

Our Mission

To initiate a family tradition of philanthropic giving through financial donations and volunteerism to our communities from generation to generation. To help support quality non-profit organizations which better the lives of those with needs living in Northwest Florida.

2023 Grant Application

For questions regarding the grant process contact: CindiFBear@aol.com. Organizations eligible to apply for funds from the Bear Family Foundation must meet the following criteria:

- Tax-exempt public charity under section 501(c) (3) of the Internal Revenue Code
- Based in Northwest Florida, or a recognized local chapter of a state or national charity serving this region
- Registered with the Florida Division of Corporations as a non-profit corporation
- Application must be received by November 1, 2023

Checklist

 Completed Grant Application (do not staple project Narrative (limit to two pages) Completed Grant Application (do not staple project Narrative (limit to two pages) 	2023)	MAIL TO: Bear Family Foundation c/o Cindi F. Bear 6120 Enterprise Dr. Pensacola, Florida 32505
Contact Information Organization Legal Name and DBA (if applicable)		
Executive Director (please print)		
Chairman of Board of Directors (please print)		
Contact Person (please print)		
Contact Phone	Contact Email	
Website		
Mailing Address	Street Addres	SS

2023 Grant Request	(Print Organization Name)
Certification	
exempt status under Internal Revenue Code	ctors, authorize submission of this funding proposal. Its tax Section 501(c)(3) has not been revoked or modified. We e statements contained in this application are true, correct
Executive Director:	Board of Directors Chairperson:
Signature	Signature
Print Name	Print Name
Date	Date
Organization Information	
Name of Organization	Year Founded
Summary of Organization's History	

Geographic Amount
Area Served Requested \$ _____

Percentage of Directors who contributed financially to the organization in the last 12 mo.

of Directors on Board ______ # of Employees: Full-time _____ Part-time _____

The Bear Family Foundation, Inc.	
2023 Grant Request	(Print Organization Name)
Specify Your Request for Bear Fo	oundation Funds
activities will these funds provide) *Information (with your application) *Evaluation (how will your funding sources (if your request requires addition)	accomplish) *Activities (is there a long range goal, what what cost estimates have you received, please include a copy measure your results) *Budget for this specific project *Other all funds to complete your project goal) *Sustainability to the Bear Family Foundation if your project is awarded)
Brief Narrative	

(Print (Orga	nization	Name)

Your Non-Profit Organizational Budget

	Estimated 2023	Previous Year 2022	Previous Year 2021
BEGINNING CASH BALANCE:			
Government grants (specify)			
Government contracts (specify)			
Foundations			
Corporations/Businesses			
Civic or Community Groups			
United Way			
Individual Contributions (excluding Board of Directors)			
Board of Directors Contributions			
Fundraising activity (events)			
Membership Income			
In-kind Support			
Investment Income			
Endowment Earnings			
Earned Income			
Other (specify)			
Total Revenue:			
Salaries and Wages			
Employee Benefits and Taxes			
Consultants and Professional Fees			
Fundraising Costs			
Travel			
Equipment/Supplies/Printing/Copying			
Communication (phone, fax, website)			
Postage and Delivery			
Rent and Utilities			
Marketing and Promotion			
Depreciation			
Other (specify)			
Total Expenses:			
ENDING CASH BALANCE:			