

# Community Foundation

of St. Clair County

## Grant Guidelines

The Community Foundation serves charitable needs and enhances the quality of life in St. Clair County.

### Eligibility:

Any non-profit charitable organization registered with the IRS and located within St. Clair County, Michigan.

### Strategic Priorities 2016-2018

During this next cycle the Foundation will focus its financial and organizational resources on People & Place.

By investing in “People” and “Place” we will pursue tactics and initiatives which will help lead to a healthy and vibrant regional economy---a place to “live, work and play”. Under this philosophy, our discretionary and competitive grant programs will give preference to projects within these priority areas:

Ranked by priority:

#### 1. Community & Economic Prosperity

- Placemaking
- Our downtowns – their vitality and continued revitalization
- Waterfront development & utilization
- Regional collaboration & planning
- Entrepreneurism
- Nonprofit capacity building

#### 2. Cradle to Career

- Emphasis on Skilled trades and apprenticeship programs
- Exploration & preparation for career and lifetime success after K-12
- Childhood literacy
- Pathways to careers in skilled trades
- Hands-on learning & training programs for youth and adults alike, including under-educated or under-trained adults looking for new career options
- Programs & projects to re-engage students who do not complete a college degree in a traditional timeframe or who leave college to explore other options

#### 3. Healthy Lifestyles

- Friday Food & the coordination with feeding older siblings
- Year-round access to healthy foods and necessities
- Greater access to healthy food year-round including summer-time food programs, farmers markets, mobile food trucks, and farm-to-table programs, projects and initiatives, especially those targeting at-risk and neglected segments of our population
- Coordination of efforts aimed at providing basic necessities to school-aged children and a more systematic effort at aiding these support systems year-round
- Programs, projects and initiatives targeting the entire family; their well-being and their success in life and their ability to contribute to our region’s growth and prosperity

Additional details on the Community Foundation’s Priorities can found on our website: [www.stclairfoundation.org](http://www.stclairfoundation.org)

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## **How to begin the competitive grant application process:**

Call or email briefly summarizing the proposed project. Include contact information, need to be addressed, objectives, and strategy to address need and community partners. State the amount of grant support being requested from the Foundation, as well as the total estimated project cost.

A Program Officer will contact you to discuss your project and the Grant Application form. Grant applications are accepted at any time. Grant requests seeking \$50+ will only be reviewed in the 4th quarter of the calendar year.

## **Projects that will not be considered for funding are those which involve:**

- Sponsorships of sports and/or academic teams for contests, competitions and events
- Activities influencing legislative elections
- Activity/purpose that would violate the Foundation's tax exempt status under the IRS code
- Debt reduction, deficit operations or venture capital funds.
- Individuals (except for scholarships)
- Private Foundations
- Request for funds which will be redirected to individuals, other activities or organizations.

## **The Foundation's review process pays special attention to the following:**

- For an ongoing activity, what will be its future source of funding?
- Is the applying organization well run, with an active and well-qualified board and a competent staff capable of implementing the proposed activity?
- What is the organization's financial condition and fiscal history?
- Are there more logical sources of funding than the Community Foundation?
- Are there a variety of funding opportunities?
- Is the proposed activity well-conceived and is its budget realistic?

## **Accountability:**

- After receipt of a grant, the Community Foundation may require any of the following types of evaluation: written reports, site visits, and oral reports.
- Any funds not spent for the specific purpose of the grant must be returned to the Foundation.

## **Recognition:**

- The Community Foundation asks that where appropriate, proper signage be placed recognizing the support of the Community Foundation of St. Clair County and/or the committee that approved the grant.
- It is important to note in the application how you will promote the Community Foundation's involvement in making the project happen.

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## **Non-Discrimination in Grantmaking:**

The Community Foundation of St. Clair County is committed to promoting broad diversity and inclusion within our organization and the community. No one will be excluded from consideration for employment or volunteer participation, or from organization services regardless of but not limited to the following basis: age, disability, family or economic circumstance, race, ethnicity, gender, gender identity or expression, sexual orientation, world view, spiritual beliefs, marital status, national origin or veteran status.

In our grant-making, we strive to partner with organizations that also embrace these beliefs and demonstrate them through their policies, practices, actions and impact. We seek grantees and partners that incorporate diversity and inclusion into their mission, governance board, staff, volunteers, vendors and constituents served.

Organizations that serve a specifically defined population in an effort to help populations overcome historic discrimination are not considered non-inclusive or discriminatory. Also, organizations serving target populations per their mission, such as girls, babies or older adults, would not be considered discriminatory. This inclusion statement applies to how an organization serves its specific target population as well as how it handles hiring and volunteer participation.

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## GRANT APPLICATION

### Date of Application

Legal Name of Organization Applying: \_\_\_\_\_  
(Should be same as on IRS determination letter and as supplied on IRS Form 990)

Year Founded: \_\_\_\_\_ Current Operating Budget: \$ \_\_\_\_\_

Executive Director: \_\_\_\_\_

Contact Person (if different from Executive Director): \_\_\_\_\_

Address (Principal/Administrative Office): \_\_\_\_\_

City / State / Zip: \_\_\_\_\_

Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_ Email: \_\_\_\_\_

Employer Tax ID #: \_\_\_\_\_ Is this a 501(c)(3) organization: Yes \_\_\_ No \_\_\_  
Copy of IRS tax exempt status letter required – see Section 2, item 2B.

List any previous support received from Community Foundation of St. Clair County: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Project / Program Name: \_\_\_\_\_

Purpose of Grant (one sentence): \_\_\_\_\_  
\_\_\_\_\_

Dates of Project / Program: \_\_\_\_\_

Amount Requested: \$ \_\_\_\_\_ Total Project / Program Cost: \$ \_\_\_\_\_

Estimate of individuals impacted # \_\_\_\_\_

Geographic Area Served: \_\_\_\_\_

\_\_\_\_\_  
Signature of Chairperson, Board of Directors

\_\_\_\_\_  
Date

\_\_\_\_\_  
Typed Name and Title

\_\_\_\_\_  
Signature of Executive Director

\_\_\_\_\_  
Date

**Section 1: Description of the Organization**

**1A:** Brief description the organization's history, goals, current programs and activities, specifically as they relate to the grant. *(Use additional typed pages if necessary)*

**1B:** Names, affiliations and terms of office for Officers and Directors, organizational chart. *(if available)*

**1C:** Additional information helpful in knowing about your organization.

**Section 2: Summary of your organization's finances.**

**2A:** Organization's fiscal year \_\_\_\_\_

**2B:** Attach a copy of 1) current IRS tax exempt status letter 2) most recent financial statement, independently audited if possible and most recent IRS form 990 filing.

**2C:** Attach a copy of organization's current Annual Operating Budget. (revenues/expenses). If revenues do not equal expenses please provide explanation.

**Section 3: Case for Support.**

**3A:** Executive Summary of Program/Project (*What do you need funding for?*)

**3B:** In two pages or less present your Case for Support by answering the following five questions.

*It is requested that you be specific, use bullet points to list ideas and include specific examples and statistics.*

- 1. What is the problem or social need (the big picture)? (Provide specific examples and statistics)*
- 2. Identify the issue(s) contributing the problem or social need that you will address?*
- 3. How will you address the above issue(s)? (Cite best practices and statistics where available)*
- 4. What results do you want to achieve? (Provide measurable outcomes and proposed evaluation process)*
- 5. Why are you the best organization to address the need?*

**Section 3 Continued:**

**3C.** How does the project/program address one or more of the Foundation's current priority areas? *A list of current priority areas can be found on the Foundation's website at [www.stclairfoundation.org](http://www.stclairfoundation.org) under Current Initiatives.*

**3D.** Accessibility – Is the project/program barrier free and universally accessible to individuals of all physical abilities? Yes \_\_\_\_\_ No \_\_\_\_\_ Not Applicable \_\_\_\_\_

**3E.** Evaluation – Plans for evaluation including how success will be defined and measured.

**3F.** If you receive funding, how will you promote the Community Foundation's involvement in making the project happen? *Signage where appropriate, etc.*

**3G.** How will you proceed if you do not receive funding from the Community Foundation?

**Section 4: Program/Project Budget**

**4A** Time period this budget covers \_\_\_\_\_

**4B** \_\_\_\_\_  
Total cost of project

**4C** \_\_\_\_\_  
Amount requested from Community Foundation

**4D** Description of various budget categories (for a large financial request, make up your own more detailed form. (e.g. separate salaries, taxes, fringes or supplies, printing & copying.) In most cases Revenues will equal Expenses, if they are not equal include an explanation.

| <b>Revenues:</b>  | <b>Committed</b> | <b>Pending</b> |
|---|------------------|----------------|
| Grants/Contracts/Contributions Local Government             |                  |                |
| State Government  | \$ _____         | \$ _____       |
| Federal Government  | \$ _____         | \$ _____       |
| Foundations (itemized)                                      | \$ _____         | \$ _____       |
| Corporations (itemized)                                     | \$ _____         | \$ _____       |
| Individuals (itemized)                                      | \$ _____         | \$ _____       |
| Other (specify) _____                                       | \$ _____         | \$ _____       |
| _____   | \$ _____         | \$ _____       |
| Earned Income   |                  |                |
| Events  | \$ _____         | \$ _____       |
| Publications and products                                   | \$ _____         | \$ _____       |
| In-kind support (specify)                                   | \$ _____         | \$ _____       |
| Other (specify) _____                                       | \$ _____         | \$ _____       |
| _____   |                  |                |
| Totals for committed and pending:                           | \$ _____         | \$ _____       |
| <b>TOTAL REVENUES (committed + pending = Total Revenue)</b> |                  | \$ _____       |

|   |          |
|---|----------|
| <b>Expenses:</b>                                      |          |
| Salaries, payroll taxes, fringe benefits              | \$ _____ |
| Consultants and professional fees                     | \$ _____ |
| Insurance   | \$ _____ |
| Equipment   | \$ _____ |
| Supplies (printing, copying, telephone, fax, postage) | \$ _____ |
| Rent, utilities, maintenance                          | \$ _____ |
| Evaluation  | \$ _____ |
| Marketing   | \$ _____ |
| Other (specify) _____                                 | \$ _____ |

**TOTAL EXPENSES** \$ \_\_\_\_\_

*If Revenues do not equal Expenses please provide explanation.*