



## **AMERICAN GRANT WRITING SERVICE, INC.**<sup>TM</sup>

***“Building Firm Financial Foundations! Allowing Your Ideas to Blossom!”***

CEO/Founder of MidCity Excellence (MCE) Community Learning Center &  
AGWS, Inc./Firm Owner & Professional Consultant Kimberly Y. Warren, MS Ed.

**Here are some of the questions we will be asking you in order to expeditiously process the 501c3. There may be a few more items as we complete the budget and bylaws- but this will get us started.**

**Please complete the following:**

1. \_\_\_\_\_

**What will be the official legal name of the 501c3 (it is preferred that we use a name that has not been registered with the IRS or secretary of state; you can even use a form of the existing name if you prefer. Here are some *suggestions*:**

\_\_\_\_\_ **Learning Center**

\_\_\_\_\_ **Institute**

\_\_\_\_\_ **Community Learning Center**

\_\_\_\_\_ **Family Center**

\_\_\_\_\_ **Life Center**

\_\_\_\_\_ **Ministries**

\_\_\_\_\_ **OTHER**

2. \_\_\_\_\_

**What are the main services will you be providing**

(please *list below* for now unless you already have a detail description, brochure or flier (email any other descriptive documents): i.e. educational/tutoring, mentoring, health services, performing arts, career & leadership skills, battered women/abuse or homeless shelter, job/workforce development, computer center, etc, research, literacy skills, counseling, etc..)?

3. \_\_\_\_\_

**Do you have a mission or vision statement for this new nonprofit business?  
or would you like for our team to create one?**

**Mission:**

**Vision:**



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4. \_\_\_\_\_  
**Do you have a Mantra or Slogan or would you like for our team to create a *generic* one for IRS purposes?**

5. \_\_\_\_\_  
**Do you have a LOGO? (please attach or we may create a *generic* one for the IRS purposes only)**

**DO you have favorite colors or a theme you would like for us to consider?**

6. \_\_\_\_\_  
**Do you have a sample flier or brochure for marketing purposes or would you like for our team to create a sample?**

**DO you have favorite colors or a theme you would like for us to consider?**

7. \_\_\_\_\_  
**What will be the times of operation: List Hours & days of operation as if you had full-funding?**

8. \_\_\_\_\_  
**What will be the months of operation? Year-round? Seasonal? Summer only? Is there a time limit (60-day program? 14 weeks of tutoring? 20 counseling sessions? Or can the stay/services be used indefinitely?)**



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**Complete the board of directors chart below** Who will serve as the 3 officers/incorporators and/or board of directors **(in most states only 3 are required by law to incorporate)?** List names, contact info (address and phone), titles: President, treasurer & secretary. Will there be other board members? A V.P. or assistant secretary or asst. treasurer (not mandatory and you can add these later). If Yes- add name, address, ph. # and title or term (terms are flexible). **Please also list professional affiliation or business expertise. It is suggested that you use landline ph. # and a business address. All members may have the same address and landline/business phone #.**

Name	Business/ professional affiliation	Address	Phone	Position	Term
i.e. <b>Kimberly Warren</b>	Youth Advocate & Teen Specialist- 25+ yrs.  CEO for MidCity Excellence – 17yrs  MS Ed- Certified 1 <sup>st</sup> -8 <sup>th</sup> grade  Former Adjunct Professor of Ed.- MWSU  AGWS- Owner/Grant Writing & 501cs Consultant- 17 yrs	604 S 20th St St Joseph, MO 64507	816 294-4727	<b>President/ CEO</b>	(01/01/15-12/31/2020) 5 year term
				<b>President</b>	(07/01/18-12/31/2023) 5 year term
				<b>Secretary</b>	(07/01/18-12/31/2023) 5 year term
				<b>Treasurer</b>	(07/01/18-12/31/2021) 3 year term
				<b>Member</b>	(07/01/18-12/31/2019) 1 year term



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9. \_\_\_\_\_  
Are any of the board members related? (For public nonprofit companies, it is advisable that the 3 officers (president, secretary & treasurer) be **not** related in order to control “conflicts of interests”. Please disclose any board relatives and how they are related:

10. \_\_\_\_\_  
**Do you have Existing EIN # or have you ever incorporated this name? Yes or No**  
(It is best if you have not- But if you have legally established this business as a **nonprofit**- please email/fax (816.676.1117) any existing paperwork- Articles of Incorporation and EIN#).

**Registered Agent:**

SSN #

11. \_\_\_\_\_  
**What will be the non-profit physical site address (if there is not an office or building- use a home, office or church mailing address/please include suite/apt # and zip codes) &**

**Who Owns This Building? Rent? Lease? In-Kind Donation?**

**Do you have a copy of the lease of should we draw up a sample document?**

12. \_\_\_\_\_  
**Is there an existing PO Box that you want to use for mailing purposes- please include zip codes)?**

13. \_\_\_\_\_  
**What county will the 501c3 be located in?**

14. \_\_\_\_\_  
**How would you categorize this area of service- inner city, rural/country/farm, metropolitan, etc.**



15. \_\_\_\_\_  
**What will be the contact number(s) and who is registered agent or main contact to answer IRS questions (usually the president/CEO); this number will be published with the IRS- if you do not want a cell phone listed you may want to use a landline # or alternative phone #).**

16. \_\_\_\_\_  
**Do you have a company email or contact email (optional)?  
Website address (optional)?**

17. \_\_\_\_\_  
**Who will be the target/focused population** (pk-12th grade, adults & seniors- entire family; list any special demographics/populations of people you may serve- ex-offenders, single parents, minorities, Hispanics, women, men, co-ed, seniors, define the ages, minors, 18 or 21 years and up, special needs –physically or mentally/emotional challenged, pregnant, etc.?)

18. \_\_\_\_\_  
**Please give us a paragraph each on the following:**

**Past Community Activities- how long?**

**Present Community Events- how many lives/residents are you impacting and what groups of people (youth, Seniors, Ex-offenders, adults, teens, etc.)?**

**Future Community Endeavors:**

**(please use additional pages if needed)**



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**REMEMBER:** For each special need you listed in #10, you should have a program, service or referral entity that addresses that need. A good grant writing rule is – for every problem or need present, there must be a solution or service to resolve the need/problem area. You do not have to address these services in great detail- just a simple list of services is needed for these preliminaries.

**Please email this information to [visitmce@gmail.com](mailto:visitmce@gmail.com)**

All of the information will be held in strictest confidence and only used for the purpose of processing the 501c3 documents and for the grant writing and marketing services that The American Grant Writing Firm, Inc. has been retained for as expressed in the service agreement. This email and disclosure is covered by the Electronic Communications Privacy Act, 18 U.S.C. §§ 2510-2521 and is legally privileged. If you are an unintended recipient, you are hereby notified: dissemination, distribution or copying of this communication is strictly prohibited by law. AGWS, Inc., MCE and AGF, Inc. consultants and agents offer suggestions to assist in on-profit management, 501(3)c development and obtaining grants awards.