LOI- 2026 Cousins Foundations

Cousins Foundation

Question Group

Project Title*

(e.g. "Organization Name" general operating support)

Character Limit: 100

Organization Description*

Please briefly describe your organization (500 words or less):

- History, mission, and goals
- Population served
- Current programs and activities

Character Limit: 10000

Focus Area*

What issue(s) does your organization aim to address? Please select all that apply. Please use the definitions below to identify areas of focus.

Community Arts

- Investments in community fine arts
- Investments in historical sites and museums

Community Wellness

- Access to mental and physical health services
- Access to healthy, sustainable food choices and infrastructure
- Empowerment of safe, thriving communities

Economic Empowerment

- Support resources for individual/family economic mobility
- Programs targeting small business growth & sustainability
- Access to job training and financial planning services

Educational Opportunities

- Investments in early childhood education to positively impact long-term health outcomes
- Access to equitable K-12 educational opportunities
- Targeted interventions and programs to lead students to college and career readiness

Holistic Community Revitalization

- Place-based neighborhood transformation initiatives

Housing Security

- Access to stable, safe housing options
- Access to resources and programs to create housing security
- Creation of high quality, sustainable affordable housing

Choices

Community Arts
Community Wellness
Economic Empowerment
Educational Opportunities
Holistic Community Revitalization
Housing Security
Other

Other - Details

If you selected "Other" for Focus Area above, please provide in 5 words or less your organization's primary focus area.

Character Limit: 40

Geographic Focus Area(s)*

Please select all geographic areas that your organization serves. Tier 1 neighborhoods are the Foundation's top priority areas, followed by Tiers 2 and 3.
Tier 1: Neighborhoods in the attendance zone of the Carver cluster in South Atlanta, East Lake neighborhood, and Grove Park neighborhood
Tier 2: Metro Atlanta (defined as impacting any one of or combination of the following counties: Fulton, DeKalb, Cobb, Gwinnett, Clayton)
Tier 3: Georgia state-wide or other

Choices

South Atlanta
East Lake neighborhood
Grove Park neighborhood
Metro Atlanta
Georgia state-wide
Other

Other - Details

If you selected "Other" for geographic focus area above, please share the primary geographic focus area your organization and programs serve.

Character Limit: 20

Age of Your Organization*

How long has your organization been in operation?

Choices

Under 2 Years
3-9 Years
10+ Years

Staff size (FTE)*

Character Limit: 4

Staff size (PTE)*

Character Limit: 4

Other staff information

Optional: Please feel free to include any other relevant information about your organization's staffing here.

Character Limit: 250

Annual Operating Budget*

What is your total projected annual operating budget this year?

Character Limit: 20

Funding Request Details*

Please briefly summarize the focus of your funding request (300 words or less):

Character Limit: 3000

Type of Support Requested*

Choices

Unrestricted General Operating Support
Program or Project Support
Capital Support

Request Amount*

Please provide an estimate of the total amount of funding your organization anticipates requesting. If the LOI moves into an Application phase after review, this field can be edited.

Character Limit: 20

Grant Request Length

Please mark the number of grant years the Requested Amount (question above) is being requested for.

Choices

1 Year
2 Years
3 Years

How did you learn about the Cousins Foundations?

Character Limit: 2000