



# NEW CAR DEALERS OF WNY CHARITABLE FOUNDATION GRANT APPLICATION



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Please be concise in your responses.  
Supporting documentation/materials welcome.

Name of Organization \_\_\_\_\_

Contact Person \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

1. How did you hear about the New Car Dealers of WNY Charitable Foundation? \_\_\_\_\_  
\_\_\_\_\_

2. Is your organization:  Not for Profit\*     IRC Section 501(c)3\*     Registered with NY State Charities Department\*  
 Other\* (please describe) \_\_\_\_\_  
*\*Documentation must be submitted along with last fiscal year's audited financial statement.*

3. Has the organization received a grant or donation from the New Car Dealers of WNY Charitable Foundation or NFADA?  Yes     No    If yes, provide details including date and amount of award and how the monies were used.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. Does your organization currently receive funding from a new car franchise dealer in WNY? \_\_\_\_\_ Yes \_\_\_\_\_ No  
If yes, please describe the source and commitment of those funds. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. Describe the activities of the organization including the location in which it operates. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. Describe the management/staffing of the organization including total annual payroll. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



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7. Detail the organization's income structure by percentage derived from private funding/government or other sources.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

8. Percentage of income utilized for direct charitable purposes vs. organization's operations and administration. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

9. Describe the organization's fundraising activities. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

10. Please indicate the specific dollar amount you are requesting. \$ \_\_\_\_\_

11. Describe the organization's proposed use of the grant. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

12. I certify to the New Car Dealers of WNY Charitable Foundation that the information provided is true and correct, and I have enclosed a current audited financial statement.

Authorized Signature \_\_\_\_\_ Date \_\_\_\_\_

Mail completed application and supporting documentation to:  
New Car Dealers of WNY Charitable Foundation  
Attn: Betty Murphy  
1144 Wehrle Drive, Williamsville, NY 14221

Direct any questions to Betty Murphy at [betty@nfada.com](mailto:betty@nfada.com)