day of the deadline. If you have questions, please contact Cheryl Ruggiero at 602-216-7325 or cruggiero@wmphoenixopen.com.

MISSION

Established in 1986, Thunderbirds Charities is the charitable arm of The Thunderbirds, whose purpose is to grant the funds generated by the WM Phoenix Open. Thirty-six years later, the mission of Thunderbirds Charities remains the same; to assist children and families, help people in need and improve the quality of life in the Greater Phoenix Metropolitan Area. Each year Thunderbirds Charities accepts grant proposals that support at-risk youth & families, community outreach/quality of life, education, improving the lives of the physically and mentally challenged and working to eliminate domestic violence, homelessness, and poverty.

GEOGRAPHIC PRIORITIES

Thunderbirds Charities accepts requests from organizations serving the Greater Phoenix Metropolitan Area unless the project/program primarily benefits Greater Phoenix Metropolitan residents. Greater Phoenix Metropolitan Area is defined as Maricopa and Pinal Counties.

FUNDING ELIGIBILITY & GUIDELINES:

To be eligible, a charity must hold a 501(c)(3) non-profit status and be based in Arizona. Thunderbirds Charities reserves the right to accept or reject any application and to approve or disapprove any proposal for funding. Thunderbirds Charities also reserves the right to change the application criteria at any time. Please refer to the list below for more detailed information. Other guidelines may apply and will be evaluated on an individual basis. Our grant amounts vary, depending on revenues from the WM Phoenix Open.

ELIGIBILITY: Thunderbirds Charities does not currently provide funding to the following:

- Nonprofit organizations whose 501(c)(3) status has been in effect for less than three years.
- Organizations that discriminate on the basis of race, color, gender, national origin, marital status, age, disability or veteran status.
- Individuals.
- Political, labor or fraternal organizations.
- Advocacy or lobbying activities for issue related topics.
- Medical or scientific research.
- Religious organizations, churches or programs that are purely denominational in purpose.
- Foundations or organizations which are themselves, grant-making entities.
- Endowments, Fellowships or Scholarships (for college purposes).
- Individual schools: public, charter, private, colleges, universities or their support organizations (to include but not limited to; Booster Clubs, PTA/PTO's, athletic teams, bands, performing arts groups, alumni associations or school foundations).
- Debt reduction campaigns.
- Ongoing support or multi-year support.
- Projects or programs outside of Greater Phoenix Metropolitan area, unless the project/program primarily serves Greater Phoenix Metropolitan area residents.

BEFORE SUBMITTING A GRANT PROPOSAL:

Step 1: Read the Grant Guidelines and Frequently Asked Questions.

Step 2: All proposals must be submitted through the Thunderbirds Charities website (www.thunderbirdscharities.org).

Step 3: Submit a proposal narrative (please do not use bullet points). Requirements include, but are not limited to:

- A. Brief narrative overview of the organization [maximum word count = 225].
 1. Organization's history and mission. To include; a brief description of current projects/programs and your contributions to our community. Please include the demographic of target population, the number of individuals served, and geographic area served.
- B. Summarize the purpose of the request [maximum word count = 100].
- C. A description of the project for which funding is being sought [maximum word count = 500].

Please include in a narrative format:

 1. What problem or need does your project address in our community?
 2. What is your proposed solution to this problem or need and how do you plan to implement?
 3. The population and geographic area you plan to serve and how they will benefit from the project, including the number of individuals that will be served.
 4. The timetable of the program, how success or failure will be measured and how the project will be sustained going forward.

Step 4: Required supplemental materials include, but are not limited to:

- A. The organization’s IRS 501(c) (3) tax-exempt determination letter. Using a ‘second party’ 501(c) (3) status is not permitted.
- B. The organization’s IRS Form 990 or 990-EZ for the most recently completed fiscal year. **IRS Form 990/990 EZ returns older than 15 months from the date of application will be rejected.**

EXAMPLE DATES FOR 990/990 EZ SUBMISSION AS IT RELATES TO 15 MONTHS

2022 Fall Funding Grant Cycle
(Based on application due date of September 1, 2022)

CHARITABLE ORGANIZATION’S FISCAL YEAR END	MOST RECENTLY COMPLETED FISCAL YEAR
March 31 ST	March 2022
June 30 th	June 2021
September 30 th	September 2021
December 31 st	December 2021

2023 Spring Funding Grant Cycle
(Based on application due date of March 1, 2023)

CHARITABLE ORGANIZATION’S FISCAL YEAR END	MOST RECENTLY COMPLETED FISCAL YEAR
March 31 ST	March 2022
June 30 th	June 2022
September 30 th	September 2022
December 31 st	December 2021

- C. **Financials for the two most recently completed fiscal years: audited, reviewed, compiled, or internally generated financial statements for the most recently completed fiscal year and the fiscal year immediately prior.** Each financial statement must include a balance sheet (or equivalent), income statement (or equivalent), cash flow statement, appropriate footnotes and accountant’s reports. **Financial statements covering periods older than 15 months and 27 months, respectively, from the application date will be rejected.**

EXAMPLE DATES FOR FISCAL YEAR ENDS’ AS IT RELATES TO 15 MONTHS/27 MONTHS

2022 Fall Funding Grant Cycle
(Based on application due date of September 1, 2022)

CHARITABLE ORGANIZATION’S FISCAL YEAR END	MOST RECENTLY COMPLETED FISCAL YEAR	FISCAL YEAR IMMEDIATELY PRIOR
March 31 st	March 31, 2022	March 31, 2021
June 30 th	June 30, 2021	June 30, 2020
September 30 th	September 30, 2021	September 30, 2020
December 31 st	December 31, 2021	December 31, 2020

2023 Spring Funding Grant Cycle
(Based on application due date of March 1, 2023)

CHARITABLE ORGANIZATION'S FISCAL YEAR END	MOST RECENTLY COMPLETED FISCAL YEAR	FISCAL YEAR IMMEDIATELY PRIOR
March 31 st	March 31, 2022	March 31, 2021
June 30 th	June 30, 2022	June 30, 2021
September 30 th	September 30, 2022	September 30, 2021
December 31 st	December 31, 2021	December 31, 2020

- D. Annual operating budget for the current fiscal year with comparable columns for most current completed previous year's budget versus actual. **INSTRUCTIONS AND EXAMPLE AT THE BOTTOM OF THIS DOCUMENT.**

- E. Budget for the specific project/program for which you are requesting funding with a column outlining where requested funding would be applied, as well as the charitable organization's fiscal year budget. **INSTRUCTIONS AND EXAMPLE AT THE BOTTOM OF THIS DOCUMENT.**

- F. A list of funds raised to date and from whom, for the specific program/project for which you are requesting funding (amounts of \$5,000 and above). **Please try to keep to one page.**

- G. A complete list of corporations and foundations that have given to the charitable organization, in the previous fiscal year (amounts of \$5,000 and above). Please be sure to include the dollar amount per donor. **Please try to keep to one page.**

- H. A list of the organization's Board of Directors, including their primary business or professional affiliation. **Please try to keep to one page.**

- I. Any additional documentation (multiple pages, combined as one PDF).

THIS IS NOT INTENDED AS A FILLABLE FORM.

PLEASE USE THIS EXAMPLE AS A REFERENCE TOOL FOR YOUR BUDGET SUBMISSION.

ANNUAL OPERATING BUDGET INSTRUCTIONS - PLEASE TRY TO KEEP TO ONE PAGE

HEADING INSTRUCTIONS:

1. First line is charity's name.
2. Second line is fiscal year during which the grant will be used (mm/dd/yy - mm/dd/yy).
3. Third line is previous fiscal year date (mm/dd/yy - mm/dd/yy).

COLUMNS INSTRUCTIONS:

4. First column is your charity's budget categories.
5. Second column is your charity's current year budget (if you are within 3 months of your fiscal year end, please use your projected budget as current).
6. Third column is your charity's most complete fiscal year budget.
7. Fourth column is your charity's most complete fiscal year actual.
8. Please remember to include narrative on budget.

Organization Name	Organization Name		
Fiscal Year	Fiscal Year during which the grant will be used (mm/dd/yy - mm/dd/yy)		
Previous Fiscal Year	Previous Fiscal Year (mm/dd/yy - mm/dd/yy)		
COLUMN 1	COLUMN 2	COLUMN 3	COLUMN 4
PLEASE MODIFY CATEGORY TITLES AS NEEDED.	Total Organization Budget	Previous Fiscal Year Budget	Previous Fiscal Year Actual
Income Sources			
Foundation and Corporate Grants			
Government Grants and Contracts			
Individual Contributions			
Earned Income			
In-Kind Income			
Investments			
Other Income <i>(please explain)</i>			
Total Income			
Expenses			
Salaries and Wages <i>(please indicate FTE)</i>			
Employee Benefits and Taxes			
Professional and Outside Services			
Fundraising/Development			
Conference and Training			
Travel			
Equipment			
Insurance Expense			
Marketing/Advertising			
Postage and Delivery			
Printing			
Rent / Facility Costs			
Supplies and Materials			
Technology			
Telecommunications			
Administrative			
Other Expense <i>(please explain)</i>			
Miscellaneous			
Total Non Personnel Costs			
Total Expenses			
Excess of Revenue Over Expenses			
Budget Narrative:			
<p>Please use this area to help explain your budget. Please elaborate on any line items that are not self-explanatory.</p>			
<p>*Please export existing budgets into an excel format with the different columns outlined in the instructions*</p>			

THIS IS NOT INTENDED AS A FILLABLE FORM.

PLEASE USE THIS EXAMPLE AS A REFERENCE TOOL FOR YOUR BUDGET SUBMISSION.

SPECIFIC PROJECT / PROGRAM BUDGET INSTRUCTIONS - PLEASE TRY TO KEEP TO ONE PAGE

HEADING INSTRUCTIONS:

1. First line is charity’s name.
2. Second line is project / program title.
3. Third line is fiscal year during which the grant will be used (mm/dd/yy - mm/dd/yy).

COLUMNS INSTRUCTIONS:

4. First column is your charity’s budget categories related to your specific request.
5. Second column is total project/program budget for requested funding.
6. Third Column is the allocation of Thunderbirds Charities potential grant funds.
7. Fourth column is your charity’s current year budget.
8. Please remember to include narrative on budget.

Organization Name	Organization Name		
Project Title	Project/Program Title		
Fiscal Year	Fiscal Year during which the grant will be used (mm/dd/yy - mm/dd/yy)		
COLUMN 1	COLUMN 2	COLUMN 3	COLUMN 4
PLEASE MODIFY CATEGORY TITLES AS NEEDED.	Total Project/ Program Budget	Thunderbirds Charities Request Amount	Total Organization Budget
Income Sources			
Foundation and Corporate Grants			
Government Grants and Contracts			
Individual Contributions			
Earned Income			
In-Kind Income			
Investment			
Other Income (please explain)			
Total Income			
Expenses			
Salaries and Wages (please indicate FTE)			
Employee Benefits and Taxes			
Total Personnel Costs			
Professional and Outside Services			
Consultants			
Equipment			
Fundraising/Development			
Insurance Expense			
Marketing/Advertising			
Postage and Delivery			
Printing			
Conferences and Training			
Rent and Occupancy			
Supplies and Materials			
Technology			
Travel			
Administrative			
Other Expense (please explain)			
Miscellaneous			
Total Non Personnel Costs			
Total Expenses			
Excess of Revenue Over Expenses			
Income Sources	Confirmed	Anticipated	Submitted
Total Income			
Budget Narrative:			
Please use this area to help explain your budget. Please elaborate on any line items that are not self-explanatory.			
Please export existing budgets into an excel format with the different columns outlined in the instructions			