2026 Local Partnership Funding Grant Applications



Contact Information

| Contact | Name | 7 |
|---------|------|---|
|---------|------|---|

Title *

Kathryn Roy

Executive Director

Person to whom questions should be directed regarding this application

Contact person's title

Email*

Kathryn@LoveINCLittleton.o

Phone *

303-359-1301

Email Confirmation *

Kathryn@LoveINCLittleton

Organization Information

Name of Organization *

Acts4 Community Outreach Services, INC dba Love INC of

Littleton

Address *

Street Address

PO Box 787

Address Line 2

City State / Province / Region

Littleton Colorado Postal / Zip Code Country 80160 USA

URL

URL https://https://loveinclittleton.org

Copy/paste complete URL of organization's web site, including "https://"

Is your organization Non-Profit?*

Yes
No

Are you registered with the Colorado Secretary of State as a 501(c) charitable organization?*

Yes

O No

Program Information

Program Description*

Love INC organizes 42 active partner churches and other non-partner churches to aid our community by meeting needs through transactional service in a hands up rather than hands out mode. Our Helpline (Connection Center), receives thousands of calls each year, from which we identify gaps in service, calling on over 340 voluneers into action. Many families and individuals need quality, free, delivered furniture. And other community members have quality furniture they no longer need. Since Jan 2021, Love INC's furniture program, through volunteer movers, has picked up furniture from generous donors, warehouses it (with needed repair and cleaning) and delivers it to families in need. Love INC accepts referrals from nineteen local churches, schools, faith based and government agencies to provide much needed furniture, thereby serving those in need in our community.

Brief description of program or service for which organization intends to use the funds (1,000 character limit)

| * | | |
|--|---|--|
| Total Served * | Residents Served * | |
| 244 Total people served by the program for funding requested | 189 Total estimated Littleton residents served by the program in prior year | |
| Youth Served* | | |
| 64 | | |
| | | |
| Funding | | |
| Are you applying for the Local Partnership or Stadium D | istrict Funding?* | |
| If you are applying for both grants, please submit a separate grant applicat | on for each grant | |
| Local Partnership Funding | | |
| Stadium District Funding | | |
| Type of Funding * | | |
| Grant (cash only) | | |
| In-kind sponsorship (city staff support) | | |
| Grant and in-kind sponsorship | | |
| Amount Requested * | Annual Budget* | |
| \$ 8,000.00 | \$ 1,133,696.00 | |
| Funding amount requested | Organization's annual budget | |
| How would the funds be used?* | | |
| If applying for stadium district funds, how would the funds be used to support | ort youth activity programs? (1,000 character limit) | |
| The 2025 cost to provide this furniture service to our commu- increasing expenses for warehouse rent, insurance and sup support. Expense for vehicles or gas is donated by the volur purchase of a truck this year, and in the beginning stages of capacity. This support from the City of Littleton ensures the community: for the meaningful volunteer activity of the movin who donate their furniture, and for those receiving furniture. | ervision for volunteers, supplies, and administrative lateer moving teams. Love INC is exploring the searching for a new warehouse to increase continuation of this valuable service to our | |
| Other Funding Sources* | | |
| No additional funding sources were received in 2024. The fullocal churches donate their time, their trucks to pull the Love deliveries. Churches, individual donors and Renewed Treast budget which includes these expenses. General donations 1 RT. | INC trailer, and the gas used during pick-ups and ures (RT) Resale Store support Love INC and the | |
| Funding Received in Prior Year?* | | |
| Yes, received a cash grant Yes, received a cash grant & in-kind sponsorship Never applied for Local Partnership Funding | Yes, received in-kind sponsorshipApplied, didn't receive grant or in-kind sponsorship | |
| Specify how prior year's funds and/or in-kind services w | vere used.* | |
| Funds were used to support the furniture ministry by covering | | |
| general administrative support, such as supervision of volunteers, training, and supplies. Through the generous support of the City of Littleton, numerous families were able to finally live independently in new homes with furniture, many for the first time. One recipient was quoted as saying. "We've been sleeping on the floor and using totes to keep our clothes in and also as makeshift tables. This furniture you delivered is so nice. My family can finally feel at home!" Love INC is committed to continuing this much needed and satisfying ministry. | | |
| Was any of the funding not spent?* | | |
| ○ Yes | No | |
| How much of the funding was not spent?* | | |

Please upload your updated W-9 Form signed and dated in June or July 2025.*

completed w9.2023.pdf

48.18KB

Applications must have a W-9 to be considered

Approved Amount by City Council



Contact Information

| Contact | Name * | |
|---------|--------|--|
|---------|--------|--|

Tami Slipher

Person to whom questions should be directed regarding this application

Title *

President of the Board of Directors

Contact person's title

Email*

changethetrendnetwork@gm

Phone *

303-870-3774

Email Confirmation *

tamislipher@yahoo.com

Organization Information

| N I | | Organization | • |
|------|----------|--------------|---|
| Name | α | Urnanization | |
| | | | |

Change The Trend Network

Address*

Street Address

4300 S. Lincoln St

Address Line 2

State / Province / Region

Englewood Co Postal / Zip Code Country

United States 80113

URL

changethetrend.com

Copy/paste complete URL of organization's web site, including "https://"

Is your organization Non-Profit?*

Yes \(\) No

Are you registered with the Colorado Secretary of State as a 501(c) charitable organization?*

O No

Program Information

Program Description*

Since 2017, Change the Trend Network has brought community stakeholders together around the mission of lessening the impact of homelessness in the Littleton, Englewood & Sheridan communities. This initial group eventually commissioned a working group to begin regular meetings focused on building cross-sector collaboration & increasing regional capacity to respond to the issue. Today, CTT meets weekly & consist of 40-50 attendees, representative of the service provider community in Littleton, Englewood, Sheridan, & beyond. Over the last several years, Change the Trend has played an integral role in supporting the work of the Tri-Cities Homelessness Policy Group, development of the Tri-Cities Homelessness Action Plan, & coordination of many projects within the plan including a coordinated outreach team, greater data-tracking capacity, Built-for-Zero, BridgeHouse Ready to Work, Tri-Cities Navigation Center & more. In total, this plan projects to place over 100 people into housing yearly.

Brief description of program or service for which organization intends to use the funds (1,000 character limit)

| Total Served * | Residents Served * |
|--|--|
| 700 Total people served by the program for funding requested | 200 Total estimated Littleton residents served by the program in prior year |
| Youth Served * 200 | |
| Funding | |
| Are you applying for the Local Partnership or Stadium | District Funding?* |
| If you are applying for both grants, please submit a separate grant applie Local Partnership Funding Stadium District Funding | |
| Type of Funding * Grant (cash only) In-kind sponsorship (city staff support) Grant and in-kind sponsorship | |
| Amount Requested * | Annual Budget * |
| \$ 10,000.00 Funding amount requested | \$ 47,000.00 Organization's annual budget |
| How would the funds be used?* | |
| If applying for stadium district funds, how would the funds be used to sur Change the Trend requests \$10,500 to hire a Director to be network of service providers to work in conjunction with the maintain a collaborative, cross-sector approach to address Sheridan communities. The last two years, CTT provided service provider. The last two service providers who provide light of the shifting uncertainty of non-profit organizations is imperative now more than ever to increase the support of time position. This will allow more hours of support, collaborative position to support the region. | build the organization and continue operations of our e Tri-Cities Homelessness Policy Group to build and sing homelessness in the Englewood, Littleton, and facilitation, and it was managed by a designated ded leadership had to close down their organization. In n the current financial and political climate, it is Change the Trend leadership with a permanent part |
| Other Funding Sources* | |
| Applying for Arapahoe County funding and seeking spons | orships. |
| Funding Received in Prior Year?* | |
| Yes, received a cash grant Yes, received a cash grant & in-kind sponsorship Never applied for Local Partnership Funding | Yes, received in-kind sponsorship Applied, didn't receive grant or in-kind sponsorship |
| Please upload your updated W-9 Form signed and dat | ed in June or July 2025.* |
| W9 CTT.jpg Applications must have a W-9 to be considered | 1.34MB |
| | |



Contact Information

Contact Name *

Leslie Levine

Person to whom questions should be directed regarding this application

llevine@arapahoegov.com

Email Confirmation*

llevine@arapahoegov.com

Title *

Senior Community Health Promotion

Specialist

Contact person's title

Phone *

720-841-1195

Organization Information

Name of Organization *

Colorado Nonprofit Development Center dba Arapahoe Food Security Coalition

Address *

Street Address

PO Box 18770

Address Line 2

City State / Province / Region

Denver CO Postal / Zip Code Country 80218 USA

URL

https://cndc.org/

Copy/paste complete URL of organization's web site, including "https://"

Is your organization Non-Profit?*

Yes No

Program Information

Program Description*

The Arapahoe Food Security Coalition includes 100+ members from 60+ organizations, initially focused on Littleton, Englewood, and Sheridan, with plans to expand countywide. It was created to strengthen coordination, encourage resource-sharing, and build a more connected, efficient food system. Its mission is to unite partners to end food insecurity by supporting emergency food providers through resources and collaboration.

Improving storage and distribution is key to increasing access and reducing waste. A food hub—a centralized facility that aggregates, stores, distributes, and sometimes markets food—can support local systems and improve access to healthy, affordable food.

The coalition seeks to hire a consultant to begin planning a regional food hub to serve emergency food providers supporting Littleton residents.

Brief description of program or service for which organization intends to use the funds (1,000 character limit)

| Total Served* | Residents Served * |
|---|--|
| 10,910 Total people served by the program for funding requested | O Total estimated Littleton residents served by the program in prior year |
| Youth Served* | |
| 3162 | |
| Funding | |
| Are you applying for the Local Partnership or Stadium D | vistrict Funding?* |
| If you are applying for both grants, please submit a separate grant applicati | on for each grant |
| Local Partnership Funding | |
| Stadium District Funding | |
| Type of Funding * | |
| Grant (cash only) | |
| In-kind sponsorship (city staff support) | |
| Grant and in-kind sponsorship | |
| Amount Requested* | Annual Budget * |
| \$ 7,000.00 | \$ 64,500.00 |
| Funding amount requested | Organization's annual budget |
| How would the funds be used?* | |
| If applying for stadium district funds, how would the funds be used to support | ort youth activity programs? (1,000 character limit) |
| A consultant with expertise in community engagement and for models, coordinate Denver Metro site visits, and host virtual local needs for aggregation, cold/dry storage, and last-mile opantries, backpack programs, and community meals. | meetings with hubs nationwide. They will assess |
| The consultant will develop a plan and timeline for designing for organizations serving Littleton residents. This includes ideoperational models. | |
| A coalition subcommittee will ensure community voices guide partnerships in logistics, storage, and transportation to boost Insights from this work will shape a Littleton-based food hub security. | regional capacity, especially for perishables. |
| Other Funding Sources* | |
| Cancer, Cardiovascular and Pulmonary Disease Grant progr Colorado Department of Public Health and Environment Ara Littleton Rotary Foundation Telluray Foundation | _ |
| Funding Received in Prior Year?* | |
| Yes, received a cash grant | Yes, received in-kind sponsorship |
| Yes, received a cash grant & in-kind sponsorship Never applied for Local Partnership Funding | Applied, didn't receive grant or in-kind sponsorship |
| Please upload your updated W-9 Form signed and dated | in June or July 2025.* |
| Signed-W-9-2025.pdf | 261.8KB |
| Applications must have a W-9 to be considered | |
| Approved Amount by City Council | |



| Contact information | |
|---|--|
| Contact Name * Joanna Larsen Person to whom questions should be directed regarding this application | Title * Director of Grants Administration Contact person's title |
| Email* | Phone* |
| jlarsen@thefamilytree.org | 7196440262 |
| Email Confirmation * | |
| jlarsen@thefamilytree.org | |
| Organization Information | |
| Name of Organization * | |
| Family Tree, Inc. | |
| Address* | |
| Street Address | |
| 3805 Marshall Street | |
| Address Line 2 | |
| City | State / Province / Region |
| Wheat Ridge | CO |
| Postal / Zip Code 80033 | Country United States |
| | Officed States |
| URL https://www.thefamilytree.org/ Copy/paste complete URL of organization's web site, including "https://" | |
| Is your organization Non-Profit?* | |
| Yes ○ No | |
| Are you registered with the Colorado Secretary of State | e as a 501(c) charitable organization?* |
| Program Information | |

Program Description*

Family Tree supports individuals and families in Littleton and across the Denver metro area as they navigate and overcome the interconnected issues of child abuse, domestic violence, and homelessness. Our multigenerational services and 2-Gen model promotes housing stability, well-being, economic security, and stronger community connections. We strengthen families through parent education and in-home support; support survivors with shelter, legal advocacy, and safety planning; and assist people experiencing homelessness with emergency shelter, case management, and housing navigation. Our services are trauma-informed and client-centered, ensuring people receive the right support at the right time. By addressing the complex, overlapping challenges our clients face, we help them build lasting safety and long-term self-sufficiency.

*Please note, our client totals below are approximate. Family Tree expects to have exact FY 24-25 data available, upon request, on August 1st.

Brief description of program or service for which organization intends to use the funds (1,000 character limit)

Total Served *

Residents Served *

5.300

170

Total people served by the program for funding requested

Total estimated Littleton residents served by the program in prior year

Youth Served*

2,700

Funding

Are you applying for the Local Partnership or Stadium District Funding?*

If you are applying for both grants, please submit a separate grant application for each grant

- Local Partnership Funding
- Stadium District Funding

Type of Funding*

- Grant (cash only)
- In-kind sponsorship (city staff support)
- Grant and in-kind sponsorship

Amount Requested*

Annual Budget*

\$ 5,000.00

\$ 10,719,278.00

Funding amount requested

Organization's annual budget

How would the funds be used?*

If applying for stadium district funds, how would the funds be used to support youth activity programs? (1,000 character limit)

Family Tree works with people with histories of poverty, trauma, and/or crises who do not fit a specific profile. However, internal data determined by our intake process indicates we serve primarily female-headed single-caregiver households (74%); adults between 26–45 years old (59%); and folks who have annual incomes under \$20,000 at intake (61%). We also serve the children of our adult clients, and more than 2,500 children received services last year. When people are navigating the physical, mental, and emotional weight that crises can carry, it can be difficult to focus on securing resources or planning for the future rather than simply trying to make it through each day. The City of Littleton's grant investment is essential to Family Tree's ability to serve low-income Littleton households and support vulnerable residents with the services they need to achieve and maintain stability and success.

Other Funding Sources*

Family Tree partners with and receives funding from several local government agencies throughout metro Denver to help us continue our important work. Below are the local government grants most relevant to this application:

City of Golden - \$18,000 City of Arvada: \$18,000 City of Thornton - \$12,600 City of Wheat Ridge: \$8,100

Lakewood Legacy Foundation: \$5,000
Brighton Legacy Foundation: \$5,000

Westminster Community Foundation: \$5,000

| Funding | Received | in | Prior | Vaar?* |
|-------------|----------|----|-------|---------|
| I ullulling | Neceiveu | | FIIUI | i eai : |

| Yes, received a cash grant | Yes, received in-kind sponsorship |
|--|--|
| O Yes, received a cash grant & in-kind sponsorship | Applied, didn't receive grant or in-kind sponsorship |
| Never applied for Local Partnership Funding | |

Specify how prior year's funds and/or in-kind services were used.*

Family Tree is grateful to have received \$2,700 for our 2025 fiscal year. Funding was used for direct program expenses, integrated services, and resources to support more than 170 individuals and families in Littleton who were experiencing crisis and trauma related to child abuse, domestic violence, and homelessness.

Through the SafeCare® and Community Family Resource Team (CFRT) programs, Family Tree provided Littleton residents with education, financial and supportive resources, home visitation, and case management to help stabilize families and successfully divert youth from further child welfare system involvement. Family Tree's Roots of Courage, Legal Advocacy, and Domestic Violence Outreach programs provided domestic violence survivors in Littleton with crisis intervention, advocacy, outreach, and emergency shelter. Littleton residents experiencing or at-risk of experiencing homelessness received comprehensive case management, employment guidance, rental and utility assistance, and helpline services through Family Tree's Homelessness Program. Family Tree's House of Hope and GOALS residential programs provided shelter and supportive services including housing placement for Littleton families experiencing homelessness. These programs also achieved the following outcomes during our last fiscal year:

73% of enrolled clients completed at least one SafeCare® topic, proving a significant increase in parenting skills (Goal=70%).

89% of Domestic Violence Outreach Program (DVOP) survey respondents reported they increased their knowledge of community resources (Goal=90%).*

96% of households in the Homelessness Program exited to safe and stable housing (Goal=80%). *Survey results represent responses from all (aggregated) clients surveyed in each program. We cannot report results specific to Littleton residents due to the confidentiality of our surveys.

| Was any of the funding not spent?* | |
|--|---------------------------------|
| ○ Yes | No |
| How much of the funding was not spent?* | |
| 0 | |
| Please upload your updated W-9 Form signed and | d dated in June or July 2025. * |
| Family Tree W-9 2024-2025 02.25.pdf | 160.42KB |
| Applications must have a W-9 to be considered | |

Approved Amount by City Council



Contact Information

| | + | |
|--|------------------------------|--|
| Contact Name * | Title * | |
| Lynda Kizer | Community Dinner Coordinator | |
| Person to whom questions should be directed regarding this application | Contact person's title | |
| Email* | Phone * | |
| lckizer9@gmail.com | 303-478-9804 | |
| Email Confirmation * | | |
| lckizer9@gmail.com | | |
| Organization Information | | |
| Name of Organization * | | |
| Free Community Dinner | | |
| Address* | | |
| Street Address | | |
| 1609 W Littleton Blvd | | |
| Address Line 2 | | |
| City | State / Province / Region | |
| Littleton | CO | |
| Postal / Zip Code | Country | |
| 80120 | US | |
| URL | | |
| fpcl@fpcl.org/Dinner Copy/paste complete URL of organization's web site, including "https://" | | |
| Is your organization Non-Profit?* | | |
| | | |
| Are you registered with the Colorado Secretary of State as a 501(c) charitable organization?* | | |
| Yes | | |
| ○ No | | |
| Program Information | | |
| - · · · · · · · · · · · · · · | | |

Program Description*

Serving a Free healthy meal on the last Tuesday night of each month expect November since 2016. Meal is fresh cooked each month with a different menu including a protein, vegetable, salad, fresh fruit and hand held desserts. All are welcome and no RSVP's are required. We use real tablecloths, centerpieces, glass dishes and have a Table Host at each table to welcome each guest, serve their drinks or help them to go through the Serving line. Our goal is to make each guest feel welcome and enjoy a delicious healthy meal

Brief description of program or service for which organization intends to use the funds (1,000 character limit)

| Total Served * | • | | |
|----------------|---|--|--|
| | | | |

Total people served by the program for funding requested

Residents Served*

| Youth Served* | |
|---|---|
| 35 | |
| Funding | |
| Are you applying for the Local Partnership or Stadium I If you are applying for both grants, please submit a separate grant applica Local Partnership Funding Stadium District Funding | |
| Type of Funding * Grant (cash only) In-kind sponsorship (city staff support) Grant and in-kind sponsorship | |
| Amount Requested * | Annual Budget* |
| \$ 3,500.00 Funding amount requested | \$ 4,280.00 Organization's annual budget |
| How would the funds be used?* | Organizations annual budget |
| If applying for stadium district funds, how would the funds be used to supp All funds will be used to purchase the food needed to prepa space rent-free, pays the utilities and all cooks, servers gree the Coordinator. Our budget has increased as the cost of fo price point shopping and have non profit status at Shamroci places to get the best cost per serving. | re each month's dinner. Our church provides the eters and Table Hosts are volunteers including me, od continues to increase almost monthly. We do |
| Other Funding Sources* | |
| We accept private donations from both church members an restricted account in our church mission budget. Randy's Au in honor of their 30th anniversary. | |
| Funding Received in Prior Year?* | |
| Yes, received a cash grant Yes, received a cash grant & in-kind sponsorship Never applied for Local Partnership Funding | Yes, received in-kind sponsorshipApplied, didn't receive grant or in-kind sponsorship |
| Specify how prior year's funds and/or in-kind services v | were used.* |
| All cash funds received by prior year's grants and donations | goes to pay for the purchase of food |
| Was any of the funding not spent?* | |
| ○ Yes | No |
| How much of the funding was not spent?* 0 | |
| Please upload your updated W-9 Form signed and date | d in June or July 2025. * |
| IMG_1832.jpg.pdf Applications must have a W-9 to be considered | 143.61KB |
| Approved Amount by City Council | |



Contact Information

| ۱ |
|---|
| |

Erin McMahon

Person to whom questions should be directed regarding this application

Email*

grants@foodbankrockies.org

Email Confirmation *

grants@foodbankrockies.org

Title *

Grants Officer

Contact person's title

Phone *

303-371-9250

Organization Information

| Name | of | Organization ¹ | ٨ |
|---------|--------|---------------------------|---|
| 1401110 | \sim | Organization | |

Food Bank of the Rockies

Address *

Street Address

10700 E. 45th Ave

Address Line 2

City State / Province / Region

Denver Colorado Postal / Zip Code Country

80239 **United States**

URL

https://www.foodbankrockies.org/

Copy/paste complete URL of organization's web site, including "https://"

Is your organization Non-Profit?*

Yes \(\) No

Are you registered with the Colorado Secretary of State as a 501(c) charitable organization?*

Yes

O No

Program Information

Program Description*

Food Bank of the Rockies' FRESH initiative focuses on the procurement of quality produce for distribution through our network of Hunger Relief Partners and through our own direct service programs. Working with instate and out-of-state growers, producers, and food hubs, we source a wide variety of fruits and vegetables, such as apples, carrots, potatoes, and onions, to distribute to neighbors at no cost.

Brief description of program or service for which organization intends to use the funds (1,000 character limit)

Total Served *

Residents Served *

206

Total people served by the program for funding requested

Total estimated Littleton residents served by the program in prior year

Youth Served*

290

Funding

Applications must have a W-9 to be considered

| | ***** |
|---|---|
| Are you applying for the Local Partnership or Stadium D | |
| If you are applying for both grants, please submit a separate grant application. | ion for each grant |
| Local Partnership FundingStadium District Funding | |
| · · | |
| Type of Funding * | |
| Grant (cash only) | |
| In-kind sponsorship (city staff support) | |
| Grant and in-kind sponsorship | |
| Amount Requested * | Annual Budget * |
| \$ 10,000.00 | \$ 164,682,968.00 |
| Funding amount requested | Organization's annual budget |
| How would the funds be used?* | |
| If applying for stadium district funds, how would the funds be used to support | ort youth activity programs? (1,000 character limit) |
| Food Bank of the Rockies respectfully requests \$10,000 fror fresh produce for distribution within Littleton. Fresh produce | |
| 1. Hunger Relief Partner Network: We work with twelve particulation College, Open Arms Food Bank, and Waterstone Communit | |
| 2. Direct Service Programs: Fresh produce is an important c direct service programs, including: | component of several of Food Bank of the Rockies' |
| ☐ Mobile Pantries, which help close the meal gap in commu existing resources. We operate one mobile pantry in Littletor | |
| ☐ Culturally Responsive Food Initiative, which procures and the needs of neighbors of diverse backgrounds. Fresh produpreferences. | distributes culturally responsive food items to meet |
| Other Funding Sources* | |
| Currently, we have no pending or secured funding for fresh p | produce purchasing exclusively for distribution in the |
| City of Littleton. | |
| FRESH is funded by unrestricted and restricted donations for uses a full spectrum of fundraising methods that generate re robust, year-round fundraising program and a portfolio of included agencies that regularly support the organization's operations fulfilling our mission and will be sustained beyond the fundin donors. | evenue from intentionally diverse sources. We have a dividuals, corporations, foundations, and government s. The purchasing of fresh produce is integral to |
| Funding Received in Prior Year?* | |
| Yes, received a cash grant | Yes, received in-kind sponsorship |
| Yes, received a cash grant & in-kind sponsorshipNever applied for Local Partnership Funding | O Applied, didn't receive grant or in-kind sponsorship |
| Specify how prior year's funds and/or in-kind services w | vere used.* |
| Food Bank of the Rockies recevied a cash grant from the Cipurchase fresh produce for distribution within Littleton. | ty of Littleton last year, which was also used to |
| Was any of the funding not spent?* | |
| Yes | No |
| How much of the funding was not spent?* | |
| 0 | |
| | * |
| Please upload your updated W-9 Form signed and dated | |
| W-9 Signed 06.22.2025.pdf | 236.49KB |



Contact Information

| Contact Name * | Title * |
|--|---|
| Sienna McGrath Person to whom questions should be directed regarding this application | Executive Director Contact person's title |
| Email* | Phone* |
| smcgrath@haatforce.org | 720-761-2109 |
| Email Confirmation * | |
| smcgrath@haatforce.org | |
| | |

| Organization Information | |
|--|--|
| Name of Organization * | |
| HAAT Force South Metro, Inc | |
| Address* | |
| Street Address | |
| 4300 S. Lincoln St | |
| Address Line 2 | |
| City | State / Province / Region |
| Englewood | Colorado |
| Postal / Zip Code | Country |
| 80113 | United States |
| URL | |
| haatforce.org | |
| Copy/paste complete URL of organization's web site, including "https://" | |
| Is your organization Non-Profit?* | |
| | |
| Are you registered with the Colorado Secretary of State | te as a 501(c) charitable organization?* |
| Yes | |
| ○ No | |
| Program Information | |

Program Description*

Serving those in the Tri-Cities area of Englewood, Littleton, and Sheridan, HAAT Force provides life-saving motel vouchers, food, and other necessary resources during severe weather events to the most vulnerable of those experiencing homelessness during the winter months, from October through April. Motel vouchers meet a basic need for those whom traditional shelter services may be inaccessible or dangerous, such as families, people with physical disabilities or medical issues, and people with animals.

Brief description of program or service for which organization intends to use the funds (1,000 character limit)

Residents Served* Total Served *

Total people served by the program for funding requested

125

| Youth Served* | |
|---|--|
| 25 | |
| Funding | |
| Are you applying for the Local Partnership or Stadium I If you are applying for both grants, please submit a separate grant applicat Local Partnership Funding Stadium District Funding | |
| Type of Funding * Grant (cash only) In-kind sponsorship (city staff support) Grant and in-kind sponsorship Amount Requested * | Annual Budget* |
| \$ 25,000.00 | \$ 596,043.00 |
| Funding amount requested | Organization's annual budget |
| How would the funds be used?* | |
| If applying for stadium district funds, how would the funds be used to supp. These funds will be used for life-saving motel vouchers during Weather Shelter Network we experienced almost double the weather events. And most recently with the SAFER program people seeking severe weather shelter this upcoming season | ng severe weather. Due to the closure of Severe amount of people needing shelter during severe a closing, we anticipate even higher numbers of |
| In addition, our organization has added a Program Director, management and resource navigation experience from the connecting clients with the resources needed to begin a pat | Tri-Cities area with the intent of aggressively |
| Other Funding Sources * | |
| Colorado Access Foundation (applied), Colorado Division of Arapahoe County Community Development Block Grant (ap Littleton Rotary, HAAT Force also utilizes the following additional funding south. Individual donors who are both repeat and one-time dono 2. The organization conducts an annual fall fundraising ever arganization is doing. | plied). urces as well- rs provide financial support for the organization. |
| organization is doing. 3. Newsletters are regularly sent out to donors and supported done within the organization as well as any current or future support). | |
| 4. The organization participates in Colorado Gives Day.5. Other organizations provide in-kind support to HAAT Force Englewood Public Library. As well as local churches.6. HAAT Force regularly applies and qualifies for additional force. | |
| Funding Received in Prior Year?* | |
| Yes, received a cash grantYes, received a cash grant & in-kind sponsorshipNever applied for Local Partnership Funding | Yes, received in-kind sponsorshipApplied, didn't receive grant or in-kind sponsorship |
| Specify how prior year's funds and/or in-kind services v | vere used. * |
| For life-saving motel vouchers during severe weather events others who are living in their cars or on the streets during the | |
| Was any of the funding not spent?* | |
| ○ Yes | No |
| How much of the funding was not spent?* | |

Please upload your updated W-9 Form signed and dated in June or July 2025. *

W9 2025 HAAT Force.pdf

3.45MB

Applications must have a W-9 to be considered

Approved Amount by City Council



Contact Information

| Contact Name * | Title * |
|--|--|
| Nancy Falk | Executive Director |
| Person to whom questions should be directed regarding this application | Contact person's title |
| Email* | |
| nancy@nourishmealsonwhe | Phone* |
| els.org | 3037987642 |
| Email Confirmation* | |
| nancy@nourishmealsonwheels.org | |
| Organization Information | |
| N | |
| Name of Organization * | |
| Nourish Meals on Wheels | |
| Address* | |
| Street Address | |
| 92 E. Arapahoe Road | |
| Address Line 2 | |
| City | State / Province / Region |
| Littleton, Colorado | CO |
| Postal / Zip Code | Country |
| 80122 | United States |
| URL | |
| https://www.nourishmealsonwheels.org/ Copy/paste complete URL of organization's web site, including "https://" | |
| Is your organization Non-Profit?* | |
| | |
| Are you registered with the Colorado Secretary of Stat | e as a 501(c) charitable organization? * |
| Yes | |
| ○ No | |
| Program Information | |
| Program Description* | |

Last fiscal year (7/1/2024-6/30/2025), Nourish Meals on Wheels delivered 251,166 meals to older and homebound adults across South Metro Denver. That number is impressive, but each meal also delivered dignity, safety, and connection. Our 600+ volunteers arrive with more than food. They remember birthdays, greet beloved pets, and ease isolation with a knock at the door and a familiar, caring face.

Brief description of program or service for which organization intends to use the funds (1,000 character limit)

Residents Served * Total Served *

Total people served by the program for funding requested

470

395

| Youth Served * | |
|--|--|
| 0 | |
| Funding | |
| Are you applying for the Local Partnership or Stadium I If you are applying for both grants, please submit a separate grant applica Local Partnership Funding Stadium District Funding | |
| Type of Funding * Grant (cash only) In-kind sponsorship (city staff support) Grant and in-kind sponsorship | |
| Amount Requested * \$ 15,000.00 Funding amount requested | Annual Budget * \$ 1,685,000.00 Organization's annual budget |
| How would the funds be used? * If applying for stadium district funds, how would the funds be used to support this funding helps us respond to a growing and urgent need residents we serve has increased by 18%, and we now expalone. A grant of \$15,000 will support the preparation and directly impacting neighbors who are aging alone, have send at the same time, requests for our supplemental services, go continue to rise, now more than 40% higher than the previous We are working hard to meet this growing demand without it make it increasingly difficult. Your support allows us to continue to rise it increasingly difficult. Your support allows us to continue to residents who rely on that knock at the door. Other Funding Sources * Nourish Meals on Wheels receives funding from a diverse recomes from individual, corporate, and community group do fundraisers, including our Fall Appeal and Theater Night. For government grants 8%, and meal donations from clients 21 at 2% of our annual revenue. | d in Littleton. In just one year, the number of Littleton lect to deliver more than 70,000 meals in the city elivery of approximately 5,000 of those meals, ious mobility issues, or have and financial challenges. grocery boxes, pet food, and shelf-stable meals, us year. Interruption, but rising food and transportation costs inue showing up, every day, without fail, for hundreds mix of sources. Approximately 21% of our revenue nations. Another 20% is raised through annual bundation grants account for 28% of revenue, |
| Funding Received in Prior Year?* Yes, received a cash grant Yes, received a cash grant & in-kind sponsorship Never applied for Local Partnership Funding | Yes, received in-kind sponsorship Applied, didn't receive grant or in-kind sponsorship |
| Specify how prior year's funds and/or in-kind services of the \$7,800 Local Partnership grant awarded in 2023 helper services as need continued to rise. That funding ensured or supplemental support like grocery boxes and pet food, and But beyond the numbers, the City's investment helped us reneighbors like Kim, a Littleton resident we've served for 15 | d Nourish Meals on Wheels sustain and adapt our ur team could keep delivering more meals, offer absorb rising food and fuel costs without disruption. emain a consistent, trusted presence in the lives of |
| When Kim lost her ability to drive due to MS in her early 50s overwhelming, and the fear was real. But thanks in part to the fear alone. Today, she calls our volunteers her friends, says family," and describes Nourish as her family. Your funding hit's about showing up, year after year, for people who rely our formula to the family. | he support of this grant, she's never had to face that she "feels we know her better than her biological elped make that possible. It's not just about meals, |
| Was any of the funding not spent?* | |
| ○ Yes | No |

How much of the funding was not spent?*

0

Please upload your updated W-9 Form signed and dated in June or July 2025.*

W-9 6.23.2025.pdf 703.89KB

Applications must have a W-9 to be considered

Approved Amount by City Council*



Contact Information Contact Name * Title * Susan Thornton Chair Person to whom questions should be directed regarding this Contact person's title Phone * Email* 303-798-0844 susthorn@aol.com Email Confirmation * susthorn@aol.com **Organization Information** Name of Organization * South Metro Community Foundation Address * Street Address 474 W. Easter Ave. Address Line 2 City State / Province / Region Littleton CO Postal / Zip Code Country 80120 USA URL https://SMCFinfo.org Copy/paste complete URL of organization's web site, including "https://"

| | Is your organization Non-Profit? * | |
|---|---|--|
| ● Yes | Yes ○ No | |
| Program Information Program Description* Funds will be used to help Advocates for Children hire navigators for vulnerable youth in Arapahoe County being forced out of the foster care system when they turn age 18. The navigators will encourage them to finish high school, obtain housing youchers, learn money-management skills, avoid trafficking and drug/alcohol abuse, and find jobs to support themselves. Brief description of program or service for which organization intends to use the funds (1,000 character limit) Total Served* Residents Served* 45 Total people served by the program for funding requested Total estimated Littleton residents served by the program in prior year Youth Served* 45 Funding Are you applying for the Local Partnership or Stadium District Funding?* If you are applying for both grants, please submit a separate grant application for each grant | Are you registered with the Colorado Secretary of Sta | ate as a 501(c) charitable organization?* |
| Program Information Program Description* Funds will be used to help Advocates for Children hire navigators for vulnerable youth in Arapahoe County being forced out of the foster care system when they turn age 18. The navigators will encourage them to finish high school, obtain housing vouchers, learn money-management skills, avoid trafficking and drug/alcohol abuse, and find jobs to support themselves. Brief description of program or service for which organization intends to use the funds (1,000 character limit) Total Served* Residents Served* 45 Total people served by the program for funding requested Total estimated Littleton residents served by the program in prior year Youth Served* 45 Funding Are you applying for the Local Partnership or Stadium District Funding?* If you are applying for both grants, please submit a separate grant application for each grant | Yes | |
| Program Description* Funds will be used to help Advocates for Children hire navigators for vulnerable youth in Arapahoe County being forced out of the foster care system when they turn age 18. The navigators will encourage them to finish high school, obtain housing vouchers, learn money-management skills, avoid trafficking and drug/alcohol abuse, and find jobs to support themselves. Brief description of program or service for which organization intends to use the funds (1,000 character limit) Total Served* Residents Served* 45 Total people served by the program for funding requested Total estimated Littleton residents served by the program in prior year Youth Served* 45 Funding Are you applying for the Local Partnership or Stadium District Funding?* If you are applying for both grants, please submit a separate grant application for each grant | ○ No | |
| Funds will be used to help Advocates for Children hire navigators for vulnerable youth in Arapahoe County being forced out of the foster care system when they turn age 18. The navigators will encourage them to finish high school, obtain housing vouchers, learn money-management skills, avoid trafficking and drug/alcohol abuse, and find jobs to support themselves. Brief description of program or service for which organization intends to use the funds (1,000 character limit) Total Served* Residents Served* 45 Total people served by the program for funding requested Total estimated Littleton residents served by the program in prior year Youth Served* 45 Funding Are you applying for the Local Partnership or Stadium District Funding?* If you are applying for both grants, please submit a separate grant application for each grant | Program Information | |
| being forced out of the foster care system when they turn age 18. The navigators will encourage them to finish high school, obtain housing vouchers, learn money-management skills, avoid trafficking and drug/alcohol abuse, and find jobs to support themselves. Brief description of program or service for which organization intends to use the funds (1,000 character limit) Total Served* Residents Served* 45 Total people served by the program for funding requested Total estimated Littleton residents served by the program in prior year Youth Served* 45 Funding Are you applying for the Local Partnership or Stadium District Funding?* If you are applying for both grants, please submit a separate grant application for each grant | Program Description* | |
| Total Served * 45 34 Total people served by the program for funding requested Youth Served * 45 Funding Are you applying for the Local Partnership or Stadium District Funding?* If you are applying for both grants, please submit a separate grant application for each grant | being forced out of the foster care system when they turn finish high school, obtain housing vouchers, learn money | n age 18. The navigators will encourage them to y-management skills, avoid trafficking and |
| Total people served by the program for funding requested Total estimated Littleton residents served by the program in prior year Youth Served * 45 Funding Are you applying for the Local Partnership or Stadium District Funding?* If you are applying for both grants, please submit a separate grant application for each grant | Brief description of program or service for which organization intends to | o use the funds (1,000 character limit) |
| Total people served by the program for funding requested Youth Served* 45 Funding Are you applying for the Local Partnership or Stadium District Funding?* If you are applying for both grants, please submit a separate grant application for each grant | Total Served* | Residents Served * |
| Youth Served* 45 Funding Are you applying for the Local Partnership or Stadium District Funding?* If you are applying for both grants, please submit a separate grant application for each grant | 45 | 34 |
| Funding Are you applying for the Local Partnership or Stadium District Funding?* If you are applying for both grants, please submit a separate grant application for each grant | Total people served by the program for funding requested | Total estimated Littleton residents served by the program in prior year |
| Funding Are you applying for the Local Partnership or Stadium District Funding?* If you are applying for both grants, please submit a separate grant application for each grant | Youth Served* | |
| Are you applying for the Local Partnership or Stadium District Funding?* If you are applying for both grants, please submit a separate grant application for each grant | 45 | |
| If you are applying for both grants, please submit a separate grant application for each grant | Funding | |
| Stadium District Funding Type of Funding * | If you are applying for both grants, please submit a separate grant appl Local Partnership Funding Stadium District Funding | |
| | | |
| ○ Grant (cash only)○ In-kind sponsorship (city staff support) | , | |
| O III killa apartaarariip (aity atali aupport) | | |
| | Grant and in-kind sponsorship | |

| If in-kind Sponsorship Requested, please state s | specific tasks or services requesting city staff support |
|--|--|
| Requesting City publication of SMCF's events and and on the City's social media sites. | foster youth issues in the Littleton Report, on Channel 8, |
| (i.e. street closures, police services, etc.) | |
| Amount Requested* | Annual Budget * |
| \$ 10,000.00 | \$ 27,800.00 |
| Funding amount requested | Organization's annual budget |
| How would the funds be used?* | |
| If applying for stadium district funds, how would the funds be use | ed to support youth activity programs? (1,000 character limit) |
| how to manage money, become trafficked, develop system, become homeless and become a large cosoutcomes. Other Funding Sources* | The majority do not graduate high school, do not know alcohol/drug abuse problems, get into the criminal justice at to taxpayers. Navigators will help prevent these dismal n, the Buck Foundation, the Daniels Fund, El Pomar |
| Funding Received in Prior Year?* | |
| ○ Yes, received a cash grant | ○ Yes, received in-kind sponsorship |
| Yes, received a cash grant & in-kind sponsorship | · |
| Never applied for Local Partnership Funding | |
| Specify how prior year's funds and/or in-kind se | ervices were used.* |
| Funding helped SMCF conduct a focus group of focunducting a community forum. The forum attracted foster youth and foster families telling their stories, | d approximately 125 community members and featured |
| Was any of the funding not spent?* | |
| ○ Yes | No |
| How much of the funding was not spent?* | |
| | |
| O | |

| Please upload your updated W-9 Form sig | ned and dated in June or July 2025. * | |
|---|---------------------------------------|----------------------|
| SMCF IRS W-9 06.24.2025.pdf Applications must have a W-9 to be considered | 1.74MB | |
| approved Amount by City Council | | |
| Comments | | 2000 characters left |
| | | |
| А | pprove Reject | |
| | | |



| Contact Name * | | |
|---|------------------------|--|
| Chris Strassburger | Title * | |
| Person to whom questions should be directed regarding this | Conference President | |
| application | Contact person's title | |
| Email* | Phone* | |
| chstrass52@gmail.com | 3038080823 | |
| Email Confirmation * | | |
| chstrass52@gmail.com | | |
| Organization Information | | |
| | | |
| Name of Organization * | | |
| St. Mary Society of St. Vincent de Paul | | |
| Address* | | |
| Street Address | | |
| 6853 S. Prince Street | | |
| Address Line 2 | | |
| | | |
| City State / Province / Region | | |
| Littleton | CO | |
| Postal / Zip Code | Country | |
| 80120 | United States | |
| URL | | |
| https://stmarylittleton.org | | |
| Copy/paste complete URL of organization's web site, including "ht | ttps://" | |

| Is your organization Non-Profit?* | | |
|---|---|--|
| Yes ○ No | | |
| Are you registered with the Colorado Secretary of State as a 501(c) charitable organization?* | | |
| Yes | | |
| ○ No | | |
| Program Information | | |
| Program Description * | | |
| Our Society provides financial assistance to neighbors whe temporary bump in the road in their life. The majority of our money obtained will provide us the opportunity to help an prevent them from becoming homeless. | ur requests are for rental assistance. Any grant | |
| Brief description of program or service for which organization intends to | use the funds (1,000 character limit) | |
| Total Served * | Residents Served * | |
| 450 | 425 | |
| Total people served by the program for funding requested | Total estimated Littleton residents served by the program in prior year | |
| Youth Served * | | |
| 95 | | |
| Funding | | |
| Are you applying for the Local Partnership or Stadium | District Funding?* | |
| If you are applying for both grants, please submit a separate grant applic | cation for each grant | |
| Local Partnership Funding | | |
| Stadium District Funding | | |
| Type of Funding * | | |
| Grant (cash only) | | |
| In-kind sponsorship (city staff support) | | |
| Grant and in-kind sponsorship | | |
| Amount Requested * | Annual Budget * | |
| \$ 3,500.00 | \$ 70,000.00 | |

Funding amount requested

Organization's annual budget

| How would the funds be used?* | |
|--|--|
| If applying for stadium district funds, how would the funds be used to | support youth activity programs? (1,000 character limit) |
| The majority of the grant funds obtained would be for rewith utilities, food, clothing, transportation, medical bills would be put to use for the sole purpose of helping neigorganization who dedicate our personal time to help ou | , and multiple other types of assistance. These funds ghbors that are struggling. We are a volunteer |
| Other Funding Sources * | |
| St. Mary Catholic Parish, Poor Box, SVdP Denver Metr donors, and Energy Outreach Colorado. | o Council, The Routzon Foundation, Individual |
| Funding Received in Prior Year?* | |
| Yes, received a cash grant | ○ Yes, received in-kind sponsorship |
| Yes, received a cash grant & in-kind sponsorshipNever applied for Local Partnership Funding | O Applied, didn't receive grant or in-kind sponsorship |
| | |
| Specify how prior year's funds and/or in-kind service | es were used.* |
| This years grant funds were used to assist Miriam and their home and avoid being evicted. Miriam had recentl Families like Miriam's are what we see every day in our | y lost her job and receives no child support. |
| Was any of the funding not spent?* | |
| ○ Yes | No |
| How much of the funding was not spent?* | |
| 0 | |
| | |
| Please upload your updated W-9 Form signed and d | lated in June or July 2025. * |
| Upload | |
| W-9 SVdP Denver Metro Council July 28 2025 - Sig | 1.71MB > |
| Applications must have a W-9 to be considered | |
| Approved Amount by City Council | |
| | |
| Comments | 2000 characters left |
| | |
| | |
| | |



Contact Information

| Contact information | |
|--|---|
| Contact Name * | Title * |
| Marnie Kamensky Person to whom questions should be directed regarding this application | Director of Development Contact person's title |
| Email* | |
| mkamensky@threebirdsallia | Phone* |
| nce.org | 303-577-7924 |
| Email Confirmation * | |
| mkamensky@threebirdsalliance.org | |
| Organization Information | |
| Name of Organization * | |
| Three Birds Alliance (formerly Gateway Domestic Violence Services | |
| Address* | |
| Street Address | |
| PO Box 914 | |
| Address Line 2 | |
| City | State / Province / Region |
| Aurora | CO |
| Postal / Zip Code | Country |
| 80040 | United States of America |
| URL | |
| https://www.threebirdsalliance.org Copy/paste complete URL of organization's web site, including "https://" | |
| Is your organization Non-Profit?* | |
| | |
| Are you registered with the Colorado Secretary of Stat | e as a 501(c) charitable organization? * |
| Yes | |
| ○ No | |
| Drogram Information | |

Program Information

Program Description*

The Extended Stay Shelter provides housing for up to 90 days for victims/survivors of domestic violence, their children and their pets. While at shelter, clients receive basic needs support (including food, hygiene products and a safe place to sleep) coupled with ongoing advocacy and case management, information and referrals, safety planning, emotional support and connections to resources to help increase self-sufficiency and transition out of shelter. The longer length of stay allows victims more time to stabilize and get back on their feet.

Brief description of program or service for which organization intends to use the funds (1,000 character limit)

Total Served* Residents Served *

Total people served by the program for funding requested

| 47 | |
|--|--|
| Funding | |
| Are you applying for the Local Partnership or Stadium I If you are applying for both grants, please submit a separate grant applica Local Partnership Funding Stadium District Funding | |
| Type of Funding * Grant (cash only) In-kind sponsorship (city staff support) Grant and in-kind sponsorship | |
| Amount Requested * | Annual Budget * |
| \$ 2,500.00 | \$ 1,953,782.00 |
| Funding amount requested | Organization's annual budget |
| How would the funds be used?* | |
| If applying for stadium district funds, how would the funds be used to supp The funds will be used for expenses related to the Extended maintenance and vital document processing costs for client | Stay Shelter program including food, supplies, |
| Other Funding Sources* | |
| Arapahoe County Aid to Agencies, 18th Judicial District VAL Denver Foundation, State Emergency Solutions Grant | .E, Department of Criminal Justice - VOCA |
| Funding Received in Prior Year?* | |
| Yes, received a cash grantYes, received a cash grant & in-kind sponsorshipNever applied for Local Partnership Funding | Yes, received in-kind sponsorshipApplied, didn't receive grant or in-kind sponsorship |
| Specify how prior year's funds and/or in-kind services v | were used.* |
| Last year's funds were used for expenses related to the Ext maintenance and other shelter related costs. | |
| Was any of the funding not spent?* | |
| ○ Yes | No |
| How much of the funding was not spent?* 0 | |
| Please upload your updated W-9 Form signed and date | d in June or July 2025. * |
| W-9 July 2025.pdf | 109.78KB |
| Applications must have a W-9 to be considered | |
| Approved Amount by City Council | |
| | |

Youth Served *



Contact Information

Contact Name *

Jenny Starkey

Person to whom questions should be directed regarding this application

Email*

jenny@downtownlittleton.org

Email Confirmation *

jenny@downtownlittleton.org

Title *

Executive Director

Contact person's title

Phone *

303-868-4006

Organization Information

Name of Organization*

Littleton DDA

Address *

Street Address

2679 West Main Street

Address Line 2

Suite #300-720

City State / Province / Region

Littleton CO Postal / Zip Code Country 80120 USA

URL

https://littletondda.org/

Copy/paste complete URL of organization's web site, including "https://"

Is your organization Non-Profit?*

Yes No

Program Information

Program Description*

The Downtown Littleton Block Party is a distinct, unique, and popular event that brings thousands of people to Downtown Littleton. In 2025, the Littleton DDA and Littleton Merchant Association produced the first block party in over 5 years. The response was overwhelming with 14,000+ attendees, 65 community volunteers, 64 vendors, 28 sponsors, and two grants secured for the program. The event is a beloved community event that draws in many diverse audiences. While 46% of attendees reported 80120 as their primary zip code of residence, attendees came from as far away as Castle Pines, Denver, and other neighboring communities. The event featured 4 stages, 5 bands, buskers, aerialists, buskers, stilt walkers, beer gardens, a family creative zone, an inflatable maze and one epic fireworks show.

Brief description of program or service for which organization intends to use the funds (1,000 character limit)

Total Served*

Residents Served *

14.000

Total people served by the program for funding requested

12.000

| 4000 | |
|--|---|
| Funding | |
| Are you applying for the Local Partnership or Stadium | District Funding?* |
| If you are applying for both grants, please submit a separate grant applica | |
| Local Partnership Funding | |
| Stadium District Funding | |
| Type of Funding * | |
| Grant (cash only) | |
| In-kind sponsorship (city staff support) | |
| Grant and in-kind sponsorship | |
| If in-kind Sponsorship Requested, please state specific | tasks or services requesting city staff support |
| off-duty police officers for event + incident command | |
| public works and grounds crew support of event (barricade trash for event) | placement, road closure support, maintenance and |
| (i.e. street closures, police services, etc.) | |
| Amount Requested * | Annual Budget * |
| \$ 20,000.00 | \$ 400,000.00 |
| Funding amount requested | Organization's annual budget |
| How would the funds be used?* | |
| If applying for stadium district funds, how would the funds be used to supp | port youth activity programs? (1,000 character limit) |
| After producing the event for the first time and bringing it be what is needed to properly host this event. Funds would be (tents and stages), marketing, vendor management and suffunding would allow for the DDA and LMA to support local I that help attract event attendees to their locations and block | used for entertainment, infrastructure upgrades pport, and on-site labor. Additionally, the increased Main and Alamo businesses in creating activations |
| Other Funding Sources* | |
| LDDA will contribute at least \$35,000 to the event. LMA will secure an increased level of sponsorship support (\$17,000 vendor booth fees. | |
| Funding Received in Prior Year?* | |
| ○ Yes, received a cash grant | ○ Yes, received in-kind sponsorship |
| Yes, received a cash grant & in-kind sponsorship Never applied for Local Partnership Funding | Applied, didn't receive grant or in-kind sponsorship |
| Specify how prior year's funds and/or in-kind services | were used.* |
| We worked with LPD for event security (this in-kind donation this), PW for maintenance and road closure support, and rethat was used for materials, labor, marketing, and vendor mincredibly helpful and ensures that we can continue to prove | eceived a cash grant of roughly \$13,000 from the city nanagement. The city's support of the block party is |
| Was any of the funding not spent?* | |
| ○ Yes | No |
| How much of the funding was not spent?* | |
| 0 | |
| Please upload your updated W-9 Form signed and date | d in June or July 2025. * |
| LDDA W9 2025.pdf | 902.71KB |
| Applications must have a W-9 to be considered | |

Youth Served *

Approved Amount by City Council



Contact Information

| Contact | Name * | |
|---------|--------|--|
|---------|--------|--|

Kelly James

Person to whom questions should be directed regarding this application

kjames@lps.k12.co.us

Email Confirmation*

kjames@lps.k12.co.us

Title *

Director of Development, Events, and

Marketing

Contact person's title

Phone *

303-347-3419

Organization Information

| | | _ | | | * |
|------|----|------|------|-------|-----|
| Name | O† | Orga | niza | ıtion | ••• |

Littleton Public Schools and Littleton Public Schools

Foundation

Address *

Street Address

5776 S. Crocker St.

Address Line 2

City State / Province / Region

Littleton CO Postal / Zip Code Country

80120 **United States**

URL

https://lpsfoundation.com/events/spirit-celebration.html

Copy/paste complete URL of organization's web site, including "https://"

Is your organization Non-Profit?*

Yes
No

Are you registered with the Colorado Secretary of State as a 501(c) charitable organization?*

- Yes
- O No

Program Information

Program Description*

The Littleton Public Schools Foundation (LPSF) raises funds to support each LPS student's unique path to success. LPSF's six focus areas include career development, educator support, mental health resources, educational technologies, crisis relief, and health & wellness activities.

Brief description of program or service for which organization intends to use the funds (1,000 character limit)

Total Served *

Residents Served *

13.500

Total people served by the program for funding requested

10.000

| 13,500 | |
|---|--|
| Funding | |
| Are you applying for the Local Partnership or Stadium I If you are applying for both grants, please submit a separate grant applica Local Partnership Funding Stadium District Funding | • |
| Type of Funding * Grant (cash only) In-kind sponsorship (city staff support) Grant and in-kind sponsorship | |
| Amount Requested* | Annual Budget * |
| \$ 500.00 | \$ 1,300,000.00 |
| Funding amount requested | Organization's annual budget |
| How would the funds be used?* | |
| If applying for stadium district funds, how would the funds be used to support The funds will be used for a LPS Night at the Theater event will promote arts in the community and within Littleton Publishool theater programs. | in conjunction with Town Hall Arts Center. The event |
| Other Funding Sources* | |
| Individual and corporate partnerships | |
| Funding Received in Prior Year?* | |
| Yes, received a cash grant Yes, received a cash grant & in-kind sponsorship Never applied for Local Partnership Funding | Yes, received in-kind sponsorshipApplied, didn't receive grant or in-kind sponsorship |
| Please upload your updated W-9 Form signed and date | d in June or July 2025. * |
| LPSF_W9_2025.pdf | 119.03KB |
| Applications must have a W-9 to be considered | |
| Approved Amount by City Council | |
| | |

Youth Served *



Contact Information

Contact Name *

Kelly James

Person to whom questions should be directed regarding this application

kjames@lps.k12.co.us

Email Confirmation*

kjames@lps.k12.co.us

Title *

Director of Development, Events, and

Marketing

Contact person's title

Phone *

303-347-3419

Organization Information

| | _ | _ | | | * |
|------|----|-----|-------|-------|-----|
| Name | of | Ora | aniza | atior | າ " |

Littleton Public Schools Foundation

Address *

Street Address

5776 S. Crocker St.

Address Line 2

City State / Province / Region

Littleton CO Postal / Zip Code Country

80120 **United States**

URL

https://lpsfoundation.com/

Copy/paste complete URL of organization's web site, including "https://"

Is your organization Non-Profit?*

Yes \(\) No

Are you registered with the Colorado Secretary of State as a 501(c) charitable organization?*

O No

Program Information

Program Description*

The Littleton Public Schools Foundation (LPSF) raises funds to support each LPS student's unique path to success. LPSF's six focus areas include career development, educator support, mental health resources, educational technologies, crisis relief, and health & wellness activities.

Brief description of program or service for which organization intends to use the funds (1,000 character limit)

Total Served *

Residents Served *

13.500

Total people served by the program for funding requested

10.000

Total estimated Littleton residents served by the program in prior year

Youth Served*

13.500

| Funding | |
|--|--|
| Are you applying for the Local Partnership or Stadium D If you are applying for both grants, please submit a separate grant applicat Local Partnership Funding Stadium District Funding | |
| Type of Funding * Grant (cash only) In-kind sponsorship (city staff support) Grant and in-kind sponsorship | |
| If in-kind Sponsorship Requested, please state specific LPSF is requesting the following in-kind services for The Str help, use of the Littleton Museum parking lot, and aid with confidence (i.e. street closures, police services, etc.) | ide: police assistance, street closures and related |
| Amount Requested* | Annual Budget * |
| \$ 1,150.00 Funding amount requested | \$ 1,300,000.00 Organization's annual budget |
| How would the funds be used?* If applying for stadium district funds, how would the funds be used to support the \$1,150 will be applied toward a partnership for The Strict community and raises funds for health and wellness initiative Other Funding Sources* Individuals and corporate partnerships | de, which promotes health and wellness in the |
| Funding Received in Prior Year?* | |
| Yes, received a cash grantYes, received a cash grant & in-kind sponsorshipNever applied for Local Partnership Funding | Yes, received in-kind sponsorshipApplied, didn't receive grant or in-kind sponsorship |
| Specify how prior year's funds and/or in-kind services v | vere used. * |
| Funds from the prior year were used to support The Stride a | and its associated health and wellness initiatives. |
| Was any of the funding not spent?* | |
| ○ Yes | No |
| How much of the funding was not spent?* | |
| Please upload your updated W-9 Form signed and dated | l in June or July 2025. * |
| LPSF_W9_2025.pdf Applications must have a W-9 to be considered | 119.03KB |
| Approved Amount by City Council | |



Contact Information

Contact Name *

Kelly James

Person to whom questions should be directed regarding this application

kjames@lps.k12.co.us

Email Confirmation*

kjames@lps.k12.co.us

Title *

Director of Development, Events, and

Marketing

Contact person's title

Phone *

303-347-3419

Organization Information

| | | _ | | | * |
|------|----|------|------|-------|-----|
| Name | ot | Orga | niza | ıtion | ••• |

Littleton Public Schools Foundation

Address *

Street Address

5776 S. Crocker St.

Address Line 2

City State / Province / Region

Littleton Colorado Postal / Zip Code Country

80120 **United States**

URL

https://lpsfoundation.com/

Copy/paste complete URL of organization's web site, including "https://"

Is your organization Non-Profit?*

Yes \(\) No

Are you registered with the Colorado Secretary of State as a 501(c) charitable organization?*

O No

Program Information

Program Description*

The Littleton Public Schools Foundation (LPSF) raises funds to support each LPS student's unique path to success. LPSF's six focus areas include career development, educator support, mental health resources, educational technologies, crisis relief, and health & wellness activities.

Brief description of program or service for which organization intends to use the funds (1,000 character limit)

Total Served *

Residents Served *

13.500

Total people served by the program for funding requested

10.000

Total estimated Littleton residents served by the program in prior year

Youth Served*

13.500

Funding Are you applying for the Local Partnership or Stadium District Funding?* If you are applying for both grants, please submit a separate grant application for each grant Local Partnership Funding Stadium District Funding Type of Funding* Grant (cash only) In-kind sponsorship (city staff support) Grant and in-kind sponsorship Amount Requested* Annual Budget* \$ 1,500.00 \$ 1,300,000.00 Funding amount requested Organization's annual budget How would the funds be used?* If applying for stadium district funds, how would the funds be used to support youth activity programs? (1,000 character limit) The \$1,500 will help fund The Spirit Celebration, our premier event that raises critical resources to support the success of every Littleton Public Schools student. It will include a table for 10 guests. Other Funding Sources* Individual and corporate partnerships Funding Received in Prior Year?* Yes, received a cash grant Yes, received in-kind sponsorship Yes, received a cash grant & in-kind sponsorship Applied, didn't receive grant or in-kind sponsorship Never applied for Local Partnership Funding Specify how prior year's funds and/or in-kind services were used.* To aid in our efforts to help the students of Littleton Public Schools succeed on their unique path to success. Was any of the funding not spent?* Yes No How much of the funding was not spent?* Please upload your updated W-9 Form signed and dated in June or July 2025.* LPSF W9 2025.pdf 119.03KB Applications must have a W-9 to be considered **Approved Amount by City Council**



Contact Information

| Contact Name * | Title * | |
|---|---------------------------|--|
| Tim Jones | Executive Director | |
| Person to whom questions should be directed regarding this application | Contact person's title | |
| Email* | Phone * | |
| tim@longertables.org | 3102958627 | |
| Email Confirmation * | | |
| tim@longertables.org | | |
| Organization Information | | |
| Name of Organization * | | |
| Longer Tables | | |
| Address* | | |
| Street Address | | |
| 2695 S. Gilpin St | | |
| Address Line 2 | | |
| City | State / Province / Region | |
| Denver | CO | |
| Postal / Zip Code | Country | |
| 80210 | United States | |
| URL | | |
| longertables.org Copy/paste complete URL of organization's web site, including "https://" | | |
| Is your organization Non-Profit?* | | |
| ⊚ Yes ○ No | | |
| Are you registered with the Colorado Secretary of State as a 501(c) charitable organization?* | | |
| Yes | | |
| ○ No | | |
| Program Information | | |

Program Description*

Longer Tables: We create: LONGER TABLE GATHERINGS + CONNECTION EXPERIENCES. We help CITIES, COMPANIES + ORGANIZATIONS SET TABLES. We form leaders: WHO LEAD FROM A PLACE OF WHOLENESS AND TRUE IDENTITY THROUGH OUR 6-MONTH LEADERSHIP JOURNEY. For 2025-2026, We are partnering with Lift Up Littleton: Lift Up Littleton provides a place for people of all backgrounds to come together to collaborate and activate. We host monthly meetings at East Community Center. We share upcoming activities within each of the participating organizations and highlight how the greater group assist promoting the success of an activity by spreading the word, offering volunteers, providing resources, such as auction items, program content, equipment, etc. As a collective group, we identify and provide support for greater impact of local events of nonprofits, civic organizations, & local County. We have collectively support causes in the Littleton Community. liftuplittleton.org

| Total Served * 5,000 Total people served by the program for funding requested Youth Served * 500 Funding | Residents Served * 5,000 Total estimated Littleton residents served by the program in prior year | |
|--|---|--|
| runding | | |
| Are you applying for the Local Partnership or Stadium If you are applying for both grants, please submit a separate grant applie Local Partnership Funding Stadium District Funding | | |
| Type of Funding * | | |
| Grant (cash only) In-kind sponsorship (city staff support) Grant and in-kind sponsorship | | |
| If in-kind Sponsorship Requested, please state specif | ic tasks or services requesting city staff support | |
| Strategic Planning at Littleton City Center on Aug 6 will de request. (i.e. street closures, police services, etc.) | etermine more information on the in-kind sponsorship | |
| Amount Requested * | Annual Budget * | |
| \$ 20,000.00 | \$ 450,000.00 | |
| Funding amount requested | Organization's annual budget | |
| How would the funds be used?* | | |
| If applying for stadium district funds, how would the funds be used to su | pport youth activity programs? (1,000 character limit) | |
| In 2025 and 2026, Lift Up Littleton is partnering with Tim J Littleton: a 5,000 person community gathering around the Bega Park on Sept 24, 2005. With further engagement op the efforts of integrating community engagement in Littleto. The goal of these events is to create a healthier, inclusive resiliency and lessen social isolation. We envision a thriving where all people - no matter their story, background or idea a culture of growing polarization, a soaring mental health of report feeling isolated and alone, we know the work of bree | table with dinner on Main Street from Melting Pot to portunities in 2026. These funds will be used to further on with a strategic plan provided by community leaders. and more connected community to strengthen ng and healthy city, companies and neighborhoods entity - are connected, seen and feel like they belong. In crisis and a nation where every two out of five people | |
| Other Funding Sources* | | |
| We are in the process of fundraising with grants and sponsorships. We have received over \$150,000 in in-kind commitments and cash donations from Craig Hospital, All-Health Network, Littleton Rotary, South Metro Community Foundation, and other civic orgs, churches, businesses and individuals. Longer Tables is a 501c3 EIN: 87-1364602. and is acting as the fiscal sponsor for Lift Up Littleton Collaborative as it is a grass roots organization that is not yet a 501c3 and does not collect dues. Lift Up Littleton is fundraising for the Longer Tables Littleton community wide event and future engagement events through Longer Tables. | | |
| Funding Received in Prior Year?* | | |
| Yes, received a cash grant Yes, received a cash grant & in-kind sponsorship Never applied for Local Partnership Funding | Yes, received in-kind sponsorshipApplied, didn't receive grant or in-kind sponsorship | |
| Specify how prior year's funds and/or in-kind services | s were used.* | |
| For Longer Tables Littleton community-wide event on Sep | t 24,2025. longertableslittleton.com | |
| Was any of the funding not spent?* | | |
| ○ Yes | No | |

How much of the funding was not spent?*
0

Please upload your updated W-9 Form signed and dated in June or July 2025.*

W-9 Longer Tables 2025.pdf

305.16KB

Applications must have a W-9 to be considered

Approved Amount by City Council



Contact Information

| Contact Name * Cindy Hathaway Person to whom questions should be directed regarding this application | Title * Executive Director Contact person's title |
|--|---|
| Email * cindy@westernwelcomewee k.org | Phone* 303-794-4870 |
| Email Confirmation * cindy@westernwelcomeweek.org Organization Information | |
| Name of Organization* Western Welcome Week | |
| Address * Street Address 5890 S Bemis St Address Line 2 | |
| City Littleton Postal / Zip Code | State / Province / Region CO Country |
| 80120 URL | USA |
| https://www.westernwelcomeweek.org Copy/paste complete URL of organization's web site, including "https://" | |
| Is your organization Non-Profit?* No | |
| Are you registered with the Colorado Secretary of State Yes No | e as a 501(c) charitable organization?* |
| Program Information | |
| Program Description* | |

Western Welcome Week (WWW) is a cherished community tradition in the greater Littleton area. The 2026 celebration will mark its 98th year. Spanning 10 days, WWW features more than 30 events - organized not only be WWW but also by over 20 partner organizations. These events benefit dozens of local civic and nonprofit groups, often serving as their largest fundraiser and providing invaluable community visibility. As we look ahead, the Western Welcome Week board is already excitedly preparing for the milestone 100th anniversary celebration!

Brief description of program or service for which organization intends to use the funds (1,000 character limit)

Total Served*

Residents Served*

40,000

30,000

Total people served by the program for funding requested

| 15,000 | | |
|--|---|--|
| Funding | | |
| Are you applying for the Local Partnership or Stadium I If you are applying for both grants, please submit a separate grant applicat Local Partnership Funding Stadium District Funding | | |
| Type of Funding * Grant (cash only) In-kind sponsorship (city staff support) Grant and in-kind sponsorship | | |
| If in-kind Sponsorship Requested, please state specific | tasks or services requesting city staff support | |
| City staff support with street closures and maintenance department and Festival Day with the Maker/Crafter Fair and Gran Day. (i.e. street closures, police services, etc.) | | |
| Amount Requested * | Annual Budget * | |
| \$ 5,500.00 | \$ 110,000.00 | |
| Funding amount requested | Organization's annual budget | |
| How would the funds be used?* | | |
| If applying for stadium district funds, how would the funds be used to supp | ort youth activity programs? (1,000 character limit) | |
| There is a need for support with the operating expenses asserelies heavily on sponsorships and donations to fund these funding requests across the community, many sponsors are normal annual contributions to WWW. As we look ahead to working to set aside funds generated from ticketed events a funds are now being used to help offset current operating expenses. | costs. However, with an increasing number of stretching their recourses - leading to a reduction in the 100th anniversary celebration, WWW has been and those with participation fees. Unfortunately, these | |
| Other Funding Sources* | | |
| Sponsorships, donations, ticketed events, and participation fees. WWW has applied yearly, and granted the Arts & Culture Grant for specific events. In 2025 WWW applied for a grant to hire a consultant to address and prepare the board for new executive leadership in 2029 and building board capacity to ensure the continuation of the tradition of WWW well beyond the 100th anniversary. | | |
| Funding Received in Prior Year?* | | |
| Yes, received a cash grant Yes, received a cash grant & in-kind sponsorship Never applied for Local Partnership Funding | Yes, received in-kind sponsorshipApplied, didn't receive grant or in-kind sponsorship | |
| Specify how prior year's funds and/or in-kind services were used. * | | |
| City staff support with street closures and maintenance department for the Opening Night with Drone Show event and Festival Day with the Maker/Crafter Fair and Grand Parade. Police department services on Festival Day. | | |
| How much of the funding was not spent?* | | |
| 0 | | |
| Please upload your updated W-9 Form signed and dated | d in June or July 2025. * | |
| WWW W-9 July 2025.pdf Applications must have a W-9 to be considered | 51.66KB | |
| Approved Amount by City Council | | |

Youth Served *



Contact Information

| Contact information | |
|---|---|
| Contact Name * | Title * |
| Kristin Orlando Person to whom questions should be directed regarding this application | Assistant Director & Outreach Director Contact person's title |
| Email* | Phone* |
| admin@achildssong.org | 3034607408 |
| Email Confirmation * | |
| admin@achildssong.org | |
| Organization Information | |
| Name of Organization * A CHILDS SONG INC | |
| Address* | |
| Street Address | |
| 12301 Grant St | |
| Address Line 2 | |
| Unit 200 City | State / Province / Region |
| | CO |
| | Country |
| | United States |
| URL | |
| www.achildssong.org Copy/paste complete URL of organization's web site, including "https://" | |
| Is your organization Non-Profit?* | |
| | |
| Are you registered with the Colorado Secretary of State Yes No | e as a 501(c) charitable organization? * |
| Program Information | |

Program Description*

The Music Outreach project travels directly to community and residential facilities across the Colorado Front Range region to provide music programming to vulnerable populations, including foster, refugee, and juvenile youth, and young adults with disabilities. Music Outreach currently serves Shiloh House residential facilities, Title I Schools, and REVEL (day program for adults with disabilities). The Music Outreach project serves to improve emotional regulation, confidence building, and positive social interactions through collaborative drumming, learning keyboard and guitar, and songwriting.

Brief description of program or service for which organization intends to use the funds (1,000 character limit)

Total Served* Residents Served*

Total people served by the program for funding requested

300

| Youth Served * 300 | |
|--|---|
| Funding | |
| Are you applying for the Local Partnership or Stadium If you are applying for both grants, please submit a separate grant applica Local Partnership Funding Stadium District Funding | |
| Type of Funding * Grant (cash only) In-kind sponsorship (city staff support) Grant and in-kind sponsorship | |
| Amount Requested * \$ 8,000.00 Funding amount requested | Annual Budget * \$ 620,000.00 Organization's annual budget |
| How would the funds be used?* If applying for stadium district funds, how would the funds be used to supply ACS graciously requests funding to support our music educe programs serve marginalized youth through Jefferson Courcolor, immigrant youth, youth with physical and/or learning income families. ACS fosters community partnerships to be used to support these community outreach programs. The educator salaries and travel. Other Funding Sources* Grants, Donations, Fundraising, Educational Services, Spannerships to the community, and we see firsthand how profout service to the community, and we see firsthand how profout Funding Received in Prior Year?* Yes, received a cash grant Yes, received a cash grant & in-kind sponsorship Never applied for Local Partnership Funding Specify how prior year's funds and/or in-kind services | cation community outreach programs. These nty and surrounding communities, including youth of disabilities, youth in foster care, and youth from low- set serve these youth. Any funding received will be greatest expenses of these programs are music ce Rental ndraising, grants, and donations. It is an invaluable nd the results are - Music Changes Lives! Yes, received in-kind sponsorship Applied, didn't receive grant or in-kind sponsorship were used.* |
| Educators, travel expenses, instruments, printed music, eq. Was any of the funding not spent?* | uipment, supplies |
| ○ Yes | No |
| How much of the funding was not spent?* 0 Please upload your updated W-9 Form signed and date | d in June or July 2025. * |
| IRS W-9 2024-2025.pdf Applications must have a W-9 to be considered Approved Amount by City Council | 96.42KB |



Contact Information

Email Confirmation* diane@mcclymonds.us

| Contact Name * | Title * |
|--|--------------------------------|
| Diane McClymonds Person to whom questions should be directed regarding this application | Volunteer Contact person's til |
| Email* | Phone * |
| diane@mcclymonds.us | 303 523 0030 |

| Organization Information | | |
|---|---------------------------|--|
| Name of Organization * Arapahoe Santa Claus Shop | | |
| Address* | | |
| Street Address | | |
| PO Box 2004 | | |
| Address Line 2 | | |
| City | State / Province / Region | |
| Littleton | CO | |
| Postal / Zip Code | Country | |
| 80161 | United States | |
| URL | | |
| https://www.arapahoesantashop.net Copy/paste complete URL of organization's web site, including "https://" | | |
| Is your organization Non-Profit?* | | |
| Yes ○ No | | |
| Are you registered with the Colorado Secretary of State as a 501(c) charitable organization?* | | |
| Yes | | |
| ○ No | | |
| Program Information | | |

Program Description*

Since 1959 Arapahoe Santa Shop has provided holiday gifts to children in Littleton, Englewood and Sheridan who might not otherwise have a toy at Christmas or Hanukah. The organization is run by volunteers who focus on safety and functionality of age appropriate toys. Parents of infants through 10 year olds select the gifts for their child(ren). Families are referred by schools, counselors, churches and other social service providers, including Love Inc, North Littleton Promise and Doctors Care staff.

Brief description of program or service for which organization intends to use the funds (1,000 character limit)

| Total Served* | Residents Served * |
|---------------|--------------------|
| 1,187 | 368 |

Total people served by the program for funding requested

| Youth Served* | | | |
|---|--|--|--|
| 368 | | | |
| Funding | | | |
| Are you applying for the Local Partnership or Stadium I If you are applying for both grants, please submit a separate grant applicat Local Partnership Funding Stadium District Funding | | | |
| Type of Funding * Grant (cash only) In-kind sponsorship (city staff support) Grant and in-kind sponsorship | | | |
| Amount Requested * | Annual Budget * | | |
| \$ 1,200.00 | \$ 48,870.00 | | |
| Funding amount requested How would the funds be used?* | Organization's annual budget | | |
| | ort youth activity programs? (1.000 character limit) | | |
| If applying for stadium district funds, how would the funds be used to support youth activity programs? (1,000 character limit) Arapahoe Santa Claus Shop helped 368 Littleton children have a brighter Christmas in 2024. Parents chose three gifts, two books, and a bag of stocking stuffer items for each child age10 and younger, plus one game per family. Wearable socks, knitted hats, and fringed fleece blankets were also available for the children. | | | |
| For many years we operated out of the Arapahoe County Extension building on Datura Street in Littleton, which is now the Life Center Littleton. Our current location for our shopping days is graciously provided by St. James Presbyterian Church in Littleton. | | | |
| Your support will be used to purchase gifts to offer to families that will help create Christmas or Hanukah morning magic for hundreds of families in our community, and ensure no family in need is turned away due to a lack of toys. | | | |
| Other Funding Sources* | | | |
| Our primary support has always been from the local community. Individuals and clubs such as Littleton Optimists and Englewood Elks Ladies provide financial donations and Littleton Sertoma Club helps collect toys. CenturyLink has donated toys for many years. Telluray Foundation is a more recent funder. | | | |
| The organization is raising funds and awareness by participating in community events such as the Littleton Block Party, and we plan to be at the WWW Drone show and Longer Table event this fall. We have partnered with other nonprofits who offer discounted toys to help maximize our purchasing power. Our new board leadership is actively recruiting support and partnerships with local service clubs and other community organizations including Littleton Public Schools, and we have joined the Littleton Business Chamber. | | | |
| Funding Received in Prior Year?* | | | |
| Yes, received a cash grant Yes, received a cash grant & in-kind sponsorship Never applied for Local Partnership Funding | Yes, received in-kind sponsorshipApplied, didn't receive grant or in-kind sponsorship | | |
| Specify how prior year's funds and/or in-kind services were used. * | | | |
| Thank you for the \$900 grant! We have used the funds to purchase toys for this year's Santa Shop ~ discounted and on clearance when available! | | | |
| Was any of the funding not spent?* | | | |
| ○ Yes | No | | |
| How much of the funding was not spent?* | | | |

Please upload your updated W-9 Form signed and dated in June or July 2025.*

w9 ASCS 2025 .pdf 959.33KB

Applications must have a W-9 to be considered

Approved Amount by City Council



Contact Information

| Contact Name * | Title * | |
|---|----------------------------------|--|
| Jeanette Chavez Person to whom questions should be directed regarding this application | President Contact person's title | |
| Email* | Phone* | |
| jchavez12@gmail.com | 7202996922 | |
| Email Confirmation* | | |
| jchavez12@gmail.com | | |
| Organization Information | | |
| Name of Organization* | | |
| Bega Littleton Sister Cities Exchange | | |
| Address* | | |
| Street Address | | |
| 7218 S. Sundown Circle | | |
| Address Line 2 | | |
| City | State / Province / Region | |
| Littleton | CO | |
| Postal / Zip Code | Country | |
| 80120 | United States | |
| URL | | |
| https://www.littletonsistercity.com Copy/paste complete URL of organization's web site, including "https://" | | |
| Is your organization Non-Profit?* | | |
| | | |
| Are you registered with the Colorado Secretary of State as a 501(c) charitable organization?* | | |
| Yes | | |
| ○ No | | |

Program Information

Program Description*

International relations between residents of Bega, New South Wales, Australia and residents of Littleton, Colorado, U.S. have been maintained for 64 years by our People-to-People Sister City Exchange of delegates, including a high school student, every 21/2 years. In years ending in 1 and 6, Littleton delegates travel to Bega, Australia, and in years ending in 3 and 8, Bega delegates travel to Littleton. In 1996, this cultural exchange of adult delegates expanded to include young people. For 28 years, a student from any Littleton high school has been eligible to apply to be named Student Ambassador. The Student Ambassador receives a 10-day allexpenses paid trip as a Littleton delegate during the trip to Bega. The student is selected following his/her presentation on "Littleton, My Hometown" to a panel of Littleton judges. During each Australian trip, the Student Ambassador delivers the presentation to the Bega Shire Council. Our Littleton delegates will travel in March

| Total Served * | Residents Served * |
|--|---|
| 75 Total people served by the program for funding requested | 75 Total estimated Littleton residents served by the program in prior year |
| Youth Served * | |
| 1 | |
| Funding | |
| - unumg | |
| Are you applying for the Local Partnership or Stadium | District Funding?* |
| If you are applying for both grants, please submit a separate grant applic | cation for each grant |
| Local Partnership Funding | |
| Stadium District Funding | |
| Type of Funding * | |
| Grant (cash only) | |
| In-kind sponsorship (city staff support) | |
| Grant and in-kind sponsorship | |
| Amount Requested * | Annual Budget * |
| \$ 3,500.00 | \$ 16,000.00 |
| Funding amount requested | Organization's annual budget |
| How would the funds be used?* | 0 (4 000) |
| If applying for stadium district funds, how would the funds be used to sup Our primary focus is support for taking a Littleton high sch | |
| 2026. We pay all the student's travel expenses including in | |
| presentation to the LIttleton City Council as well as the Be | |
| Australian film festival, which will be publicized to promote | |
| community to become members and apply for future stude | ant ambassadorsnips. |
| Other Funding Sources * | f do |
| Only sources are from members: a) membership dues, b) from members. Our organization no longer receives grant | , |
| Funding Received in Prior Year?* | <u> </u> |
| Yes, received a cash grant | Yes, received in-kind sponsorship |
| Yes, received a cash grant & in-kind sponsorship | Applied, didn't receive grant or in-kind sponsorship |
| Never applied for Local Partnership Funding | |
| Please upload your updated W-9 Form signed and date | ed in June or July 2025. * |
| BLSCE Form W-9_20250723_0001.pdf | 1002.32KB |
| Applications must have a W-9 to be considered | |
| Approved Amount by City Council | |
| | |
| | |



Contact Information

| Contact Name * Binisha Shrestha Person to whom questions should be directed regarding this application Email * binishaw@gmail.com Email Confirmation * binishaw@gmail.com | Title * CEO Contact person's title Phone * 7204258357 |
|---|--|
| Organization Information | |
| Name of Organization * Colorado Nepalese Community Address * Street Address 4691 S Fraser Cir, Unit F Address Line 2 Unit F City Aurora Postal / Zip Code 80015 | State / Province / Region CO Country United States |
| URL https://conepalese.org/ Copy/paste complete URL of organization's web site, including "https://" | |
| Is your organization Non-Profit?* | |
| ⊚ Yes ○ No | * |
| Are you registered with the Colorado Secretary of Stat Yes No | e as a 501(c) charitable organization? * |
| Program Information | |
| | |

Program Description

Heritage in Motion is a traveling cultural arts program that celebrates the diverse identities, traditions, and contributions of our local communities through immersive art exhibits, performances, and shared meals. Rooted in community-led storytelling, this initiative brings to life the lived experiences of immigrants, refugees, and multicultural residents through culturally grounded artistic expression.

The requested funds will support Heritage in Motion, a traveling cultural arts program that uplifts immigrant, refugee, and multicultural communities through art exhibits, performances, and shared food experiences. This program centers community-led storytelling and culturally rooted expression to honor identity, memory, and lived experience. Each event is developed in partnership with local artists, organizations, and residents, ensuring authentic representation and meaningful community engagement.

| Total Served * | Residents Served * |
|---|--|
| 15,000 Total people served by the program for funding requested | 5,000 Total estimated Littleton residents served by the program in prior year |
| Youth Served * | , , <u>, , , , , , , , , , , , , , , , , </u> |
| 3000 | |
| Funding | |
| | no District Funding 2* |
| Are you applying for the Local Partnership or Stadiu If you are applying for both grants, please submit a separate grant app | |
| Local Partnership Funding | |
| Stadium District Funding | |
| Type of Funding * | |
| Grant (cash only) | |
| In-kind sponsorship (city staff support) | |
| Grant and in-kind sponsorship | |
| Amount Requested* | Annual Budget* |
| \$ 10,000.00 | \$ 48,000.00 |
| Funding amount requested | Organization's annual budget |
| How would the funds be used?* | |
| If applying for stadium district funds, how would the funds be used to s | |
| The requested funds will support Heritage in Motion, a tr refugee, and multicultural communities through art exhib | |
| experiences. This program centers community-led storyt | |
| memory, and lived experience. Each event is developed | |
| residents, ensuring authentic representation and meanin | gful community engagement. |
| Other Funding Sources * | |
| To support Heritage in Motion, our organization is activel include private foundations, local arts councils, and city of | |
| volunteer contributions from community partners and are | - |
| philanthropic organizations for sponsorship opportunities | s. Additionally, we plan to launch a community |
| fundraising campaign to further engage local stakeholde | rs and build grassroots support. |
| Funding Received in Prior Year?* | |
| Yes, received a cash grant | Yes, received in-kind sponsorship |
| Yes, received a cash grant & in-kind sponsorship | Applied, didn't receive grant or in-kind sponsorship |
| Never applied for Local Partnership Funding | |
| Please upload your updated W-9 Form signed and da | |
| CNC-w9.pdf | 705.33KB |
| Applications must have a W-9 to be considered | |
| Approved Amount by City Council | |



Contact Information

| * | -··· * |
|---|---------------------------|
| Contact Name * | Title * |
| Lauren OConnell | Director |
| Person to whom questions should be directed regarding this application | Contact person's title |
| Email* | |
| laurenoconnell48@gmail.co | Phone * |
| m | 3039468875 |
| Email Confirmation * | |
| laurenoconnell48@gmail.com | |
| Organization Information | |
| Name of Organization* | |
| _ | |
| Cycling Without Age Littleton (CWAL) | |
| Address* | |
| Street Address | |
| 6698 S. Iris Street #620711 | |
| Address Line 2 | |
| City | State / Province / Region |
| Littleton | CO |
| Postal / Zip Code | Country |
| 80162 | United States |
| URL | |
| https://cwalittleton.com/ | |
| Copy/paste complete URL of organization's web site, including "https://" | |
| Is your organization Non-Profit?* | |
| | |
| Are you registered with the Colorado Secretary of State as a 501(c) charitable organization?* | |
| Yes | |
| ○ No | |
| Program Information | |
| | |

Program Description

Cycling Without Age Littleton (CWAL) is an all-volunteer nonprofit breaking the barrier of isolation for older adults and individuals with mobility or developmental challenges and special needs. We provide free outdoor trishaw rides that connect riders with Littleton's vibrant trails, parks, and cultural spaces. Our electric-assist trishaws feature a forward-facing bench for one or two passengers, piloted by trained volunteers. Since 2019, we've created over 9,000 joyful, shared experiences along scenic routes like the South Platte River Trail and Hudson Gardens. Each ride fosters connection, dignity, and well-being for both passengers and volunteers. With over 140 dedicated volunteers, CWAL delivers high-impact, cost-effective service, generating a 5:1 social return on investment. We believe the most vulnerable should never be the least visible and that every ride builds a more compassionate, connected Littleton.

| Total Served * Residents Served * | | |
|---|--|--|
| 3,787 1,800 | | |
| Total people served by the program for funding requested Total estimated Littleton residents served by the program in prior year | | |
| Youth Served * | | |
| 700 | | |
| Funding | | |
| Are you applying for the Local Partnership or Stadium District Funding?* | | |
| If you are applying for both grants, please submit a separate grant application for each grant | | |
| Local Partnership Funding | | |
| Stadium District Funding | | |
| Type of Funding * | | |
| Grant (cash only) | | |
| In-kind sponsorship (city staff support) | | |
| Grant and in-kind sponsorship | | |
| Amount Requested * Annual Budget * | | |
| \$ 19,000.00 \$ 55,000.00 | | |
| Funding amount requested Organization's annual budget | | |
| How would the funds be used?* | | |
| If applying for stadium district funds, how would the funds be used to support youth activity programs? (1,000 character limit) | | |
| CWAL will use the funds to purchase a new trishaw to expand access for Littleton seniors, youth with developmental and physical needs, young adults transitioning to independence, and those affected by trauma or neglect. We will outreach to more local schools such as LPS' Willow Academy, and community groups to improve quality of life through outdoor recreation and events that foster connection and belonging. This support is timely, as we need to replace some of our older trishaws next year and we just learned that trishaw prices and shipping have increased by over 30%. A new trishaw will help us meet growing local demand and prevent service gaps. Our rides promote outdoor equity by removing physical, economic, and social barriers to nature. They offer inclusive, sensory-friendly experiences for those who otherwise face limited access to Littleton's natural and cultural spaces. Everyone deserves to feel the wind in their hair and we need your help to make that possible. | | |
| Other Funding Sources* | | |
| donations, sponsorships, grants | | |
| Funding Received in Prior Year?* | | |
| ○ Yes, received a cash grant○ Yes, received in-kind sponsorship | | |
| Yes, received a cash grant & in-kind sponsorship Never applied for Local Partnership Funding Applied, didn't receive grant or in-kind sponsorship | | |
| Please upload your updated W-9 Form signed and dated in June or July 2025. * | | |
| W-9 7-19-25.pdf 3.05MB | | |
| Applications must have a W-9 to be considered | | |
| Approved Amount by City Council | | |
| | | |



Contact Information

| Contact Name * | Title * | |
|---|---|--|
| Mindy Wilson | Development Manager | |
| Person to whom questions should be directed regarding this application | Contact person's title | |
| Email* | | |
| communityoutreach@hsspv. | Phone* | |
| org | 7202757059 | |
| Email Confirmation * | | |
| communityoutreach@hsspv.org | | |
| Organization Information | | |
| Name of Organization* | | |
| Humane Society of South Platte Valley | | |
| Address* | | |
| Street Address | | |
| 2129 W Chenango Ave | | |
| Address Line 2 | | |
| City | State / Province / Region | |
| Littleton | CO | |
| Postal / Zip Code | Country | |
| 80120 | US | |
| URL | | |
| https://hsspv.org/ Copy/paste complete URL of organization's web site, including "https://" | | |
| Is your organization Non-Profit?* | | |
| | | |
| Are you registered with the Colorado Secretary of State as a 501(c) charitable organization?* | | |
| Yes | | |
| ○ No | | |
| Program Information | | |
| Program Description * | | |
| Last year, we were able to expand our youth volunteer pro | ogram immensely from the funds we received from the | |

2024 grant. We are hoping to keep this momentum going. We are now able to go offsite to local schools, as well invite these schools & summer camp groups to the shelter. Teaching local youth about pet care & commitment is a big part of our mission. Educating youth sets a stage for these young animal lovers for the rest of their lives and can cause a positive impact on the future community.

Brief description of program or service for which organization intends to use the funds (1,000 character limit)

Total Served* Residents Served* 2.000 1.000

Total people served by the program for funding requested

| Youth Served* | |
|--|--|
| 500+ | |
| Funding | |
| Are you applying for the Local Partnership or Stadium E If you are applying for both grants, please submit a separate grant applicat Local Partnership Funding Stadium District Funding | |
| Type of Funding * Grant (cash only) In-kind sponsorship (city staff support) Grant and in-kind sponsorship | |
| Amount Requested * | Annual Budget * |
| \$ 2,500.00 Funding amount requested | \$ 1,331,493.00 Organization's annual budget |
| How would the funds be used?* | |
| If applying for stadium district funds, how would the funds be used to support | ort youth activity programs? (1,000 character limit) |
| The funds will be used as they were last year. We will travel We will also be able to staff events at the shelter when local shelter. In addition, we provide activities to the students to me | schools and youth groups come directly to the |
| Other Funding Sources* | |
| Donor contributions and local businesses | |
| Funding Received in Prior Year?* | |
| Yes, received a cash grant Yes, received a cash grant & in-kind sponsorship Never applied for Local Partnership Funding | Yes, received in-kind sponsorshipApplied, didn't receive grant or in-kind sponsorship |
| Specify how prior year's funds and/or in-kind services v | vere used.* |
| Last year, we used our grant funding to provide everything li | sted in the Program Description above. |
| Was any of the funding not spent?* | |
| ○ Yes | No |
| How much of the funding was not spent?* | |
| 0 | |
| Please upload your updated W-9 Form signed and dated | l in June or July 2025. * |
| CCF07082025_00000.pdf Applications must have a W-9 to be considered | 452.93KB |
| Approved Amount by City Council | |
| Toppleton Amount by Only Soundin | |
| | |



Contact Information

| Contact Name * | Title * |
|---|--|
| Susan Thornton | Chair |
| Person to whom questions should be directed regarding this application | Contact person's title |
| Email* | |
| susan@thinkstrategicallyfirst | Phone* |
| .com | 303-798-0844 |
| Email Confirmation * | |
| susan@thinkstrategicallyfirst.com | |
| | |
| Organization Information | |
| Name of Organization * | |
| | |
| Immigrant Pathways Colorado | |
| Address * | |
| Street Address | |
| 474 W. Easter Ave. | |
| Address Line 2 | |
| City | State / Province / Region |
| Littleton | CO |
| Postal / Zip Code | Country |
| 80120 | USA |
| URL | |
| https://ImmigrantPathways.org Copy/paste complete URL of organization's web site, including "https://" | |
| Is your organization Non-Profit?* | |
| | |
| Are you registered with the Colorado Secretary of Stat | e as a 501(c) charitable organization?* |
| Yes | |
| ○ No | |
| Program Information | |
| Program Description* | |
| Program Description | vente te decumente d'Israel\imperieurente urb e baue |

Immigrant Pathways Colorado makes self-develop0ment grants to documented (legal) immigrants who have very low income. The grants may be for applying for citizenship, learning English, training for work, or recertification/re-training for professionals such as doctors, lawyers, nurses, teachers, dentists and pilots, who must be re-trained or re-certified to practice their chosen profession in Colorado. Grants of a maximum of \$1,000 are never made to the individual immigrant, but only to the training or recertification organization.

Brief description of program or service for which organization intends to use the funds (1,000 character limit)

| Total Served* | Residents Served * |
|---------------|--------------------|
| 95 | 45 |

Total people served by the program for funding requested

45

| Youth Served * | |
|--|--|
| 0 | |
| Funding | |
| Are you applying for the Local Partnership or Stadium I If you are applying for both grants, please submit a separate grant applicat Local Partnership Funding Stadium District Funding | • |
| Type of Funding * Grant (cash only) In-kind sponsorship (city staff support) Grant and in-kind sponsorship | |
| If in-kind Sponsorship Requested, please state specific Requesting publicity about IPC's events in the Littleton Repsites. (i.e. street closures, police services, etc.) | |
| Amount Requested * \$ 6,000.00 Funding amount requested | Annual Budget * \$ 52,489.00 Organization's annual budget |
| How would the funds be used?* | |
| If applying for stadium district funds, how would the funds be used to supp | ort youth activity programs? (1,000 character limit) |
| Self-development grants will be issued to documented, low-world. Grants will be a maximum of \$1,000 (or less, depend certification) and will never be made directly to the immigran | ling on the immigrant's need for training or re- |
| Other Funding Sources* | |
| Littleton Rotary Foundation, First Bank, First Citizens Bank, Association, and generous community donors. | Alpine Bank, American Immigration Lawyers |
| Funding Received in Prior Year?* | |
| Yes, received a cash grant Yes, received a cash grant & in-kind sponsorship Never applied for Local Partnership Funding | Yes, received in-kind sponsorshipApplied, didn't receive grant or in-kind sponsorship |
| Specify how prior year's funds and/or in-kind services v | were used.* |
| Funds were used to make self-development grants to docur | mented, low-income immigrants and refugees. |
| Was any of the funding not spent?* | |
| ○ Yes | No |
| How much of the funding was not spent?* 0 | |
| Please upload your updated W-9 Form signed and date | d in June or July 2025. * |
| IPC w9 6.24.2025.html | 2.79KB |
| Applications must have a W-9 to be considered | |
| Approved Amount by City Council* | |
| | |



Contact Information

| Contact Name * | Title * |
|---|---|
| Tom Gardinier Person to whom questions should be directed regarding this application | President; Littleton Crabapple Route, inc. Contact person's title |
| Email* | Phone* |
| T_Gardinier@Yahoo.com | 720-937-7408 |
| Email Confirmation * | |
| T_Gardinier@Yahoo.com | |
| Organization Information | |
| Name of Organization* | |
| Littleton Crabapple Route, inc. | |
| Address* | |
| Street Address | |
| 8962 W Brandt PI | |
| Address Line 2 | |
| City | State / Province / Region |
| Littleton | CO |
| Postal / Zip Code | Country |
| 80123 | Arapahoe |
| URL | |
| https://littletoncrabappleroute.org Copy/paste complete URL of organization's web site, including "https://" | |
| Is your organization Non-Profit?* | |
| | |
| Are you registered with the Colorado Secretary of Stat | e as a 501(c) charitable organization?* |
| Yes | |
| ○ No | |
| | |

Program Information

Program Description*

The purpose of the Littleton Crabapple Route nonprofit is to continue privately what was originally a city government program. It was begun more than 60 years ago. The primary goal was civic improvement and slum and blight prevention through beautification of the city. We will continue that effort by encouraging the planting and maintenance of additional flowering crabapple trees. While our focus will be on streets marked as part of the route, planting throughout the city by private individuals and organizations will be encouraged. The Littleton Crabapple Route will be emphasized as an educational resource showing how citizen involvement in beautification efforts can benefit the community. The route is considered a high priority beautification project for the city of Littleton. Our organization acts in support of that priority.

| Total Served * 100,000 Total people served by the program for funding requested Youth Served * 10,000 Funding | Residents Served * 35,000 Total estimated Littleton residents served by the program in prior year |
|--|---|
| Are you applying for the Local Partnership or Stadium D If you are applying for both grants, please submit a separate grant application Local Partnership Funding Stadium District Funding Type of Funding Grant (cash only) | |
| In-kind sponsorship (city staff support)Grant and in-kind sponsorship | |
| Amount Requested * \$ 5,000.00 Funding amount requested | Annual Budget * \$ 5,000.00 Organization's annual budget |
| How would the funds be used?* If applying for stadium district funds, how would the funds be used to support our current Priority is to complete the replacement of the fad and begin the process of hosting a 10k crabapple route fund two also have commitments to 5 private property owners who need a replacement tree. | ed signs un. |
| Other Funding Sources * Our two primary funding sources have run across difficult tim | es and are unable to continue |
| Funding Received in Prior Year?* | |
| Yes, received a cash grantYes, received a cash grant & in-kind sponsorshipNever applied for Local Partnership Funding | Yes, received in-kind sponsorship Applied, didn't receive grant or in-kind sponsorship |
| Specify how prior year's funds and/or in-kind services we were replaced dead and diseased trees along the route as we | |
| Was any of the funding not spent?* | |
| ○ Yes | No |
| How much of the funding was not spent?* | |
| Please upload your updated W-9 Form signed and dated | in June or July 2025.* |
| W-9.docx Applications must have a W-9 to be considered Approved Amount by City Council | 13.2KB |



Contact Information

Contact Name *

Jenny Starkey

Person to whom questions should be directed regarding this application

Email*

jenny@downtownlittleton.org

Email Confirmation *

jenny@downtownlittleton.org

Title *

Executive Director

Contact person's title

Phone *

3038684006

Organization Information

Name of Organization*

Littleton DDA

Address *

Street Address

2679 West Main Street

Address Line 2

Suite #300-720

City State / Province / Region

Littleton CO Postal / Zip Code Country

80120 **United States**

URL

https://littletondda.org/

Copy/paste complete URL of organization's web site, including "https://"

Is your organization Non-Profit?*

Yes No

Program Information

Program Description*

The Littleton Downtown Development Authority (LDDA) is launching a new public art program to enhance the vibrancy, identity, and walkability of downtown Littleton. Public art improves quality of life, sparks community pride, fosters social connection, and supports economic vitality by increasing foot traffic and attracting visitors. In 2025, the LDDA is laying the groundwork for long-term success by researching best practices, engaging stakeholders, and installing foundational art bases. With a focus on local and regional artists, the program will celebrate Littleton's creativity, culture, and community. Future installations will prioritize accessibility, placemaking, and interactive elements that reflect the district's character and invite public engagement. This initiative will serve as a catalyst for beautification, cultural expression, and economic development, creating a sense of place that is authentically Littleton.

Brief description of program or service for which organization intends to use the funds (1,000 character limit)

Total Served *

Residents Served *

20.000

Total people served by the program for funding requested

1.000

| Youth Served* | |
|--|--|
| unknown | |
| Funding | |
| Are you applying for the Local Partnership or Stadium D If you are applying for both grants, please submit a separate grant applicate Local Partnership Funding Stadium District Funding | |
| Type of Funding * Grant (cash only) In-kind sponsorship (city staff support) Grant and in-kind sponsorship | |
| If in-kind Sponsorship Requested, please state specific of the City may provide in-kind support through Public Works start base installation. (i.e. street closures, police services, etc.) | |
| Amount Requested* | Annual Budget* |
| \$ 20,000.00 Funding amount requested | \$ 400,000.00 Organization's annual budget |
| How would the funds be used?* | |
| If applying for stadium district funds, how would the funds be used to support | ort youth activity programs? (1,000 character limit) |
| In 2026, funds will be used to activate the foundational infras Artists, selecting 3–5 temporary or semi-permanent public at prepared bases throughout the district. Funding will cover ar installation support, signage, and insurance needs. Additional interactive or kinetic art features, and promotional efforts suc program will prioritize local and regional artists and include a | rt installations, and coordinating their placement on tist stipends or honorariums, transportation, al funds may be allocated to maintenance, ch as digital tours, QR codes, or printed guides. The |
| Other Funding Sources* | |
| The LDDA will look into additional grant funding from entities District), Colorado Creative Industries, and corporate or four partnerships with Arapahoe Community College and the City through Public Works staff to assist with permitting, site prepmay be sought through community volunteers, local business organizations like the South Suburban Public Arts Committee | ndation sponsorships. We are also exploring of Littleton. The City may provide in-kind support paration, and art base installation. Additional support is sponsorships, and partnerships with regional arts |
| Funding Received in Prior Year?* | |
| Yes, received a cash grantYes, received a cash grant & in-kind sponsorshipNever applied for Local Partnership Funding | Yes, received in-kind sponsorshipApplied, didn't receive grant or in-kind sponsorship |
| Specify how prior year's funds and/or in-kind services we Currently we are in the research and discovery phase. The Listes and is currently working to obtain bids for art base considering the end of FY2025. | DDA has met with the city to look at potential art |
| Was any of the funding not spent?* | |
| Yes | ○ No |
| How much of the funding was not spent?* 10,350 | |
| Please upload your updated W-9 Form signed and dated | l in June or July 2025. * |
| LDDA W9 2025.pdf | 902.71KB |

Applications must have a W-9 to be considered



Contact Information

| Contact Name * | Title * |
|---|---|
| Maureen Shannon | Executive Director |
| Person to whom questions should be directed regarding this application | Contact person's title |
| Email* | |
| maureen@northlittletonprom | Phone * |
| ise.org | 303-565-0079 |
| Email Confirmation * | |
| maureen@northlittletonpromise.org | |
| Organization Information | |
| Name of Organization* | |
| North Littleton Promise | |
| | |
| Address * | |
| Street Address | |
| East Community Center, Attn: North Littleton Promise | |
| Address Line 2 | |
| 5933 S. Fairfield St. | |
| City | State / Province / Region |
| Littleton | CO |
| Postal / Zip Code | Country |
| 80120 | United States |
| URL | |
| https://www.northlittletonpromise.org Copy/paste complete URL of organization's web site, including "https://" | |
| Is your organization Non-Profit?* | |
| | |
| Are you registered with the Colorado Secretary of State | e as a 501(c) charitable organization?* |
| Yes | |
| ○ No | |
| Program Information | |
| | |

Program Description*

For nearly 20 years, North Littleton Promise (NLP) has served northeast Littleton's immigrant community, building relationships and putting action to "Love thy neighbor." Where nearly all families are low-income and primarily Spanish-speaking, NLP closes the achievement gap for immigrant children, fosters community-led engagement, and supports families across generations. This grant will bolster general operations, with a focus on afterschool and summer programming, and family engagement. NLP offers K–12 educational enrichment, mentorship, character development, and soccer teams that teach teamwork and leadership. Summer camps focus on academics and include field trips. High schoolers develop job skills and explore career paths through a leadership development program. NLP also hosts monthly parent meetings and offers a Spanish/English Language Program that promotes bilingual exchange and cross-cultural understanding, making NLP a trusted hub for immigrant families.

Brief description of program or service for which organization intends to use the funds (1,000 character limit)

Total Served*

Residents Served *

125

150

Total people served by the program for funding requested

Total estimated Littleton residents served by the program in prior year

Youth Served *

99

Funding

Are you applying for the Local Partnership or Stadium District Funding?*

If you are applying for both grants, please submit a separate grant application for each grant

- Local Partnership Funding
- Stadium District Funding

Type of Funding *

- Grant (cash only)
- In-kind sponsorship (city staff support)
- Grant and in-kind sponsorship

Amount Requested *

Annual Budget*

\$ 10,000.00

\$ 508,418.00

Funding amount requested

Organization's annual budget

How would the funds be used?*

If applying for stadium district funds, how would the funds be used to support youth activity programs? (1,000 character limit)

North Littleton Promise builds life-giving relationships with immigrant kids and families to foster faith, education, and leadership in a Christ-centered community. This grant will support general operations across all programs. After-school KIDS CLUB and LIFE Club offer homework help, mentorship, STEM activities, and Bible-based lessons, with alternative options for non-faith participants. ADVENTURE DAYS and SUMMER ACADEMY are five-week summer programs promoting academic and personal growth through learning, field trips, and enrichment. The HIGH SCHOOL LEADERSHIP PROGRAM includes year-round mentorship, employment readiness, and summer camp roles. Youth soccer teams build leadership and community. Parent engagement includes workshops and cultural events. The BILINGUAL LANGUAGE PROGRAM launched in 2024 to strengthen communication between parents and schools and connect families with community partners through shared conversation sessions.

| Other Funding Sources* North Littleton Promise is committed to long-term impact thr relationships. NLP leverages its relationships with individual partnerships to sustain its initiatives. NLP's growing network while strengthening community ownership. Additionally, NLF ongoing support for youth programs, language classes, and sources for 2024: Foundations- \$212,800 Individuals- \$101,000 Campaigns- \$39,000 Events- \$60,000 Participation Fees- \$20,000 Summer Programs-\$40,000 Churches- \$37,500 Other- \$1,100 | I donors, local churches, foundation grants, and city of volunteers and alumni also help extend capacity fundraising events, such as La Fiesta, ensure |
|--|--|
| Thus far in 2025, NLP has received \$131,187.40 in donor grelluray Foundation- \$50,000 Stoller Foundation- \$15,000 Reiter Family Foundation- \$10,000 | iving, as well as the following grant awards: |
| Funding Received in Prior Year?* | |
| Yes, received a cash grantYes, received a cash grant & in-kind sponsorshipNever applied for Local Partnership Funding | Yes, received in-kind sponsorship Applied, didn't receive grant or in-kind sponsorship |
| Specify how prior year's funds and/or in-kind services v | were used.* |
| Last year, funds helped NLP serve 85 students through its 8 and 99 students during the Fall session. Additionally, NLP b parents in Fall 2024, with over 40 participants and growing alongside youth programming to increase accessibility. NLP community partners. With the launch of the Bilingual Langua power of language exchange in building community. The proconversational English while also offering Spanish lessons is support the English classes, creating a vibrant, cross-cultura both groups to practice, connect, and build friendships. | egan offering Conversational English classes for demand. Classes are family-friendly and held also introduced Spanish classes at the request of age Arts program, NLP is learning firsthand the ogram helps Spanish-speaking parents develop for English speakers. Many Spanish learners now |

Was any of the funding not spent?*

○ Yes

 No

How much of the funding was not spent? $^{\color{red}\star}$

0

Please upload your updated W-9 Form signed and dated in June or July 2025.*

NLP W-9 2025.pdf 346.64KB

Applications must have a W-9 to be considered

Approved Amount by City Council



Contact Information

| Contact Name * | Title * |
|--|---|
| lan Nawalinski | Development Manager |
| Person to whom questions should be directed regarding this application | Contact person's title |
| Email* | |
| ian.nawalinski@outdoorlabfo | Phone* |
| undation.org | 610-804-3115 |
| Email Confirmation* | |
| ian.nawalinski@outdoorlabfoundation.org | |
| Organization Information | |
| Organization information | |
| Name of Organization* | |
| Outdoor Lab Foundation | |
| Address* | |
| Street Address | |
| 581 Conference Place | |
| Address Line 2 | |
| City | State / Province / Region |
| Golden | CO |
| Postal / Zip Code | Country |
| 80401 | United States |
| URL | |
| https://www.outdoorlabfoundation.org/ Copy/paste complete URL of organization's web site, including "https://" | |
| Is your organization Non-Profit?* | |
| ● Yes ○ No | |
| Are you registered with the Colorado Secretary of Stat | e as a 501(c) charitable organization?* |
| Yes | |
| ○ No | |
| Program Information | |
| | |

Program Description*

Our overarching goal is to ensure that all 5,000 sixth-grade students in Jeffco have access to the incredible outdoor experiential education programming at Outdoor Lab. Every year, Outdoor Lab introduces thousands of sixth-grade students to the transformative benefit of spending time in nature. Since 2013, the Foundation has made the Tuition Assistance Program a focal point of our charitable work. Making sure every student, regardless of their articulation area or socio-economic background, can attend Outdoor Lab is our priority. The Foundation specifically allocates funds based on each school's free and reduced lunch (FRL) populations and the associated tuition gaps at participating schools. During the 2024-25 schoolyear, the Foundation directed \$175,000 in grants to Jeffco schools, including Bradford, Falcon Bluffs, Summit Ridge, Ken Caryl, and Deer Creek. These gifts fully supported approx. 225 FRL-qualifying students in and around Littleton who attended Outdoor Lab for free.

| Total Served* | Residents Served * |
|---|---|
| 900 | 900 |
| Total people served by the program for funding requested | Total estimated Littleton residents served by the program in prior year |
| Youth Served * | |
| 900 | |
| Funding | |
| Are you applying for the Local Partnership or Stadium D | Nictrict Funding 2* |
| If you are applying for both grants, please submit a separate grant applicat | |
| Local Partnership Funding | ion for each grant |
| Stadium District Funding | |
| | |
| Type of Funding * | |
| Grant (cash only) | |
| In-kind sponsorship (city staff support)Grant and in-kind sponsorship | |
| | |
| Amount Requested * | Annual Budget * |
| \$ 20,000.00 | \$ 857,576.00 |
| Funding amount requested | Organization's annual budget |
| How would the funds be used?* | |
| If applying for stadium district funds, how would the funds be used to support | |
| The Foundation is particularly focused on making sure our unattend Outdoor Lab free of cost. 32% of Jeffco sixth-grade s | • |
| Nearly half of all participating sixth-grade classes have an F | |
| that approximately 1,500 sixth-grade students will be eligible | |
| to participate in Outdoor Lab. In Littleton, we anticipate near qualify for FRL, requiring tuition assistance for 1 in 4 student | |
| quality for FRE, roquiling taltion application for First Stadesh | to attoria the program. |
| In addition, the cost of tuition to attend Outdoor Lab continue | |
| \$325 per student. During the 2024-25 schoolyear, unpaid FF | |
| approx. \$67,000. Participating schools include: Bradford, De Ridge. | er Creek, Falcon bluns, Nen Caryi, and Summit |
| Other Funding Sources* | |
| Every year, the Foundation secures funds from diverse sour | ces of revenue to increase support for our program |
| First, we engage with both local and national corporate parti | |
| from King Soopers, Safeway, Walmart, Waste Management | |
| Council the Foundation works with lead foundations and le | and governments to fund our strategic priorities. We |
| Second, the Foundation works with local foundations and local have received consistent support from the largest municipal | |
| Lakewood, Wheat Ridge, and Westminster. Private foundati | • |
| Colorado Gives Foundation, and Jeffco Open Space Foundation | ation. |
| Third, we raise philanthropic funds from donors who give in | a variety of ways. This includes our annual gala that |
| raises approximately \$100,000, our annual "Colorado Gives | |
| Funding Received in Prior Year?* | |
| Yes, received a cash grant | Yes, received in-kind sponsorship |
| Yes, received a cash grant & in-kind sponsorship | Applied, didn't receive grant or in-kind sponsorship |

Please upload your updated W-9 Form signed and dated in June or July 2025.*

OLF W-9 2025.pdf 76.53KB

Applications must have a W-9 to be considered

Never applied for Local Partnership Funding



Contact Information

| Contact Name * | Title * |
|--|--|
| Brooke Shellhorn | Development Manager |
| Person to whom questions should be directed regarding this application | Contact person's title |
| Email* | Phone* |
| brooke@dirtcoffee.org | 303-515-0851 |
| Email Confirmation * | |
| brooke@dirtcoffee.org | |
| Organization Information | |
| Name of Organization* | |
| Roots Colorado dba DIRT Coffee | |
| | |
| Address * | |
| Street Address | |
| 2506 W Alamo Ave | |
| Address Line 2 | |
| City | State / Province / Region |
| Littleton | CO |
| Postal / Zip Code | Country |
| 80120 | USA |
| URL | |
| www.dirtcoffee.org Copy/paste complete URL of organization's web site, including "https://" | |
| Is your organization Non-Profit?* | |
| | |
| Are you registered with the Colorado Secretary of State | te as a 501(c) charitable organization?* |
| Yes | |
| ○ No | |
| | |

Program Information

Program Description*

DIRT cultivates intentional workspaces for neurodivergent individuals to access meaningful, integrated, & equitable employment. Our three evidence-based programs operate out of a community café & Workforce Center in Historic Downtown Littleton, offering a holistic approach to decreasing the 80.7% unemployment rate among neurodivergent & disabled people (U.S. Bureau of Labor Statistics). Beyond programming, DIRT hosts community events & fundraisers that reach further than raising critical funds; we build & empower communities by bringing together diverse minds & perspectives under one shared vision. Together, we celebrate the unique strengths of neurodivergent individuals while creating access & opportunity for underserved communities. We warmly invite the City of Littleton to join us in building accessible communities by sponsoring our 2026 Littleton events, showcasing a united front in creating more accessible workplaces for the neurodivergent population.

| Total Served * 200 Total people served by the program for funding requested | Residents Served * 100 Total estimated Littleton residents served by the program in prior year |
|---|---|
| Youth Served * 30 | |
| Funding | |
| Are you applying for the Local Partnership or Stadium If you are applying for both grants, please submit a separate grant applica Local Partnership Funding Stadium District Funding | _ |
| Type of Funding * Grant (cash only) In-kind sponsorship (city staff support) Grant and in-kind sponsorship | |
| Amount Requested * \$ 10,000.00 Funding amount requested | Annual Budget * \$ 1,090,000.00 Organization's annual budget |
| How would the funds be used? * If applying for stadium district funds, how would the funds be used to support of the property of the property of the programming. DIRT's evidence-based programming of the programming and programming and longevity of our programming. DIRT's evidence-based programming and longevity of our programming and longevity of use distinctions. | ship from the City of Littleton to support 3–5 s. Events include 2–4 Fans & Friends Trivia Nights er the community, support local businesses, and raise I's programs, which create accessible, inclusive seed by former program participants, and feature s. DIG Deep celebrates our community roots and economies. Our 2026 event will be held for the first eepen impact. We're grateful for the City's continued support DIRT's 2026 events. DIRT budgets a small so 100% of funds raised from events is reinvested g receives local support from the following partners: The Lowe Fund, Rose Community Foundation, I the Division of Vocational Rehabilitation. In order to |
| diversify our revenue streams and engage new community we responded "never applied for Local Partnership Funding and in 2023, but did not apply or receive funding in 2024. | partners and organizations. Please note that though |
| Yes, received a cash grant Yes, received a cash grant Yes, received a cash grant & in-kind sponsorship Never applied for Local Partnership Funding | Yes, received in-kind sponsorship Applied, didn't receive grant or in-kind sponsorship |
| Please upload your updated W-9 Form signed and date Siged W9 Roots Colorado July 2025.pdf Applications must have a W-9 to be considered Approved Amount by City Council | d in June or July 2025.* 80.15KB |



Contact Information

| Contact Name * Elly Conant Person to whom questions should be directed regarding this application Email * elly@whizkidstutoring.com Email Confirmation * | Title * Executive Director Contact person's title Phone * 303-921-9391 |
|--|---|
| elly@whizkidstutoring.com | |
| Organization Information | |
| Name of Organization * Whiz Kids Tutoring Address * Street Address 5500 E. Yale Avenue, Suite 200 | |
| Address Line 2 | |
| City Denver | State / Province / Region CO |
| Postal / Zip Code | Country |
| 80222 | USA |
| URL https://www.whizkidstutoring.com/ Copy/paste complete URL of organization's web site, including "https://" | |
| Is your organization Non-Profit?* | |
| | |
| Are you registered with the Colorado Secretary of State Yes No | e as a 501(c) charitable organization?* |
| Program Information | |

Program Description*

Whiz Kids (WK) provides one-to-one tutoring, mentoring, and spiritual support to students living below the literacy and poverty lines. The program builds academic skills, confidence, and meaningful relationships to help students experience lasting hope and a brighter future. Core components include: the Tutoring, Mentoring, and Academic Support Program, where trained volunteers offer individualized support; Club Time (optional), offers age-appropriate, faith-based messages and activities; and Student Enrichment, including events such as the annual Whiz Kids Rodeo. WK operates six sites in the City of Littleton, providing consistent, caring support to help young people thrive in school and in life.

The best example of WK's program is through students like Karla. Karla was a WK student for three years at our Bethany site 18 years ago. She grew so much academically and found a love for teaching. She is now a teacher in Littleton Public Schools and came back to tutor at the same site!

| Total Served * 500 Total people served by the program for funding requested Youth Served * 500 | Residents Served * 100 Total estimated Littleton residents served by the program in prior year |
|--|--|
| Funding | |
| | |
| Are you applying for the Local Partnership or Stadium D If you are applying for both grants, please submit a separate grant application Local Partnership Funding Stadium District Funding | • |
| Type of Funding * Grant (cash only) In-kind sponsorship (city staff support) Grant and in-kind sponsorship | |
| Amount Requested* | Annual Budget * |
| \$ 25,000.00 Funding amount requested | \$ 855,460.00 Organization's annual budget |
| How would the funds be used?* | Organization's annual budget |
| If applying for stadium district funds, how would the funds be used to suppo | rt youth activity programs? (1,000 character limit) |
| Whiz Kids requests program support to continue offering one below the poverty line in Littleton. WK serves students at six Presbyterian, 2) Littleton United Methodist, 3) Grace Point, 4 125 students total among Field Elementary, Little Raven Elementary | e-to-one tutoring and mentoring for students living sites in Littleton, including 1) Littleton 1st) Bethany, 5) Calvary, and 6) Horizon, which serve |
| Funds will support volunteer recruitment, training, and oversi liaison teachers at partner schools; background checks; stud Whiz Kids helps students engage in school as confident learn program focuses on literacy, math, and homework help while resilience and social-emotional skills | lent incentives; and volunteer appreciation efforts. ners with a sense of hope and purpose. The |
| Other Funding Sources* | |
| As a well-established organization with decades of experience revenue infrastructure to sustain its programming long-term. funders and experienced development consultants to secure revenue sources included Individual Contributions (35%), the Foundations (14%), Events (8%), Government Grants (7%), Interest (2%). This diversified funding strategy ensures the subeyond the exhaustion of specific grant awards. | The organization collaborates with longstanding funding for all initiatives. In FY 2024, Whiz Kids's IRS Employee Retention Credit (24%), Business/Corporations (7%), Churches (3%), and |
| Funding Received in Prior Year?* | |
| Yes, received a cash grant Yes, received a cash grant & in-kind sponsorship Never applied for Local Partnership Funding | Yes, received in-kind sponsorship Applied, didn't receive grant or in-kind sponsorship |
| Specify how prior year's funds and/or in-kind services w | ere used " |

Specify how prior year's funds and/or in-kind services were used.

Grant funds were used to support programming at WK's six tutoring sites in Littleton, serving under-resourced students particularly vulnerable to academic failure. Through tailored academic support, mentorship, and resources, the program aimed to improve educational outcomes for these students. In the 2024-2025 academic year, Whiz Kids served a total of 504 elementary and middle school students across 37 tutoring sites in six counties, with 100 of these students being from within the City of Littleton. This success was made possible by the dedication of 710 volunteers, including 260 new tutors, who collectively provided 28,200 hours of tutoring and site management. Of these, 110 tutors served in the Littleton sites.

| Was any of the funding not spent? | * |
|---|---|
| Yes | No |
| How much of the funding was not | spent?* |
| 0 | |
| Please upload your updated W-9 F | orm signed and dated in June or July 2025.* |
| 12 W-9 2025 - WK.pdf | 117.46KB |
| Applications must have a W-9 to be considered | bed |
| Approved Amount by City Council | |

2026 Stadium District Funding Grant Applications



Contact Information

| Contact Name * | Title * |
|--|---|
| Sarah Gohn | Clinical Director |
| Person to whom questions should be directed regarding this application | Contact person's title |
| Email* | Phone* |
| sgohn@allhealthnetwork.org | 7207076457 |
| Email Confirmation * | |
| sgohn@allhealthnetwork.org | |
| Organization Information | |
| Name of Organization * | |
| AllHealth Network | |
| | |
| Address* | |
| Street Address | |
| 61 W. Davies Ave N | |
| Address Line 2 | |
| City | State / Province / Region |
| Littleton | CO |
| Postal / Zip Code | Country |
| 80120 | USA |
| URL | |
| https://www.allhealthnetwork.org/ Copy/paste complete URL of organization's web site, including "https://" | |
| Is your organization Non-Profit? * | |
| | |
| Are you registered with the Colorado Secretary of State | e as a 501(c) charitable organization?* |
| Yes | |
| ○ No | |
| Program Information | |
| Program Description* | |

A flex fund supporting youth and families served by AllHealth Network in Littleton, designed to increase access to pro-social activities that promote family unification and youth mental well-being. Funds may be used for sports fees, recreational passes, family outings, or other individualized activities aligned with mental health goals. The program is embedded in Child and Family services and prioritizes high-needs clients and equity. By reducing barriers to enriching experience, this fund strengthens relationships, builds resilience, and helps prevent worsening mental health symptoms through tailored, therapeutic engagement.

Brief description of program or service for which organization intends to use the funds (1,000 character limit)

| Total Served* | Residents Served * |
|---------------|--------------------|
| 130 | 120 |

Total people served by the program for funding requested

Total estimated Littleton residents served by the program in prior year

| Youth Served * | |
|--|---|
| 90 | |
| Funding | |
| Are you applying for the Local Partnership or Stadium If you are applying for both grants, please submit a separate grant applie Local Partnership Funding | |
| Stadium District Funding | * |
| Amount Requested * \$ 16,000.00 Funding amount requested | Annual Budget * \$ 98,000,000.00 Organization's annual budget |
| How would the funds be used?* | |
| If applying for stadium district funds, how would the funds be used to su | pport youth activity programs? (1,000 character limit) |
| This grant will support a Flex Fund initiative within AllHeal served often face economic hardship, trauma, and isolatic strengthening activities. The Flex Fund will provide individ opportunities that promote youth resilience and family coh for sports, art, or music programs; family passes to museulike skating or bowling; nature-based experiences such as cards or bus passes to reduce access barriers. | on, limiting access to community-based, family- lualized support for recreational and relational nesion. Examples include registration and equipment ums or local attractions; sibling-focused group outings |
| Other Funding Sources * | |
| Medicaid, Indigent Funds | |
| Funding Received in Prior Year?* | |
| Yes, received a cash grant Yes, received a cash grant & in-kind sponsorship Never applied for Local Partnership Funding | Yes, received in-kind sponsorship Applied, didn't receive grant or in-kind sponsorship |
| Please upload your updated W-9 Form signed and dat | ted in June or July 2025.* |
| W9-AllHealth Network Signed FY25.pdf Applications must have a W-9 to be considered | 249.63KB |
| Approved Amount by City Council | |
| | |
| | |



Contact Information

| Contact Name* | Title * |
|--|---|
| Sarah Gohn | Clinical Director |
| Person to whom questions should be directed regarding this application | Contact person's title |
| Email* | Phone* |
| sgohn@allhealthnetwork.org | 720-707-6457 |
| Email Confirmation * | |
| sgohn@allhealthnetwork.org | |
| Organization Information | |
| | |
| Name of Organization * | |
| AllHealth Network | |
| Address * | |
| Street Address | |
| 61 W. Davies Ave N | |
| Address Line 2 | |
| City | State / Province / Region |
| Littleton | CO |
| Postal / Zip Code | Country |
| 80120 | USA |
| URL | |
| https://www.allhealthnetwork.org/ Copy/paste complete URL of organization's web site, including "https://" | |
| Is your organization Non-Profit?* | |
| | |
| Are you registered with the Colorado Secretary of Stat | e as a 501(c) charitable organization?* |
| Yes | |
| ○ No | |
| | |

Program Information

Program Description*

A community-based outreach and coordination program for Littleton youth who have disengaged from needed mental health services. A peer meets youth and families in the community using movement, games, and conversation to build trust and support re-engagement. A Complex Care Coordinator ensures connection to the right level of care and aligns providers around shared goals, with limited flex funds to remove urgent barriers.

Brief description of program or service for which organization intends to use the funds (1,000 character limit)

| Total Served * | Residents Served * |
|----------------|--------------------|
| 75 | 65 |

Total people served by the program for funding requested

Total estimated Littleton residents served by the program in prior year

Youth Served *

75

Funding Are you applying for the Local Partnership or Stadium District Funding?* If you are applying for both grants, please submit a separate grant application for each grant Local Partnership Funding Stadium District Funding Amount Requested* Annual Budget* \$ 27,500.00 \$ 98,000,000.00 Funding amount requested Organization's annual budget How would the funds be used?* If applying for stadium district funds, how would the funds be used to support youth activity programs? (1,000 character limit) Grant funds will support a youth outreach and re-engagement program serving disconnected and high-risk youth in Littleton through activity-based, community-centered services. According to internal data reporting, the youth mental health team has 20% disengagement at any given time. Many of these clients were discharged from a mental health hospitalization or had active suicidal ideation in the last 6 months. This program will specifically target those youth and families who are currently underserved by existing pathways. Other Funding Sources* Medicaid, Indigent Funding Received in Prior Year?* Yes, received a cash grant Yes, received in-kind sponsorship Yes, received a cash grant & in-kind sponsorship Applied, didn't receive grant or in-kind sponsorship Never applied for Local Partnership Funding Please upload your updated W-9 Form signed and dated in June or July 2025.* 249.63KB W9-AllHealth Network Signed FY25.pdf Applications must have a W-9 to be considered **Approved Amount by City Council**



Contact Information

| Contact Name* | Title * |
|--|---|
| Kelly Eisentraut Person to whom questions should be directed regarding this application | Grant Writer Contact person's title |
| Email* | |
| keisentraut@arvadacenter.or | Phone* |
| g | 720-898-7220 |
| Email Confirmation * | |
| keisentraut@arvadacenter.org | |
| Organization Information | |
| Name of Organization* | |
| Arvada Center for the Arts and Humanities | |
| Address* | |
| Street Address | |
| 6901 Wadsworth Blvd | |
| Address Line 2 | |
| City | State / Province / Region |
| Arvada | CO |
| Postal / Zip Code | Country |
| 80003 | United States |
| URL | |
| https://www.arvadacenter.org Copy/paste complete URL of organization's web site, including "https://" | |
| Is your organization Non-Profit?* | |
| | |
| Are you registered with the Colorado Secretary of Stat | e as a 501(c) charitable organization?* |
| Yes | |
| ○ No | |
| | |

Program Information

Program Description*

Supported by Stadium District Funds, the Arvada Center's School & Community Program will provide free arts education in Littleton during 2026, offering interactive workshops for PreK-12 youth. Our culturally responsive sessions, aligned with Colorado Academic Standards for social-emotional learning, connect trained Teaching Artists with Educators to boost arts learning and student growth. We will prioritize partnerships with Title I schools and PreK/SACC (School-Aged Child Care) programs within Littleton city limits. Programming will take place during out-of-school time (OST) over the summer months and after school during the fall semester. Partnering Educators select workshops tailored to learning goals. Arvada Center Teaching Artists will deliver onsite sessions with all materials. We will hold 12 workshops at Bemis Library (monthly, PreK-12) and 28 workshops each at Centennial Academy, Little Raven Elementary School, and Runyon Elementary School (weekly in summer, monthly in fall).

| Total Served * | Residents Served * |
|--|---|
| 500 | 350 |
| Total people served by the program for funding requested | Total estimated Littleton residents served by the program in prior year |
| Youth Served * | |
| 350 | |
| Funding | |
| | |
| Are you applying for the Local Partnership or Stadium I | District Funding?* |
| If you are applying for both grants, please submit a separate grant applica | tion for each grant |
| Local Partnership Funding | |
| Stadium District Funding | |
| Amount Requested * | Annual Budget * |
| \$ 17,250.00 | \$ 14,035,027.00 |
| Funding amount requested | Organization's annual budget |
| How would the funds be used?* | |
| If applying for stadium district funds, how would the funds be used to supp | ort youth activity programs? (1,000 character limit) |
| We will utilize the awarded funds to underwrite 75% of our transfer incur no costs. We will allocate the awarded funds -Teaching Artist wages x 54 workshops total: \$4,000 \$60 per workshop (standard), \$70 per workshop taught by the workshop taught by Independent Contract Teaching Artists -Teaching Artist and Arvada Center staff mileage reimburses -Workshop materials and supplies: \$2,000 -Arvada Center outreach arts-education workshop fees: \$8, \$175 standard fee x 26 workshops: Bemis Library: 12 works Runyon Elementary: 14 summer and fall School-Age Child \$125 Title I fee x 28 workshops: Centennial Academy of Fin workshops, Little Raven Elementary: 14 summer and fall School-Age Child \$125 Title I fee x 28 workshops: Centennial Academy of Fin workshops, Little Raven Elementary: 14 summer and fall School-Age Child \$125 Title I fee x 28 workshops: Centennial Academy of Fin workshops, Little Raven Elementary: 14 summer and fall School-Age Child \$125 Title I fee x 28 workshops: Centennial Academy of Fin workshops, Little Raven Elementary: 14 summer and fall School-Age Child \$125 Title I fee x 28 workshops: Centennial Academy of Fin workshops, Little Raven Elementary: 14 summer and fall School-Age Child \$125 Title I fee x 28 workshops: Centennial Academy of Fin workshops, Little Raven Elementary: 14 summer and fall School-Age Child \$125 Title I fee x 28 workshops: Centennial Academy of Fin workshops and the financial fall School-Age Child \$125 Title I fee x 28 workshops: Centennial Academy of Fin workshops and the financial fall School-Age Child \$125 Title I fee x 28 workshops and the financial fall School-Age Child \$125 Title I fee x 28 workshops and the financial fall School-Age Child \$125 Title I fee x 28 workshops and the financial fall School-Age Child \$125 Title I fee x 28 workshops and the financial fall School-Age Child \$125 Title I fee x 28 workshops and the financial fall \$125 Title I fee x 28 workshops and the financial fall \$125 Title I fee x 28 workshops and the financial fall \$125 Title I fee x 28 worksho | toward the following expenses: bilingual Arvada Center Teaching Artists, \$90 per ments: \$2,000 050 shops (one per month for the full year 2026) Care (SACC) workshops the Arts Education: 14 summer and fall SACC ACC workshops |
| Other Funding Sources* | |
| City of Arvada, Scientific & Cultural Facilities District (SCFD |), Individual Donors |
| Funding Received in Prior Year?* | |
| Yes, received a cash grant | Yes, received in-kind sponsorship |
| Yes, received a cash grant & in-kind sponsorship Never applied for Local Partnership Funding | Applied, didn't receive grant or in-kind sponsorship |
| Please upload your updated W-9 Form signed and date | d in June or July 2025.* |
| Arvada Center W9 - 7-17-25.pdf | 96.62KB |
| Applications must have a W-9 to be considered | 00.0210 |
| Approved Amount by City Council | |
| Approved Amount by Oily Council | |
| | |



Contact Information

| Contact Name * | Title * |
|--|--|
| Shawn Taylor | Beyond the 90 Camp Director |
| Person to whom questions should be directed regarding this application | Contact person's title |
| Email* | Phone* |
| shawn.taylor@cru.org | 3038422320 |
| Email Confirmation* | |
| shawn.taylor@cru.org | |
| Organization Information | |
| Name of Organization* | |
| Calvary Church Littleton | |
| | |
| Address* | |
| Street Address | |
| 1500 W Littleton Blvd. Suite 140A | |
| Address Line 2 | |
| City | State / Province / Region |
| Littleton | CO |
| Postal / Zip Code | Country |
| 80120 | United States |
| URL | |
| calvarylittleton.org Copy/paste complete URL of organization's web site, including "https://" | |
| Is your organization Non-Profit?* | |
| | |
| Are you registered with the Colorado Secretary of State | e as a 501(c) charitable organization? * |
| Yes | |
| ○ No | |

Program Information

Program Description*

The Beyond the 90 Soccer Camp is designed to provide a fun, high-quality soccer environment for local youth while also focusing on building relational connections between families in our Littleton community. Our camp is designed for players in 1st-8th grades and is suitable for players of all levels and abilities, at a fraction of the cost of traditional camps. We also provide a free meal for every camper and their families each night. Our hope is to connect families in Littleton to one another as well as to various faith resources in our community.

Brief description of program or service for which organization intends to use the funds (1,000 character limit)

Total Served *

Residents Served*

Total people served by the program for funding requested

250

Total estimated Littleton residents served by the program in prior year

| Youth Served* | | |
|--|--|--|
| 90 | | |
| Funding | | |
| Are you applying for the Local Partnership or Stadium I If you are applying for both grants, please submit a separate grant applicat Local Partnership Funding Stadium District Funding | | |
| Amount Requested * \$ 4,000.00 | Annual Budget * \$ 320,711.00 | |
| Funding amount requested How would the funds be used?* If applying for stadium district funds, how would the funds be used to support | Organization's annual budget ort youth activity programs? (1,000 character limit) | |
| The funds will help cover the costs of running the soccer camp, making it accessible to all local families, regardless of their financial situation. As we seek to bless our neighbors and build relationships, it is our desire that no one will be excluded based on financial constraints. | | |
| The camp is staffed entirely by volunteers, so there is no staffing cost, but each camper receives a t-shirt and backpack as well as a free dinner for their entire family each night. (Food is the greatest single expense in the camp budget.) There is also a need to purchase a small amount of equipment each year to replace worn out soccer balls, pennies, cones, etc. | | |
| The average cost per participant is approximately \$100. We only charge \$25-40 per camper (depending on financial need) so the remainder of the cost must be subsidized through grants and donations. | | |
| Other Funding Sources* | | |
| Calvary Littleton utilizes funding from our annual church budget. Campers pay \$25-\$40/camper to participate (maximum \$80/family, if they register multiple kids). Individual donations from private donors. | | |
| Funding Received in Prior Year?* | | |
| Yes, received a cash grant Yes, received a cash grant & in-kind sponsorship Never applied for Local Partnership Funding | Yes, received in-kind sponsorshipApplied, didn't receive grant or in-kind sponsorship | |
| Specify how prior year's funds and/or in-kind services v | vere used.* | |
| Last year's grant helped in all phases of our camp, including purchasing soccer balls, camp t-shirts and bags, and providing meals for approximately 225 people each night. The \$3,800 grant accounted for roughly 50% of our overall camp budget. Thank you!! | | |
| Was any of the funding not spent?* | | |
| ○ Yes | No | |
| How much of the funding was not spent?* 0 | | |
| Please upload your updated W-9 Form signed and dated | l in June or July 2025. * | |
| fw9.pdf Applications must have a W-9 to be considered | 265.27KB | |
| Approved Amount by City Council* | | |



Contact Information

| Contact Name * | Title * | |
|---|---------------------------|--|
| Lauren OConnell | Director | |
| Person to whom questions should be directed regarding this application | Contact person's title | |
| Email* | | |
| laurenoconnell48@gmail.co | Phone * | |
| m | 3039468875 | |
| Email Confirmation * | | |
| laurenoconnell48@gmail.com | | |
| Organization Information | | |
| | | |
| Name of Organization * | | |
| Cycling Without Age Littleton (CWAL) | | |
| Address* | | |
| Street Address | | |
| 6698 S. Iris Street #620711 | | |
| Address Line 2 | | |
| City | State / Province / Region | |
| Littleton | CO | |
| Postal / Zip Code | Country | |
| 80162 | United States | |
| URL | | |
| https://cwalittleton.com/ | | |
| Copy/paste complete URL of organization's web site, including "https://" | | |
| Is your organization Non-Profit?* | | |
| | | |
| Are you registered with the Colorado Secretary of State as a 501(c) charitable organization?* | | |
| Yes | | |
| ○ No | | |
| Program Information | | |
| | | |

Program Description*

Cycling Without Age Littleton (CWAL) is an all-volunteer nonprofit breaking the barrier of isolation for older adults, youth and individuals with mobility or developmental challenges and special needs. We provide free outdoor trishaw rides that connect riders with Littleton's vibrant trails, parks, and cultural spaces. Our electricassist trishaws feature a forward-facing bench for one or two passengers, piloted by trained volunteers. Since 2019, we've created over 9,000 joyful, shared experiences along scenic routes like the South Platte River Trail and Hudson Gardens. Each ride fosters connection, dignity, and well-being for both passengers and volunteers. With over 140 dedicated volunteers, CWAL delivers high-impact, cost-effective service, generating a 5:1 social return on investment. We believe the most vulnerable should never be the least visible and that every ride builds a more compassionate, connected Littleton.

| Total Served* | Residents Served * |
|--|---|
| 3,787 | 1,800 |
| Total people served by the program for funding requested | Total estimated Littleton residents served by the program in prior yea |
| Youth Served * | |
| 700 | |
| Funding | |
| Are you applying for the Local Partnership or Stadiu | ım District Funding?* |
| If you are applying for both grants, please submit a separate grant app | |
| Local Partnership Funding | |
| Stadium District Funding | |
| Amount Requested* | Annual Budget * |
| \$ 19,000.00 | \$ 55,000.00 |
| Funding amount requested | Organization's annual budget |
| How would the funds be used?* | |
| If applying for stadium district funds, how would the funds be used to s | support youth activity programs? (1,000 character limit) |
| through outdoor recreation and events that foster conne to replace some of our older trishaws next year and we j increased by over 30%. A new trishaw will help us meet rides promote outdoor equity by removing physical, ecor sensory-friendly experiences for youth who otherwise fa spaces. Everyone deserves to feel the wind in their hair make that possible. | just learned that trishaw prices and shipping have growing local demand and prevent service gaps. Our nomic, and social barriers to nature. They offer inclusive, ce limited access to Littleton's natural and cultural |
| Other Funding Sources* | |
| donations, sponsorships, grants | |
| Funding Received in Prior Year?* | |
| | |
| Yes, received a cash grant | Yes, received in-kind sponsorship |
| Yes, received a cash grant Yes, received a cash grant & in-kind sponsorship Never applied for Local Partnership Funding | Yes, received in-kind sponsorship Applied, didn't receive grant or in-kind sponsorship |
| Yes, received a cash grant & in-kind sponsorship | Applied, didn't receive grant or in-kind sponsorship |
| Yes, received a cash grant & in-kind sponsorship Never applied for Local Partnership Funding | Applied, didn't receive grant or in-kind sponsorship |
| Yes, received a cash grant & in-kind sponsorship Never applied for Local Partnership Funding Please upload your updated W-9 Form signed and determined | Applied, didn't receive grant or in-kind sponsorship ated in June or July 2025. * |



Contact Information

| Contact Name * | Title * |
|--|--|
| Kelly Waltrip | Executive Director |
| Person to whom questions should be directed regarding this application | Contact person's title |
| Email* | Phone * |
| kelly.waltrip@dyao.org | 3034332420 |
| Email Confirmation * | |
| kelly.waltrip@dyao.org | |
| Organization Information | |
| Name of Organization* | |
| Denver Young Artists Orchestra Association | |
| Address* | |
| Street Address | |
| 1245 Champa St | |
| Address Line 2 | |
| City | State / Province / Region |
| Denver | CO |
| Postal / Zip Code | Country |
| 80204 | United States |
| URL | |
| https://www.dyao.org Copy/paste complete URL of organization's web site, including "https://" | |
| Is your organization Non-Profit?* | |
| | |
| Are you registered with the Colorado Secretary of State | te as a 501(c) charitable organization?* |
| Yes | (-, |
| ○ No | |
| | |

Program Information

Program Description*

DYAO is excited to bring regular programming to the City of Littleton as part of our regular concert season. We have added a concert in Littleton starting in 2023, and it has become an annual tradition. This past season, our concert featuring the String Orchestra, Allegro Strings, and Conservatory Orchestra, presenting "Folklore Fusion" with music by Bach, Rossini, and Rimsky-Korsakov took place on November 17, 2024, at Littleton United Methodist Church to a nearly sold-out crowd. This coming season, we will return with three orchestras for a celebration concert at Littleton United Methodist Church, featuring Colorado Symphony soloists. We intend to return again in November 2026 with another unique program showcasing our talented youth, and we anticipate our following in Littleton to grow each year as we build our presence. In past years, we have also performed outreach programs at Littleton retirement homes and the DaVita Day of Music, which we will participate in again

| Total Served * | Residents Served * | |
|---|--|--|
| 10,000 Total people served by the program for funding requested | 500 Total estimated Littleton residents served by the program in prior year | |
| Youth Served* | | |
| 250 | | |
| Funding | | |
| - unumg | | |
| Are you applying for the Local Partnership or Stadium D | District Funding?* | |
| If you are applying for both grants, please submit a separate grant applicat | ion for each grant | |
| Local Partnership Funding | | |
| Stadium District Funding | | |
| Amount Requested * | Annual Budget * | |
| \$ 5,000.00 Funding amount requested | \$ 789,870.00 Organization's annual budget | |
| How would the funds be used?* | Organization 3 annual budget | |
| If applying for stadium district funds, how would the funds be used to support | ort youth activity programs 2 /1 000 character limit) | |
| Funds would be used toward venue rental costs, soloist fees, music rental/purchase costs for this program, | | |
| program printing, and marketing for the concert. | | |
| Other Funding Sources* | | |
| DYAO receives funding from a variety of sources including tuition, grants, ticket sales, our two fundraising | | |
| events, corporations, and individual donors. | | |
| SCFD - We apply through SCFD Arapahoe County for a project grant. Colorado Creative Industries - We receive a small grant from the State | | |
| of Colorado for General Operating | | |
| Telluray Foundation - We are working with the Telluray Foundation about an after-school program at a school in Littleton | | |
| Other private foundations - We receive funding from a variety of private or family foundations | | |
| Corporate sponsors Ticket sales | | |
| Student tuition | | |
| Individual donors | | |
| Funding Received in Prior Year?* | | |
| Yes, received a cash grant | ○ Yes, received in-kind sponsorship | |
| Yes, received a cash grant & in-kind sponsorship | Applied, didn't receive grant or in-kind sponsorship | |
| Never applied for Local Partnership Funding | . * | |
| Specify how prior year's funds and/or in-kind services w | | |
| Last year's funds were used to support venue and productio United Methodist Church. Specifically we used funds for mu- | | |
| expenses. | | |
| Was any of the funding not spent?* | | |
| ○ Yes | No | |
| How much of the funding was not spent?* | | |
| 0 | | |
| Please upload your updated W-9 Form signed and dated | l in June or July 2025. * | |
| 20250722102026909.pdf | 81.55KB | |
| Applications must have a W-9 to be considered | | |
| Approved Amount by City Council | | |



Contact Information

| Contact | Name | , |
|---------|------|---|
| Contact | Name | |

Title *

Kelsey Riley

Owner

Person to whom questions should be directed regarding this application

Contact person's title

Email*

info@elsewearcollective.co

Phone *

7203643031

Email Confirmation *

info@elsewearcollective.com

Organization Information

Name of Organization*

ElseWear Collective

Address *

Street Address

5654 S Prince St

Address Line 2

#C

City State / Province / Region

Littleton Colorado Postal / Zip Code Country

80120 **United States**

URL

www.elsewearcollective.com

Copy/paste complete URL of organization's web site, including "https://"

Is your organization Non-Profit?*

Yes No

Program Information

Program Description*

I am a small business owner in Downtown Littleton and am hoping to expand my Kid Crafternoon series I host in my shop. I want to be able to expose the kids to all kinds of art and creativity. I like featuring objects and techniques that may not be typical to have the kids explore what speaks to them. They might find a new interest that they hadn't thought of before. The look on their faces when they discover something new or create something on their own is priceless.

I would like to provide more sewing machines, dremel tools, and supplies to be able to enhance the crafternoon environment and provide more classes or workshop on a regular basis for after-school times to have a creative and imaginative outlet.

Brief description of program or service for which organization intends to use the funds (1,000 character limit)

Total Served *

Residents Served *

Total people served by the program for funding requested

Total estimated Littleton residents served by the program in prior year

| Funding Are you applying for the Local Partnership or Stadium District Funding?* If you are applying for both grants, please submit a separate grant application for each grant Local Partnership Funding Stadium District Funding Amount Requested* \$ 2,000.00 Funding amount requested Organization's annual budget How would the funds be used?* If applying for stadium district funds, how would the funds be used to support youth activity programs? (1,000 character limit) I am a small business owner in Downtown Littleton and am hoping to expand my Kid Crafternoon series I host in my shop. I want to be able to expose the kids to all kinds of art and creativity. I like featuring objects and techniques that may not be typical to have the kids explore what speaks to them. They might find a new interest | | |
|--|--|--|
| Are you applying for the Local Partnership or Stadium District Funding?* If you are applying for both grants, please submit a separate grant application for each grant Local Partnership Funding Stadium District Funding Amount Requested* \$ 2,000.00 Funding amount requested Organization's annual budget How would the funds be used?* If applying for stadium district funds, how would the funds be used to support youth activity programs? (1,000 character limit) I am a small business owner in Downtown Littleton and am hoping to expand my Kid Crafternoon series I host in my shop. I want to be able to expose the kids to all kinds of art and creativity. I like featuring objects and techniques that may not be typical to have the kids explore what speaks to them. They might find a new interest | | |
| If you are applying for both grants, please submit a separate grant application for each grant Local Partnership Funding Stadium District Funding Annual Budget* \$ 2,000.00 Funding amount requested Organization's annual budget How would the funds be used?* If applying for stadium district funds, how would the funds be used to support youth activity programs? (1,000 character limit) I am a small business owner in Downtown Littleton and am hoping to expand my Kid Crafternoon series I host in my shop. I want to be able to expose the kids to all kinds of art and creativity. I like featuring objects and techniques that may not be typical to have the kids explore what speaks to them. They might find a new interest | | |
| Local Partnership Funding Stadium District Funding Amount Requested* \$ 2,000.00 \$ 3,000.00 Funding amount requested Organization's annual budget How would the funds be used?* If applying for stadium district funds, how would the funds be used to support youth activity programs? (1,000 character limit) I am a small business owner in Downtown Littleton and am hoping to expand my Kid Crafternoon series I host in my shop. I want to be able to expose the kids to all kinds of art and creativity. I like featuring objects and techniques that may not be typical to have the kids explore what speaks to them. They might find a new interest | | |
| Stadium District Funding Amount Requested* \$ 2,000.00 Funding amount requested Organization's annual budget How would the funds be used?* If applying for stadium district funds, how would the funds be used to support youth activity programs? (1,000 character limit) I am a small business owner in Downtown Littleton and am hoping to expand my Kid Crafternoon series I host in my shop. I want to be able to expose the kids to all kinds of art and creativity. I like featuring objects and techniques that may not be typical to have the kids explore what speaks to them. They might find a new interest | | |
| Annual Budget * \$ 2,000.00 \$ 3,000.00 Funding amount requested Organization's annual budget How would the funds be used?* If applying for stadium district funds, how would the funds be used to support youth activity programs? (1,000 character limit) I am a small business owner in Downtown Littleton and am hoping to expand my Kid Crafternoon series I host in my shop. I want to be able to expose the kids to all kinds of art and creativity. I like featuring objects and techniques that may not be typical to have the kids explore what speaks to them. They might find a new interest | | |
| \$ 2,000.00 Funding amount requested Organization's annual budget How would the funds be used? If applying for stadium district funds, how would the funds be used to support youth activity programs? (1,000 character limit) I am a small business owner in Downtown Littleton and am hoping to expand my Kid Crafternoon series I host in my shop. I want to be able to expose the kids to all kinds of art and creativity. I like featuring objects and techniques that may not be typical to have the kids explore what speaks to them. They might find a new interest | | |
| Funding amount requested Organization's annual budget How would the funds be used?* If applying for stadium district funds, how would the funds be used to support youth activity programs? (1,000 character limit) I am a small business owner in Downtown Littleton and am hoping to expand my Kid Crafternoon series I host in my shop. I want to be able to expose the kids to all kinds of art and creativity. I like featuring objects and techniques that may not be typical to have the kids explore what speaks to them. They might find a new interest | | |
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| I am a small business owner in Downtown Littleton and am hoping to expand my Kid Crafternoon series I host in my shop. I want to be able to expose the kids to all kinds of art and creativity. I like featuring objects and techniques that may not be typical to have the kids explore what speaks to them. They might find a new interest | | |
| my shop. I want to be able to expose the kids to all kinds of art and creativity. I like featuring objects and techniques that may not be typical to have the kids explore what speaks to them. They might find a new interest | | |
| techniques that may not be typical to have the kids explore what speaks to them. They might find a new interest | | |
| | | |
| that they hadn't thought of before. The look on their faces when they discover something new or create | | |
| something on their own is priceless. | | |
| I would like to provide more sewing machines, dremel tools, and supplies to be able to enhance the crafternoon | | |
| environment and provide more classes or workshop on a regular basis for after-school times to have a creative and imaginative outlet. | | |
| Other Funding Sources* | | |
| I don't have any other funding than what I make from my small business. | | |
| Funding Received in Prior Year?* | | |
| Yes, received a cash grant Yes, received in-kind sponsorship | | |
| Yes, received a cash grant & in-kind sponsorship Applied, didn't receive grant or in-kind sponsorship | | |
| Never applied for Local Partnership Funding | | |
| Please upload your updated W-9 Form signed and dated in June or July 2025.* | | |
| 2024 ElseWear Collective W9.pdf 317.2KB | | |
| Applications must have a W-9 to be considered | | |
| Approved Amount by City Council* | | |
| | | |
| | | |



Littleton Colorado Colorado Colorado Colorado Colorado Colorado Stadium District Funding

Contact Information

| Contact Name * Elena Wilken Person to whom questions should be directed regarding this application Email * kewilken@yahoo.com Email Confirmation * kewilken@yahoo.com | Title * Treasurer Contact person's title Phone * 7202197772 |
|---|--|
| Organization Information | |
| Name of Organization * Heritage High School Instrumental Music Foundation | |
| Address * Street Address 1401 West Geddes Avenue Address Line 2 | |
| City | State / Province / Region |
| Littleton | CO |
| Postal / Zip Code 80120 | Country US |
| URL https://www.heritagebands.net/ Copy/paste complete URL of organization's web site, including "https://" | |
| Is your organization Non-Profit?* | |
| | |
| Are you registered with the Colorado Secretary of State as a 501(c) charitable organization?* Yes No | |
| Program Information | |
| | |

Program Description*

The IMF supports the all the Heritage High School instrumental music programs with fundraising, parent involvement and leadership development to give students outstanding music performance opportunities. We recognize that practice and performance are vehicles to developing leadership, discipline, camaraderie, and a strong sense of individual accomplishment. Ensembles include:

The Scarlet Regiment Marching Band placed 11th place in the 2024 Colorado State Marching Band Competition, performed at the Western Welcome Week and other public concerts.

The HHS Pep Band performs at 4 football games and basketball games.

Two Jazz bands participate in festivals, 5 concerts and performances at Dazzle Jazz and KUVO.

Two Orchestras perform concerts, in the community and at festivals.

Band members also perform in the annual high school musical. This year the school put on Mama Mia to four sold-out performances.

Heritage fields Winter Guard and Winter Percussion performing groups.

Brief description of program or service for which organization intends to use the funds (1,000 character limit)

Total Served *

Residents Served *

9.000

150

Total people served by the program for funding requested

Total estimated Littleton residents served by the program in prior year

Youth Served *

3000

Funding

Are you applying for the Local Partnership or Stadium District Funding?*

If you are applying for both grants, please submit a separate grant application for each grant

- Local Partnership Funding
- Stadium District Funding

Amount Requested*

Annual Budget*

\$ 25,000.00

\$ 150,000.00

Funding amount requested

Organization's annual budget

How would the funds be used?*

If applying for stadium district funds, how would the funds be used to support youth activity programs? (1,000 character limit)

The grant funds would be used to purchase instruments to replace instruments that are no longer functional or playable. With growing programs, the Heritage High School Instrument program seeks to upgrade and replace instruments that are not conducive for the students to learn good performance techniques, and to participate at the highest level in the many performance opportunities. While the program currently has instrument wish list of over \$100,000, these funds would be used to replace the oldest and most decrepit instruments, such as marching saxophones, concert euphoniums, new marimbas and vibraphones and intermediate level violins and violas.

Other Funding Sources*

Fundraising, participation fees, ticket sales, individual and corporate donations

Funding Received in Prior Year?*

- O Yes, received a cash grant
- Yes, received a cash grant & in-kind sponsorship
- Never applied for Local Partnership Funding
- Yes, received in-kind sponsorship
- Applied, didn't receive grant or in-kind sponsorship

Please upload your updated W-9 Form signed and dated in June or July 2025.*

Form W-9 (Rev.pdf 91.26KB

Applications must have a W-9 to be considered

Approved Amount by City Council



Contact Information

| Contact Name * | Title * | |
|--|---------------------------|--|
| Tiffany Pallotto | Executive Director | |
| Person to whom questions should be directed regarding this application | Contact person's title | |
| Email* | | |
| tiffany@insidetheorchestra.o | Phone * | |
| rg | 7203092363 | |
| Email Confirmation * | | |
| tiffany@insidetheorchestra.org | | |
| Organization Information | | |
| Name of Organization* | | |
| Inside the Orchestra | | |
| Address* | | |
| Street Address | | |
| 9995 E Colfax Avenue | | |
| Address Line 2 | | |
| City | State / Province / Region | |
| Aurora | СО | |
| Postal / Zip Code | Country | |
| 80010 | United States | |
| URL | | |
| www.insidetheorchestra.org Copy/paste complete URL of organization's web site, including "https://" | | |
| Is your organization Non-Profit? * | | |
| | | |
| Are you registered with the Colorado Secretary of State as a 501(c) charitable organization?* | | |
| Yes | | |
| ○ No | | |
| Program Information | | |
| Program Description* | | |

Inside the Orchestra (IO) is a professional orchestra solely dedicated to children's music education; it's the only organization of its kind in the world. Our Tiny Tots: immersive concerts feature 32 musicians and are designed for kids 7 and under. Children are encouraged to respond to different elements of the music through imagination based prompts and activities, taught about the instruments, shown a diverse array of performance styles from different cultural backgrounds, and introduced to musical concepts.

Families from the Littleton Community participate in our programs every year. This season we hosted 2 concerts at Liley Gulch Recreation Center and 2 at Littleton Public Schools EPIC campus (thank you to the city of Littleton for your support this year!) We would like to again host four concerts in Littleton and respectfully request your support of these performances in 2026. We anticipate reaching at least 1,500 individuals through concerts.

| Total Served * | Residents Served* | |
|--|---|--|
| 16,000 | 1,500 | |
| Total people served by the program for funding requested | Total estimated Littleton residents served by the program in prior year | |
| Youth Served * | | |
| 1,000 | | |
| Funding | | |
| Are you applying for the Local Partnership or Stadium | District Funding?* | |
| If you are applying for both grants, please submit a separate grant applica | | |
| Local Partnership Funding | | |
| Stadium District Funding | | |
| Amount Requested * | Annual Budget * | |
| \$ 3,000.00 | \$ 596,000.00 | |
| Funding amount requested | Organization's annual budget | |
| How would the funds be used?* | | |
| If applying for stadium district funds, how would the funds be used to support youth activity programs? (1,000 character limit) | | |
| We would like to host Tiny Tots concerts in both the fall and winter of 2026 (4 shows total) in Littleton and | | |
| respectfully request your support. The total budget is \$21,667; we are requesting \$3,000, which will allow us to serve at least 1,100 individuals. | | |
| Inside the Orchestra provides culturally rich, affordable arts experiences families can feel good about, knowing | | |
| their children are engaging in high-quality education. Research confirms music supports early childhood | | |
| development—enhancing language, creativity, and social skills. Our immersive concerts bring children up close to live music, building developmental skills and joyful shared moments. | | |
| | | |
| Tiny Tots is one-of-a-kind—we're the only professional orchestra focused exclusively on young audiences. | | |
| Nearly half of attendees access free/reduced-price tickets through a no-questions-asked process. We simply could not do this without support from individuals, foundations, and government entities. | | |
| Other Funding Sources* | , g | |
| Every year, about 1/3 of our costs are covered through tick | et revenue. The other 2/3 comes from contributed | |
| revenue including revenue from the SCFD (the Scientific and Cultural Facilities District), grants from local | | |
| foundations, sponsorship for events, and gifts from individuals. In 2024, we had funding from Telluray to support | | |
| programming in Littleton, we are asking for additional support of our Tiny Tots program in this request. | | |
| Funding Received in Prior Year?* | | |
| Yes, received a cash grant & in-kind sponsorship | Yes, received in-kind sponsorship Applied, didn't receive grant or in-kind sponsorship | |
| Yes, received a cash grant & in-kind sponsorship Never applied for Local Partnership Funding | Typnieu, didit i teceive grafit of III-killu spolisorship | |
| Please upload your updated W-9 Form signed and date | ed in June or July 2025.* | |
| IO W9 2025 (1) (1).pdf | 159.61KB | |
| Applications must have a W-9 to be considered | | |
| Approved Amount by City Council | | |



Littleton Colorado Colorado Colorado Colorado Colorado Colorado Stadium District Funding

Contact Information

| Contact Name * | Title * | |
|---|---------------------------|--|
| LaRana Skalicky | Executive Director | |
| Person to whom questions should be directed regarding this application | Contact person's title | |
| Email* | | |
| LaRana@KimRobardsDanc | Phone* | |
| e.org | 303-570-0700 | |
| Email Confirmation* | | |
| LaRana@KimRobardsDance.org | | |
| Organization Information | | |
| Name of Organization* | | |
| _ | | |
| Kim Robards Dance, Inc. | | |
| Address* | | |
| Street Address | | |
| 1755 West 48th Avenue | | |
| Address Line 2 | | |
| City | State / Province / Region | |
| Denver | CO | |
| Postal / Zip Code | Country | |
| 80221 | United States | |
| URL | | |
| https://www.kimrobardsdance.org | | |
| Copy/paste complete URL of organization's web site, including "https://" | | |
| Is your organization Non-Profit?* | | |
| | | |
| Are you registered with the Colorado Secretary of State as a 501(c) charitable organization?* | | |
| Yes | | |
| ○ No | | |
| Program Information | | |
| | | |

Program Description*

KRD presents "Open Doors – West Side" at Little Theater Culture Center & "East Side" at Denver Ballet Theater. Sites are strategically selected in geographically different areas of Littleton to engage the broadest scope of residents. KRD's professional Company Members will teach Dance Workshops (including critically acclaimed Artistic Director/Choreographer Kim Robards herself) for youth, provide Open Rehearsals sharing the creative process, perform for the community, and engage in interactive Q&A sessions with youth and adults. Programming primarily focuses on direct interactions & services for Ages 6-18.

Professional Dancers will teach a total of 8 Dance Workshops/Classes in Modern Dance, Repertoire & Ballet for Ages 6-9, 10-12, 13-15, & 16-18. Each class depending on age of participants will range from 1 hour to 1.5 hours

All activities will be "pay what you wish" or may be attended free of charge. No one will be excluded from any program activity regardless of ability to pay.

Brief description of program or service for which organization intends to use the funds (1,000 character limit)

Total Served*

Residents Served *

478

620

Total people served by the program for funding requested

Total estimated Littleton residents served by the program in prior year

Youth Served *

380

Funding

Are you applying for the Local Partnership or Stadium District Funding?*

If you are applying for both grants, please submit a separate grant application for each grant

- Local Partnership Funding
- Stadium District Funding

Amount Requested*

Annual Budget *

\$ 18,000.00

\$ 500,000.00

Funding amount requested

Organization's annual budget

How would the funds be used?*

If applying for stadium district funds, how would the funds be used to support youth activity programs? (1,000 character limit)

Funding will be utilized for professional choreographer and dancer teaching fees for the Dancer Workshops and performance fees for the Open Rehearsals and Public Presentation. Additionally, funds will be utilized for promotion of the interactive activities to Littleton residents.

KRD takes an "Artist As Athlete" approach in Dance Workshops to equally engage boys and girls alike. Classes are open to youth from all areas of Littleton. Classes will include a Lead Teacher and at least one Assistant Teacher.

Two Open Rehearsals provide an up close, interactive experience of how the professional creative process works. KRD Company Members and critically acclaimed Artistic Director/Choreographer Kim Robards will also be available for interactive Question & Answer sessions.

"Open Doors" also includes at each location a "Sneak Peek" performance by the professional company focused on providing youth participants an opportunity to see the professionals who taught them in action in performance.

Other Funding Sources*

Bowen Family Fund 10,000; Triple B 5,000; SCFD % 20,000

Funding Received in Prior Year?*

| Yes, received a cash gra | ant |
|--------------------------|-----|
|--------------------------|-----|

- Yes, received a cash grant & in-kind sponsorship
- Never applied for Local Partnership Funding

Yes, received in-kind sponsorship

O Applied, didn't receive grant or in-kind sponsorship

Specify how prior year's funds and/or in-kind services were used.*

KRD provided Open Rehearsals during which time the public was engaged through observation of the professional dancers in the rehearsal process. This included interactive Q&A sessions during which time attendees asked questions of the professional choreographer and professional dancers and the artists interacted with the attendees which included both youth attendees ages 5-18 and adults ages 23 to 73. Dance technique classes were presented in Ballet and Modern and Modern Repertoire. We are still in the grant period and therefore, have additional program activities scheduled to take place which is the informal public presentation.

| Was any of the funding not spent?* | |
|--|---------------------------|
| ○ Yes | No |
| How much of the funding was not spent?* 0 | |
| Please upload your updated W-9 Form signed and dated | d in June or July 2025. * |
| KRD W9 Signed and dated.pdf | 197.01KB |

Applications must have a W-9 to be considered

Approved Amount by City Council



Contact Information

| Contact Name | e * |
|--------------|------------|
|--------------|------------|

Arthur T. Larsen

Person to whom questions should be directed regarding this application

Title * Treasurer

Contact person's title

Phone *

+1 720 272 3136

Email*

arthur.t.larsen@gmail.com

Email Confirmation *

arthur.t.larsen@gmail.com

Organization Information

Name of Organization*

Littleton Community Music Association

Address *

Street Address

2305 E. Arapahoe Rd, Ste. 111

Address Line 2

City State / Province / Region

Centennial Colorado Postal / Zip Code Country 80122 USA

URL

https://littletonmusic.org/

Copy/paste complete URL of organization's web site, including "https://"

Is your organization Non-Profit?*

Yes
No

Are you registered with the Colorado Secretary of State as a 501(c) charitable organization?*

- Yes
- O No

Program Information

Program Description*

First a brief history. In the summer of 2024, with the help of the Arts & Culture Grant, LCMA was able to initiate a larger summer music program, that was delivered out of East Community Center. The outcome during that summer program initiated a summer band project that included students from four elementary schools and two middle schools. In 2024 we had 10 rehearsals and 2 performances: one for the families of the students, and one for the Littleton Culture & Arts Partners Group (CAP) at the Depot Arts Center. See a short video from that performance here: https://www.youtube.com/watch?v=_OkEMtOguvw

To not lose momentum, in 2025, LCMA has facilitated this youth band project again. Although funding is tight, LCMA collected student tuition and used a surplus to maintain this important summer project. Concert performances are already scheduled for the Western Welcome Week and for the LCMA end-of-year summer program (guitar, violin and band) at East Community Center.

| Total Served * | Residents Served * | |
|---|---|--|
| 24 | 22 | |
| Total people served by the program for funding requested | Total estimated Littleton residents served by the program in prior year | |
| Youth Served* | | |
| 16 | | |
| Funding | | |
| | | |
| Are you applying for the Local Partnership or Stadium District Funding?* | | |
| If you are applying for both grants, please submit a separate grant application for each grant | | |
| Local Partnership Funding Stadium District Funding | | |
| | | |
| Amount Requested * | Annual Budget* | |
| \$ 3,750.00 Funding amount requested | \$ 171,610.00 | |
| | Organization's annual budget | |
| How would the funds be used?* | | |
| If applying for stadium district funds, how would the funds be used to support youth activity programs? (1,000 character limit) | | |
| The grant funding will be used to continue and expand on the working name "Littleton Rascals Youth Band". The target age | • • | |
| limited to, experienced band students entering grades 5 through 8. Since the project involves students from | | |
| several LPS schools, it encourages interaction and friendships across the school district. To facilitate this | | |
| expanding summer project, LCMA will contract with 1 musical program lead, 3 adult music educators, and 4 student mentors from our Littleton high schools. The project will run for 10 weeks during the summer of 2026 | | |
| and be delivered and executed at East Community Center, w | | |
| this project and other LCMA program activities. The project h | | |
| summer concert performances for the community. | | |
| Other Funding Sources * | | |
| Student tuition is expected to be collected and cover a partial amount of the expenses. | | |
| Funding Received in Prior Year?* | | |
| ○ Yes, received a cash grant | ○ Yes, received in-kind sponsorship | |
| Yes, received a cash grant & in-kind sponsorship | O Applied, didn't receive grant or in-kind sponsorship | |
| Never applied for Local Partnership Funding | | |
| Please upload your updated W-9 Form signed and dated | in June or July 2025. * | |
| 20250701 - LCMA - W-9 - Opening Notes Youth Band Progra | am.pdf 1.53MB | |
| Applications must have a W-9 to be considered | | |
| Approved Amount by City Council | | |
| | | |
| | | |
| | | |



Contact Information

Leigh Townsend

Person to whom questions should be directed regarding this application

board@littletonbandwagon.o

Email Confirmation *

board@littletonbandwagon.org

Title *

President - Littleton High School Band

Wagon

Contact person's title

Phone *

303-726-0648

Organization Information

Name of Organization*

"Pride of Littleton" - Littleton High School Marching Band, Supported by the Littleton High School Band Wagon

Address *

Street Address

199 E. Littleton Blvd., Littleton, CO 80121

Address Line 2

State / Province / Region City

Littleton CO Postal / Zip Code Country

80121 **United States**

URL

https://www.littletonbandwagon.org/

Copy/paste complete URL of organization's web site, including "https://"

Is your organization Non-Profit?*

Yes \(\) No

Are you registered with the Colorado Secretary of State as a 501(c) charitable organization?*

- O No

Program Information

Program Description *

The Pride of Littleton (PoL) marching band is a student-driven program that develops leadership, discipline, and teamwork through music. Open to all students, PoL represents the full range of backgrounds at Littleton High School and creates a welcoming, inclusive environment. Students participate in intensive rehearsals, summer camps, and more than 25 performances each fall. PoL performs at football games, school events, community parades, and a free public field show, strengthening school spirit and community pride. Leadership roles are earned through interviews and auditions, and student leaders are mentored to support their peers and guide their sections. Through music and collaboration, students build skills in responsibility, time management, and communication that serve them far beyond high school. As the largest spirit organization at Littleton High School, the PoL is more than a band; it's a vital part of the school and a celebrated presence in the broader community.

Brief description of program or service for which organization intends to use the funds (1.000 character limit)

| End description of program of service for which organization intends to doe the faring (1,500 shartestor innit) | |
|---|---|
| Total Served * | Residents Served * |
| 180,000 | 30,000 |
| Total people served by the program for funding requested | Total estimated Littleton residents served by the program in prior year |
| Youth Served* | |
| 1100 | |

Funding

Are you applying for the Local Partnership or Stadium District Funding?*

If you are applying for both grants, please submit a separate grant application for each grant

Local Partnership Funding

Stadium District Funding

Amount Requested*

\$ 25,000.00

Funding amount requested

Annual Budget*

\$ 92,000.00

Organization's annual budget

How would the funds be used?*

If applying for stadium district funds, how would the funds be used to support youth activity programs? (1,000 character limit)

We will use the funds to continue our investment in critical instrument upgrades to support student participation in our band program. For the coming year, we are requesting funds to address woodwind and additional percussion instrument needs. These instruments are typically provided by the school, as students are not expected—nor often able—to purchase them individually. New equipment boosts student morale, enhances performance quality, and ensures more meaningful experiences for all participants. Most of our woodwind instruments are over 20 years old and heavily worn from constant use. Replacing them will provide students with the tools they need to succeed in this impactful youth music program.

Other Funding Sources*

The PoL receives limited budget monies from Littleton High School. Student members pay an annual band fee. These monies do not cover the full expenses associated with running a comprehensive marching band program that serves a diverse student membership. LBW fundraises to help fill the funding gap but is not yet able to support the significant investment in new equipment.

| Funding Received in Prior Year?* | |
|---|--|
| Yes, received a cash grant | Yes, received in-kind sponsorship |
| ○ Yes, received a cash grant & in-kind sponsorship | Applied, didn't receive grant or in-kind sponsorship |
| Never applied for Local Partnership Funding | |

Specify how prior year's funds and/or in-kind services were used.*

Previously awarded funds were used to replace essential percussion and brass equipment for our band program. This included replacing a vibraphone that was over 65 years old and no longer functional, as well as updating aged-out low brass instruments that had deteriorated due to decades of use. These upgrades had an immediate impact, improving the quality of our rehearsals and performances and allowing more students to participate fully with reliable, high-quality instruments.

| Was any of the funding not spent? | |
|-----------------------------------|----|
| Yes | No |

How much of the funding was not spent?*

0

Please upload your updated W-9 Form signed and dated in June or July 2025.*

LHSBW W9.pdf 888.2KB

Applications must have a W-9 to be considered

Approved Amount by City Council



Contact Information

| Contact | Name | * |
|---------|------|---|
|---------|------|---|

Beth Best

Person to whom questions should be directed regarding this application

Email*

bbest@lps.k12.co.us

Email Confirmation *

bbest@lps.k12.co.us

Title *

Industry Partnership Coordinator

Contact person's title

Phone *

3033474302

Organization Information

| Name | of | Organization | * |
|---------|--------|---------------------|---|
| 1401110 | \sim | Organization | |

EPIC Campus - Littleton Public Schools Foundation

Address *

Street Address

5776 S Crocker St

Address Line 2

City State / Province / Region

Littleton CO Postal / Zip Code Country

80120 **United States**

URL

https://lpsfoundation.com/

Copy/paste complete URL of organization's web site, including "https://"

Is your organization Non-Profit?*

Yes \(\) No

Are you registered with the Colorado Secretary of State as a 501(c) charitable organization?*

- Yes
- O No

Program Information

Program Description*

EPIC Campus is a regional career and technical education center located in the heart of the City of Littleton. It serves all high school students from Littleton Public Schools, as well as students from Sheridan and Englewood Public Schools. Our Work-Based Learning (WBL) program is a cornerstone of EPIC's mission to skill and prepare the next generation for success in college, career, and life. Through internships, job shadows, mentorships, and industry-led projects, students gain hands-on, real-world experiences that help them explore career paths, build professional networks, and develop essential technical and employability skills. By partnering with local businesses, nonprofits, and government agencies, we bridge the gap between classroom learning and workforce needs. EPIC empowers students to graduate with purpose, confidence, and direction while contributing to a stronger, more prepared local talent pipeline. Grant funding helps ensure equitable access and expanded opportunities.

| Total Served * | Residents Served * |
|--|--|
| 1,100 | 500 |
| Total people served by the program for funding requested | Total estimated Littleton residents served by the program in prior year |
| Youth Served * | |
| 1,100 | |
| Funding | |
| Are you applying for the Local Partnership or Stadium | District Funding?* |
| If you are applying for both grants, please submit a separate grant applic | cation for each grant |
| Local Partnership Funding | |
| Stadium District Funding | |
| Amount Requested * | Annual Budget * |
| \$ 15,000.00 | \$ 100,000.00 |
| Funding amount requested | Organization's annual budget |
| How would the funds be used?* | |
| If applying for stadium district funds, how would the funds be used to sup | oport youth activity programs? (1,000 character limit) |
| track within our EPIC Campus Internship Program. EPIC of internships to explore career interests, build professional swill expand access to internships with service-based organ schools that offer high-impact roles but cannot afford to pastudent services, and community engagement. The service students substitute class time for professional work, apply equity, each student will receive a \$1,777 scholarship (bas supports youth workforce development, civic leadership, a community. | skills, and gain meaningful experience. This funding nizations: nonprofits, civic agencies, and public by interns. These include opportunities in education, e-focused track will offer 18-week positions where being their EPIC learning in authentic settings. To ensure seed on 120 hours at \$14.81/hour). This initiative |
| Other Funding Sources* | |
| The Littleton Rotary Club provided \$3500 to support this e for these Service Scholar internships. | ffort. We anticipate having at least 15 students apply |
| Funding Received in Prior Year?* | |
| Yes, received a cash grant | Yes, received in-kind sponsorship |
| Yes, received a cash grant & in-kind sponsorshipNever applied for Local Partnership Funding | Applied, didn't receive grant or in-kind sponsorship |
| Specify how prior year's funds and/or in-kind services | s were used.* |
| \$65,000 for summer youth programming at EPIC Campus | |
| Was any of the funding not spent?* | |
| ○ Yes | No |
| How much of the funding was not spent?* | |
| 0 | |
| Please upload your updated W-9 Form signed and dat | ed in June or July 2025 * |
| LPSF W9 2025.pdf | 119.03KB |
| Applications must have a W-9 to be considered | 110.0010 |
| Approved Amount by City Council | |



Contact Information

| Contact information | | |
|--|---|--|
| Contact Name * Stefanie Carroll Person to whom questions should be directed regarding this application | Title * Executive Director Contact person's title | |
| Email* | Phone* | |
| scarroll@lps.k12.co.us | 303-347-3478 | |
| Email Confirmation * | | |
| scarroll@lps.k12.co.us | | |
| | | |
| Organization Information | | |
| Name of Organization* | | |
| Littleton Public Schools Foundation | | |
| Address* | | |
| Street Address | | |
| 5776 S. Crocker Street | | |
| Address Line 2 | | |
| City | State / Province / Region | |
| Littleton | CO | |
| Postal / Zip Code | Country | |
| 80120 | United States | |
| URL | | |
| https://lpsfoundation.com/ Copy/paste complete URL of organization's web site, including "https://" | | |
| Is your organization Non-Profit?* | | |
| ⊚ Yes ○ No | | |
| Are you registered with the Colorado Secretary of State as a 501(c) charitable organization?* | | |
| Yes | | |
| ○ No | | |
| Program Information | | |

Program Description*

Due to reductions in state and federal funding, Littleton Public Schools (LPS) and Littleton Public Schools Foundation (LPSF) are seeking stadium district funding to maintain essential summer programs for youth in 2026. These programs provide both pathway exploration and academic intervention opportunities that have demonstrated strong success in previous years.

LPS respectfully requests \$100,000 in financial support to sustain the following summer initiatives: EPIC Middle School Explore Camp, High School Credit Recovery Program, Orton-Gillingham Summer Reader Camp, and Newcomer Support Program.

These summer 2026 programs will serve 550 youth in our community, and benefit their educational growth, academic recovery, and future job readiness. Without supplemental funding, these offerings are at risk of being discontinued.

Brief description of program or service for which organization intends to use the funds (1,000 character limit)

Total Served *

Residents Served *

13.000

550

Total people served by the program for funding requested

Total estimated Littleton residents served by the program in prior year

Youth Served*

550

Funding

Are you applying for the Local Partnership or Stadium District Funding?*

If you are applying for both grants, please submit a separate grant application for each grant

- Local Partnership Funding
- Stadium District Funding

Amount Requested*

Annual Budget*

\$ 100,000.00

\$ 1,400,000.00

Funding amount requested

Organization's annual budget

How would the funds be used?*

If applying for stadium district funds, how would the funds be used to support youth activity programs? (1,000 character limit)

\$30,000 - EPIC Middle School Explore Camp

In collaboration with EPIC Campus, this week-long camp provides students entering grades 6–8 (for the 2026–2027 school year) with hands-on exposure to six career pathways available through EPIC. 300 students.

\$30,000 - High School Credit Recovery Program

This program offers essential credit recovery courses for LPS high school students (grades 9–12) who are behind in meeting district graduation requirements. Courses will be held at an LPS high school and include a swimming class option. 150 students.

\$30,000 - Orton-Gillingham Summer Reader Camp

Now in its third year, this intensive literacy camp (5 days for 3 weeks) targets early elementary students in need of reading intervention. 75 students.

\$10,000 - Newcomer Support Program

Designed for recently arrived students, this specialized program provides continued academic engagement and support during the summer. Includes a language acquisition curriculum. 25 students.

Other Funding Sources*

None at this time.

Funding Received in Prior Year?*

- Yes, received a cash grant
- Yes, received a cash grant & in-kind sponsorship
- Never applied for Local Partnership Funding
- Yes, received in-kind sponsorship
- O Applied, didn't receive grant or in-kind sponsorship

| Specify how prior year's funds and/or in-kind services were used.* | | |
|---|----------|--|
| Please see the report that was emailed to Littleton City Council on 7/22/2025, via Lucy Lucero and Jim Becklenberg. | | |
| Was any of the funding not spent?* | | |
| ○ Yes | No | |
| How much of the funding was not spent?* | | |
| 0 | | |
| Please upload your updated W-9 Form signed and dated in June or July 2025.* | | |
| LPSF_W9_2025.pdf | 119.03KB | |
| Applications must have a W-9 to be considered | | |
| Approved Amount by City Council | | |
| | | |
| | | |
| | | |



Contact Information

Contact Name *

Alexis Barrere

Person to whom questions should be directed regarding this application

Email*

amugele@gmail.com

Email Confirmation*

amugele@gmail.com

Title *

Centennial Academy of Fine Arts Parent Teacher Organization Vice Principal

Phone *

3033156155

Contact person's title

Organization Information

Name of Organization*

Centennial Academy of Fine Arts Parent Teachers

Organization

Address *

Street Address

5460 S Manitou Rd

Address Line 2

City State / Province / Region

United States CO Postal / Zip Code Country

80123 **United States**

URL

https://sites.google.com/view/centennialacademylittletonpto

Copy/paste complete URL of organization's web site, including "https://"

Is your organization Non-Profit?*

Yes
No

Are you registered with the Colorado Secretary of State as a 501(c) charitable organization?*

Yes

O No

Program Information

Program Description*

Centennial Academy of Fine Arts became an art school pilot for Littleton Public Schools in the fall of 2002. The mission of arts education at Centennial is to provide engaging experiences in the arts, culture, and society. The program seeks to ignite creativity through transformative experiences in visual and performing arts where students express their learning in new ways based on exploring media, developing skills, and taking risks to provide pathways toward creative careers and life experiences. This immersion program allows students of all grade levels to participate in visual arts, band, choir, dance, theater, and piano. Centennial Academy of Fine Arts is one of two Title 1 schools in Littleton Public Schools, with over 40-45% of the student body qualifying for free or reduced lunch. Eleven languages are spoken in the homes of Centennial students. Centennial also has a center-based special education department and houses the vision program for the district.

| Total Served* | Residents Served * | |
|--|--|--|
| 340 | 250 | |
| Total people served by the program for funding requested | Total estimated Littleton residents served by the program in prior year | |
| Youth Served* | | |
| 340 | | |
| Funding | | |
| Are you applying for the Local Partnership or Stadium D | strict Funding?* | |
| If you are applying for both grants, please submit a separate grant applicat | | |
| Local Partnership Funding | | |
| Stadium District Funding | | |
| Amount Requested * | Annual Budget* | |
| \$ 25,000.00 | \$ 45,000.00 | |
| Funding amount requested | Organization's annual budget | |
| How would the funds be used?* | | |
| If applying for stadium district funds, how would the funds be used to support | ort youth activity programs? (1,000 character limit) | |
| As a previous grant recipient, the Centennial PTO has been busy putting the funds plus a large portion of annual PTO funds, to enhance the accessibility, inclusivity, and functionality of our school's performance spaces. This project includes installing new auditorium lighting and seating to improve the indoor stage experience, as well as adding outdoor musical equipment along an accessible pathway to support sensory engagement and musical exploration for students of all abilities, including emerging walkers. By upgrading auditorium seating and lighting, we will create a professional, comfortable, and well-lit space for school and community events. Installing outdoor, interactive musical equipment along an accessibility pathway will ensure that students with mobility challenges can actively participate in musical exploration. Funds would help Centennial continue its mission to connect kids to art and make our school environment more inclusive for all students. | | |
| Other Funding Sources* | | |
| Centennial PTO receives funds through multiple lines of fundraisers. The main fundraiser is a Fun Run where families sponsor their students in an athletic event. The organization also receives a money from King Sopper \ based on families spending and from local restaurants on Spirit nights. | | |
| Funding Received in Prior Year?* | | |
| Yes, received a cash grantYes, received a cash grant & in-kind sponsorshipNever applied for Local Partnership Funding | Yes, received in-kind sponsorshipApplied, didn't receive grant or in-kind sponsorship | |
| Specify how prior year's funds and/or in-kind services w | vere used.* | |
| The Centennial PTO has been hard at work creating an inclusive playground for the school's students in wheelchairs or other mobility devices. Last year's funds added a large play pad that has "balance features" for all students, including accessibility for emergent walkers and those in wheelchairs. | | |
| Was any of the funding not spent?* | | |
| ○ Yes | No | |
| How much of the funding was not spent?* | | |
| 0 | | |
| Please upload your updated W-9 Form signed and dated | in June or July 2025.* | |
| Adobe Scan Jul 12, 2025 (2).pdf | 905.4KB | |
| Applications must have a W-9 to be considered | | |
| Approved Amount by City Council | | |



Contact Information

| Contact Name * | Title * | |
|--|---|--|
| Anna Rutter Person to whom questions should be directed regarding this application | Director of Operations Contact person's title | |
| Email* | Phone * | |
| ballerinalba@gmail.com | 3037946694 | |
| Email Confirmation * | | |
| ballerinalba@gmail.com | | |
| Organization Information | | |
| Name of Organization * Littleton Youth Ballet Address * Street Address 1169 W Littleton Blvd | | |
| Address Line 2 | | |
| City | State / Province / Region | |
| Littleton | со | |
| Postal / Zip Code | Country | |
| 80120 | United States | |
| URL https://www.littletonyouthballet.org/ Copy/paste complete URL of organization's web site, including "https://" | | |
| Is your organization Non-Profit?* | | |
| | | |
| Are you registered with the Colorado Secretary of State as a 501(c) charitable organization? * No | | |
| Program Information | | |

Program Description*

Littleton Youth Ballet is a non-profit perfoming company in Littleton, Colorado. Our mission is as follows: Through professional education, positive role models, and an emphasis on personal growth, Littleton Youth Ballet's mission is to inspire a new generation of dancers who are not only exceptional performers but also compassionate, confident, and empowered individuals.

Brief description of program or service for which organization intends to use the funds (1,000 character limit)

Total Served*

Residents Served *

Total people served by the program for funding requested

3,000

Total estimated Littleton residents served by the program in prior year

Youth Served *

350

Funding Are you applying for the Local Partnership or Stadium District Funding?* If you are applying for both grants, please submit a separate grant application for each grant Local Partnership Funding Stadium District Funding Amount Requested* Annual Budget* \$ 10,000.00 \$ 150,000.00 Funding amount requested Organization's annual budget How would the funds be used?* If applying for stadium district funds, how would the funds be used to support youth activity programs? (1,000 character limit) The funds will be used to provide scholarship awards through the annual Littleton Youth Ballet David Jaramillo Scholarship Fund. Scholarships are awarded annually to LYB members through a formal application process. Recipients may use the funds to offset expenses such as annual membership fees, competitions, master classes and intensives. In May of 2025 the scholarship committee awarded \$4500 to support members of Littleton Youth Ballet! We are in hopes that we can give out even more funds to support members of LYB to assist in pursuing their passion! Other Funding Sources* Other sources for funding are through donations, fundraising and sponsorship at LYB's gala. Funding Received in Prior Year?* Yes, received a cash grant Yes, received in-kind sponsorship Yes, received a cash grant & in-kind sponsorship Applied, didn't receive grant or in-kind sponsorship Never applied for Local Partnership Funding Specify how prior year's funds and/or in-kind services were used.* Littleton Youth Ballet awarded \$4500 in scholarship funds to members. The other \$500 was ear-marked for the 2026 application year in conjunction with additional funding from other sources. Was any of the funding not spent?* Yes O No How much of the funding was not spent?* 500 Please upload your updated W-9 Form signed and dated in June or July 2025.* LYB w-9 2025.pdf 163.82KB

Applications must have a W-9 to be considered

Approved Amount by City Council



Contact Information

| * | * | |
|---|--|--|
| Contact Name * | Title * | |
| Maureen Shannon Person to whom questions should be directed regarding this application | Executive Director Contact person's title | |
| | Contact persons the | |
| Email* | Phone* | |
| maureen@northlittletonprom | | |
| ise.org | 303-565-0079 | |
| Email Confirmation * | | |
| maureen@northlittletonpromise.org | | |
| Organization Information | | |
| Name of Organization* | | |
| North Littleton Promise | | |
| | | |
| Address * | | |
| Street Address | | |
| East Community Center, Attn: North Littleton Promise | | |
| Address Line 2 | | |
| 5933 S. Fairfield St. | | |
| City | State / Province / Region | |
| Littleton | CO | |
| Postal / Zip Code | Country | |
| 80120 | United States | |
| URL | | |
| https://www.northlittletonpromise.org Copy/paste complete URL of organization's web site, including "https://" | | |
| Is your organization Non-Profit?* | | |
| | | |
| Are you registered with the Colorado Secretary of State as a 501(c) charitable organization?* | | |
| Yes | | |
| ○ No | | |
| Program Information | | |
| | | |

Program Description*

For nearly 20 years, North Littleton Promise (NLP) has served northeast Littleton's immigrant community, building relationships and putting action to "Love thy neighbor." Where nearly all families are low-income and primarily Spanish-speaking, NLP closes the achievement gap for immigrant children, fosters community-led engagement, and supports families across generations. This grant will bolster general operations, with a focus on afterschool and summer programming, and family engagement. NLP offers K–12 educational enrichment, mentorship, character development, and soccer teams that teach teamwork and leadership. Summer camps focus on academics and include field trips. High schoolers develop job skills and explore career paths through a leadership development program. NLP also hosts monthly parent meetings and offers a Spanish/English Language Program that promotes bilingual exchange and cross-cultural understanding, making NLP a trusted hub for immigrant families.

Brief description of program or service for which organization intends to use the funds (1,000 character limit)

Total Served *

Residents Served *

125

150

Total people served by the program for funding requested

Total estimated Littleton residents served by the program in prior year

Youth Served *

99

Funding

Are you applying for the Local Partnership or Stadium District Funding?*

If you are applying for both grants, please submit a separate grant application for each grant

- Local Partnership Funding
- Stadium District Funding

Amount Requested*

Annual Budget*

\$ 50,000.00

\$ 508,418.00

Funding amount requested

Organization's annual budget

How would the funds be used?*

If applying for stadium district funds, how would the funds be used to support youth activity programs? (1,000 character limit)

North Littleton Promise builds life-giving relationships with immigrant kids and families to foster faith, education, and leadership in Christ-centered community. This grant will support 2026 summer youth programs that provide academic support, mentorship, and leadership development. ADVENTURE DAYS (1st–5th) and SUMMER ACADEMY (6th–8th) are five-week, all-day programs promoting spiritual, academic, and social growth. Activities include reading, STEM, outdoor adventures, and college exposure. The HIGH SCHOOL LEADERSHIP PROGRAM offers paid summer roles and year-round college/career prep. NLP also partners with Eagle Lake Camps for a week of immersive nature-based growth through activities like canoeing, climbing, and ropes courses. Camp builds confidence, reduces stress, and fosters independence. Across all programs, students gain critical life skills, connect with mentors, and experience belonging in a safe, supportive, and empowering community.

| Other Funding Sources* | | |
|--|--|--|
| North Littleton Promise is committed to long-term impact thr relationships. NLP leverages its relationships with individual partnerships to sustain its initiatives. NLP's growing network while strengthening community ownership. Additionally, NLF ongoing support for youth programs, language classes, and sources for 2024: Foundations- \$212,800 Individuals- \$101,000 Campaigns- \$39,000 Events- \$60,000 Participation Fees- \$20,000 Summer Programs-\$40,000 Churches- \$37,500 Other- \$1,100 | donors, local churches, foundation grants, and city of volunteers and alumni also help extend capacity fundraising events, such as La Fiesta, ensure | |
| Thus far in 2025, NLP has received \$131,187.40 in donor gradular foundation-\$50,000 Stoller Foundation-\$15,000 Reiter Family Foundation-\$10,000 | ving, as well as the following grant awards: | |
| Funding Received in Prior Year?* | | |
| Yes, received a cash grant | Yes, received in-kind sponsorship | |
| Yes, received a cash grant & in-kind sponsorshipNever applied for Local Partnership Funding | Applied, didn't receive grant or in-kind sponsorship | |
| Specify how prior year's funds and/or in-kind services v | vere used.* | |
| The 2025 stadium funds are actively supporting NLP's summer session, which currently serves 51 students. Each morning, students participate in math and literacy enrichment activities. In the afternoons they take part in leadership lessons and hands-on projects, such as maintaining the NLP garden. Fifth graders work weekly with seniors at Parkinson's Point, leading strength and balance exercises. The program also includes field trips to the Denver Museum of Nature and Science, the Children's Museum, Wings Over the Rockies, Town Hall Arts Theater, and Pirate's Cove. Additionally, students enjoy hikes and sessions with guest educators. | | |
| Was any of the funding not spent?* | | |
| ○ Yes | No | |

346.64KB

How much of the funding was not spent?*

Applications must have a W-9 to be considered Approved Amount by City Council

NLP W-9 2025.pdf

Please upload your updated W-9 Form signed and dated in June or July 2025.*



Contact Information

| Contact Name * | Title * | |
|--|---------------------------|--|
| Bess Scully | Executive Director | |
| Person to whom questions should be directed regarding this application | Contact person's title | |
| Email* | Phone* | |
| executivedirector@symphon | | |
| yrockies.org | 3038294857 | |
| Email Confirmation * | | |
| executivedirector@symphonyrockies.org | | |
| Organization Information | | |
| Name of Organization* | | |
| Arapahoe Philharmonic DBA Symphony of the Rockies | | |
| Address* | | |
| Street Address | | |
| 5753 S PRINCE ST UNIT 1183 | | |
| Address Line 2 | | |
| City | State / Province / Region | |
| LITTLETON | CO | |
| Postal / Zip Code | Country | |
| 80160 | United States | |
| URL | | |
| https://www.symphonyrockies.org Copy/paste complete URL of organization's web site, including "https://" | | |
| Is your organization Non-Profit?* | | |
| | | |
| Are you registered with the Colorado Secretary of State as a 501(c) charitable organization?* | | |
| Yes | | |
| ○ No | | |
| | | |

Program Information

Program Description*

The Crescendo Project nurtures the next generation of musicians and music lovers through engaging, accessible music education. We partner with schools, focusing on Title I, to offer a flexible menu of programs: interactive in-school assemblies with live ensembles, immersive Discovery Concerts that invite students into the orchestra experience, in-school enrichment to strengthen music programs through small-group instruction and Honors Coaching, and our Emerging Young Artist program that spotlights exceptional youth. For this grant, we will focus on three impactful offerings for Littleton: free tickets for students and families to our classical concerts, in-school assemblies for Littleton schools, and free admission to our Children's Discovery Concerts, removing cost barriers and inspiring lifelong connections to music.

| Total Served * | Residents Served* | |
|---|--|--|
| 3,000 Total people served by the program for funding requested | 2,100 Total estimated Littleton residents served by the program in prior year | |
| Youth Served* | | |
| 2850 | | |
| Funding | | |
| Are you applying for the Local Partnership or Stadium D | istrict Funding?* | |
| If you are applying for both grants, please submit a separate grant application | on for each grant | |
| Local Partnership Funding | | |
| Stadium District Funding | | |
| Amount Requested * | Annual Budget * | |
| \$ 27,600.00 Funding amount requested | \$ 374,108.00 Organization's annual budget | |
| How would the funds be used?* | | |
| If applying for stadium district funds, how would the funds be used to support | rt youth activity programs? (1,000 character limit) | |
| We are requesting \$27,600 to support three key offerings of | | |
| • Free concert tickets for families: We'll provide complimentary tickets to mainstage concerts for Littleton | | |
| students, families, and teachers. This spring, over 40 attende • In-school concerts: We'll present five assemblies in partner | | |
| students. These interactive performances introduce instrume | | |
| Discovery Concerts: We'll offer 1,000 students tickets to immersive concerts in April and November 2026. First invitations go to the district's three Title I schools, with remaining tickets offered to 24 additional elementary | | |
| schools. | | |
| Budget: \$1,000 for concert tickets; \$21,600 for five in-school concerts (4 musicians @ \$1,080 each); \$5,000 for two Discovery Concerts. | | |
| All funds will be used by the end of the 2026 funding cycle, in | n accordance with the City's grant guidelines. | |
| Other Funding Sources* | | |
| For last completed FY 2023/2024: SCFD, CCI, and Littleton Foundations: \$33,063 Corporations: \$1,750 Tickets: \$58,657 | | |
| Funding Received in Prior Year?* | | |
| Yes, received a cash grant | ○ Yes, received in-kind sponsorship | |
| Yes, received a cash grant & in-kind sponsorshipNever applied for Local Partnership Funding | Applied, didn't receive grant or in-kind sponsorship | |
| Specify how prior year's funds and/or in-kind services were used.* | | |
| Yes. Having received Stadium District Funding in February 2025, we began implementation in spring 2025 with | | |
| in-school assemblies and Discovery Concert tickets provided to Littleton school students. Additionally, we expanded access by offering complimentary tickets to our mainstage classical concerts for students and | | |
| families. All awarded funds will be fully spent by the end of the | _ | |
| Was any of the funding not spent?* | | |
| ○ Yes | No | |
| How much of the funding was not spent?* | | |
| 0 | | |
| Please upload your updated W-9 Form signed and dated in June or July 2025.* | | |
| Arapahoe Philharmonic, DBA Symphony of the Rockies W-9 Applications must have a W-9 to be considered | .pdf 2.67MB | |
| Approved Amount by City Council | | |
| | | |



Contact Information

| Contact Name * Elly Conant Person to whom questions should be directed regarding this application | Title * Executive Director Contact person's title | |
|--|---|--|
| Email* | Phone * | |
| elly@whizkidstutoring.com | 303-921-9391 | |
| Email Confirmation * | | |
| elly@whizkidstutoring.com | | |
| Organization Information | | |
| Name of Organization* Whiz Kids Tutoring | | |
| Address* | | |
| Street Address | | |
| 5500 E. Yale Avenue, Suite 200 | | |
| Address Line 2 | | |
| City | State / Province / Region | |
| Denver | CO | |
| Postal / Zip Code | Country | |
| 80222 | USA | |
| URL | | |
| https://www.whizkidstutoring.com/ Copy/paste complete URL of organization's web site, including "https://" | | |
| Is your organization Non-Profit?* | | |
| | | |
| Are you registered with the Colorado Secretary of State as a 501(c) charitable organization?* | | |
| Yes | | |
| ○ No | | |
| Program Information | | |

Program Description*

Whiz Kids (WK) provides one-to-one tutoring, mentoring, and spiritual support to students living below the literacy and poverty lines. The program builds academic skills, confidence, and meaningful relationships to help students experience lasting hope and a brighter future. Core components include: the Tutoring, Mentoring, and Academic Support Program, where trained volunteers offer individualized support; Club Time (optional), offers age-appropriate, faith-based messages and activities; and Student Enrichment, including events such as the annual Whiz Kids Rodeo. WK operates six sites in the City of Littleton, providing consistent, caring support to help young people thrive in school and in life.

The best example of WK's program is through students like Karla. Karla was a WK student for three years at our Bethany site 18 years ago. She grew so much academically and found a love for teaching. She is now a teacher in Littleton Public Schools and came back to tutor at the same site!

| Total Served * | Residents Served * | |
|---|---|--|
| 500 | 100 | |
| Total people served by the program for funding requested | Total estimated Littleton residents served by the program in prior year | |
| Youth Served * | | |
| 500 | | |
| Funding | | |
| Are you applying for the Local Partnership or Stadium I If you are applying for both grants, please submit a separate grant applica Local Partnership Funding Stadium District Funding | | |
| Amount Requested * | Annual Budget * | |
| \$ 25,000.00 | \$ 855,460.00 | |
| Funding amount requested | Organization's annual budget | |
| How would the funds be used?* | | |
| If applying for stadium district funds, how would the funds be used to supp | ort youth activity programs? (1,000 character limit) | |
| Whiz Kids requests program support to continue offering one-to-one tutoring and mentoring for students living below the poverty line in Littleton. WK serves students at six sites in Littleton, including 1) Littleton 1st Presbyterian, 2) Littleton United Methodist, 3) Grace Point, 4) Bethany, 5) Calvary, and 6) Horizon, which serve 125 students total among Field Elementary, Little Raven Elementary, and Centennial Elementary. | | |
| Funds will support volunteer recruitment, training, and oversight; creation of student materials; stipends for liaison teachers at partner schools; background checks; student incentives; and volunteer appreciation efforts. Whiz Kids helps students engage in school as confident learners with a sense of hope and purpose. The program focuses on literacy, math, and homework help while fostering mentoring relationships that build resilience and social-emotional skills. | | |
| Other Funding Sources* | | |
| As a well-established organization with decades of experience, Whiz Kids has developed a robust and diverse revenue infrastructure to sustain its programming long-term. The organization collaborates with longstanding funders and experienced development consultants to secure funding for all initiatives. In FY 2024, Whiz Kids' revenue sources included Individual Contributions (35%), the IRS Employee Retention Credit (24%), Foundations (14%), Events (8%), Government Grants (7%), Business/Corporations (7%), Churches (3%), and Interest (2%). This diversified funding strategy ensures the stability and continuity of Whiz Kids' programs even beyond the exhaustion of specific grant awards. | | |
| Funding Received in Prior Year?* | | |
| Yes, received a cash grant Yes, received a cash grant & in-kind sponsorship Never applied for Local Partnership Funding | Yes, received in-kind sponsorship Applied, didn't receive grant or in-kind sponsorship | |
| Specify how prior year's funds and/or in-kind services v | were used.* | |
| Grant funds were used to support programming at WK's six tutoring sites in Littleton, serving under-resourced students particularly vulnerable to academic failure. Through tailored academic support, mentorship, and resources, the program aimed to improve educational outcomes for these students. In the 2024-2025 academic year, Whiz Kids served a total of 504 elementary and middle school students across 37 tutoring sites in six counties, with 100 of these students being from within the City of Littleton. This success was made possible by the dedication of 710 volunteers, including 260 new tutors, who collectively provided 28,200 hours of tutoring and site management. Of these, 110 tutors served in the Littleton sites. | | |
| Was any of the funding not spent?* | | |
| ○ Yes | No | |
| How much of the funding was not spent?* | | |

Please upload your updated W-9 Form signed and dated in June or July 2025.*

12 W-9 2025 - WK.pdf

117.46KB

Applications must have a W-9 to be considered

Approved Amount by City Council