City of Truth or Consequences
505 Sims Street
Truth or Consequences, New Mexico 87901
Phone: (575) 894-6673 Email: torcclerk@torcnm.org

SUBRECIPIENT GRANT APPLICATION

FY: ***2025/2026***
DUE DATE: ***03/28/2025 @ 12:00pm***

BUDGET EVALUATION

The City has funded local organizations in the past; however, funding is scarce and the City usually receives more requests for funds than are available. Therefore, please note that your answers to these questions will have a direct bearing on how much, if any, funding will be allocated to your organization.

REQUIREMENTS

Organization's previous year's audit report or internal/informal financial statement is required. Please include with application. Proof of nonprofit status from Internal Revenue Service and the Office of the Secretary of State must accompany application. Application requires signature of authorized representative. Application must be submitted by the due date referenced above.
(Attach a separate sheet to this form if you need additional space for your answers.)

GENERAL INFORMATION

- Name of Organization: _____
- Is the organization registered as a non-profit? Yes ___ No ___
- Non-Profit Corporation Commission Authority Number: _____ ***this is the SOS number***
- Employer Identification Number (EIN#): _____
- Contact Person: _____ Phone No. _____
- Mailing Address: _____
- Physical Address: _____

E-Mail: _____

FUTURE FUNDING REQUEST

- Amount of funding requested for FY 2024/2025: _____
- Detailed accounting of how proposed funding is to be spent in FY 2024/2025:

_____

_____

_____

_____

- State how the residents or businesses of Truth or Consequences will be benefited by the funding allotted to your organization in FY 2024/2025.

_____

- Explain if the City's funding of your organization will be used to leverage other funding from other sources.

- Do you have plans for conducting an **independent** financial audit of your organization in the coming year? Yes ___ No ___ If yes, who will be the independent public accountant?

HISTORICAL INFORMATION

- Amount of current (2023/2024) year's funding: _____
- Detailed account of how the current year's funds have been spent:

- Explain if the City's funding of your organization was used to leverage other funding from other sources. If so, how:

- State how the residents or businesses of Truth or Consequences benefited by the funding allotted to your organization this current year (2023/2024):

- Has there been an **independent** financial audit of the organization this year or in prior years?

  Yes ___ No ___ **If YES, please provide name below and a copy of the current audit with your application. If NO, please provide internal/informal audit or financial statements.**

Submitted By: _____ Date: _____
(Typed Name & Signature)

Received By: _____ Date: _____