

LAS ANIMAS COUNTY

2026 Non-Profit Grant Application Instructions

I. **APPLICATION AND DEADLINE:** Non-Profit Grant will open January 2, 2026,
and close at 4:00 pm on February 6, 2026.

II. **PROPOSAL SUMMARY:**

Please summarize in a short paragraph the purpose of your agency. Briefly explain why your agency is requesting this grant, what outcomes you hope to achieve, and how you will spend the funds if a grant is awarded.

Funding Request-Please describe the program for which you seek funding.

- If applying for *general operating support*, briefly describe how this grant would be used.
If your request is for a *specific project*, please explain the project:

III. **APPLICANTS WILL BE REQUIRED TO SUBMIT:**

- Proposal Summary
- W-9.
- Non-Profit Physical Address in Las Animas County
- Proof of Non-Profit Status

IV. **AWARDS AND DISBURSEMENTS OF FUNDS:**

Applications reviewers will determine eligibility and grant amount. Awards will depend upon the number of applicants, availability of funds, and demonstrated need. Once funding decisions are made, applicants will receive a Grant Award notification outlining all terms and conditions for receiving the grant. Las Animas County reserves the right to offer awards different from the specified amount requested. Funds will be distributed via check after each qualifying reimbursement request is approved. All funding decisions are final.

The Las Animas County Board of County Commissioners may request a presentation from your organization concerning the donation from our county.

REQUEST AN APPLICATION EMAIL: kristee.coberly@lasanimascounty.org and
christa.prieto@lasanimascounty.org or 719-845-2564
Application on website: lasanimascounty.colorado.gov.

LAS ANIMAS COUNTY

2026 Non-Profit Grant Application Form

Date of application _____

Name of organization to which the grant would be paid. Please list the exact legal name (W-9):

Purpose of grant (Please see Instructions)

Address of organization:

Telephone number: _____ Fax: _____ Email: _____

Executive director: _____

Contact person and title (if not executive director):

Is your organization a Non-Profit? (yes or no): _____

Attach Proof of non-profit status:

Grant request: \$ _____

Check one (based on the organization's priorities and the funder's guidelines):

General support _____

Project support _____

Signature Authority:

Printed Name: _____

Title: _____

Signature: _____

Date: _____

Send the completed application and supporting documents to
kristee.coberly@lasanimascounty.org and christa.prieto@lasanimascounty.org or mail to Las
Animas County, 200 East 1st Street Room 105, Trinidad CO 81082 or hand deliver to the same
location.