



VERIFICATION CHECKLIST

INCOMPLETE APPLICATIONS NOT ACCEPTED

Applications must be submitted by 5:00 pm on August 31, 2026

Organization Name: _____

ORGANIZATIONAL BUDGET

- ☐ Is the most current organizational budget attached as a **separate** attachment?
- ☐ Is the file name saved as "Organizational Budget"?

FINANCIAL STATEMENT (MOST RECENT SHOWING REVENUE AND EXPENSES)

- ☐ Is the most current financial statement attached as a **separate** attachment?
Please do not submit an audit report or Form 990.
- ☐ Is the attached Financial Statement dated less than 3 months prior to the grant submission due date?
- ☐ Is the file name saved as "Financial Statement"?

IRS TAX-EXEMPT STATUS

- ☐ Is the federal tax-exempt status letter attached as a **separate** attachment?
- ☐ Is the file name saved as "IRS Tax-Exempt Status"?

NON-DISCRIMINATION STATEMENT

- ☐ Is the non-discrimination statement attached as a **separate** attachment?
- ☐ Is the file name saved as "Non-Discrimination Statement"?

ANNUAL REPORT, if applicable

- ☐ Is the annual report attached as a **separate** attachment?
- ☐ Is the file name saved as "Annual Report"?

BOARD OF DIRECTORS

- ☐ Is the current list of Board of Directors attached as a **separate** attachment?
- ☐ Is the file name saved as "Board of Directors"?

GWC GRANT APPLICATION FORM

- ☐ Is the application saved in the correct format? Please **do not** print/scan. See instructions at <https://www.greenwoodcf.org/greenwood-women-care/grant-application-process/>.
- ☐ Is the file name for the attached application form saved as "GWC Grant Application"?
- ☐ Has the application been proofread for spelling and grammatical errors? Are all the questions answered?
- ☐ Is the application signed and dated?
- ☐ Are the GWC Grant Application Form and required documents attached to **one** email?

VERIFICATION CHECKLIST

- ☐ Are all the appropriate boxes checked above?
- ☐ Is the file name for the verification checklist saved as "Verification Checklist"?

FOR COMMITTEE USE ONLY

- ☐ Tax-exempt charitable status confirmed. EIN: _____
- ☐ Are any of the Board members on the [Grants Review & Award Committee](#)?
If checked, please list the name: _____