

Cherokee County Legacy Foundation

Grant Application

~ 2010 ~

Dear Nonprofit Colleague,

We are pleased to announce the availability of the Cherokee County Legacy Foundation Grant Application. This form was developed to make the grant seeking process simpler and more efficient for nonprofits. It is available from Sue Schwaller at the ISU Extension Office in Cherokee or you can mail requests to Sue Schwaller, ISU Extension Office, 209 Centennial Dr. Ste. A, Cherokee, IA, 51012.

~ The Grant Committee

The Cherokee County Legacy Foundation was formed in 2005 to coordinate and provide philanthropic support for community betterment projects in Cherokee county. The foundation is made up of community minded individuals who have the ability to assess community needs, implement asset development, evaluate area grant applications, encourage partnerships and initiate activities to enhance Cherokee county. Each year the foundation makes grant awards to worthwhile projects located in the county that are identified through a community grants application process. Our foundation's areas of emphasis include:

- * **Arts & Culture**
- * **Health & Human Services**
- * **Community Betterment**
- * **Recreation & Environment**
- * **Education**
- * **Youth Development**

The Cherokee County Legacy Foundation makes grants to I.R.S. 501(c)(3) 'tax exempt' organizations, 170(b) 'unit of government' organizations, or organizations with approved fiscal agents to assist in fulfilling the Foundation's mission to foster private giving, strengthen service providers and improve the conditions of the community, county, or area of interest. Our foundation promotes endowment building, community grant making, organizational collaboration, and public leadership for the benefit of the Cherokee county area.

The Cherokee County Legacy Foundation is an affiliate of the Iowa Community Affiliate Network, a collaboration of the Greater Des Moines Community Foundation (GDMCF) and the Iowa Area Development Group Community Foundation, who have recognized the need for new avenues to encourage philanthropy throughout Iowa. The Iowa Community Affiliate Network currently serves 31 counties throughout Iowa, including an "umbrella" or "family" of related funds benefiting specific communities and projects. Each Affiliate advises on a geographically focused collection of funds. They are components of the GDMCF, sharing in its tax-exempt status and developed to increase the philanthropic base for Cherokee county.

Grant amounts are dependent upon the allocation of funds available to the Legacy Foundation each fiscal year and evaluated and prioritized based on the potential benefit, the number of Cherokee county residents impacted, and the merit of the project for meeting community needs.

Please submit 10 completed applications by mail to:

Cherokee County Legacy Foundation
ISU Extension Office
209 Centennial Dr. Ste. A
Cherokee, IA 51012

Any questions? Please call or e-mail
Sue Schwaller
(712) 225-6196

Application deadline: **February 1, 2010**

**CHEROKEE COUNTY LEGACY FOUNDATION
GRANT APPLICATION COVER SHEET**

Organization _____ EIN # _____

Address _____ Phone _____

_____ 501(c)(3) status? { Yes { No

Contact Person and title _____ Phone _____

Major sources of operating funds (by %) _____

_____ Total Operating Budget: \$ _____

Name of Project _____

Check the category which best describes the purpose of the grant request:

{ *Arts/Culture* { *Community Betterment* { *Education* { *Health/Human Serv.* { *Recreation/Environment* { *Youth*

Description of project for which funds are requested (no more than 25 words) _____

Specifically, how will funds be used? _____

What will project accomplish? _____

Anticipated timetable: _____ to _____ Geographic area served by project: _____

Target population group (and number) served by project: _____

1. Amount and source of pledges/commitments for project to date: _____

_____ Total: \$ _____

2. Other funding sources (and amounts) sought for this project: _____

_____ Total: \$ _____

3. Amount requested from Cherokee County Legacy Foundation:

Total: \$ _____

TOTAL PROJECT COST: (Lines 1-3) \$ _____

Signature _____ Title _____ Date _____

CHEROKEE COUNTY LEGACY FOUNDATION

GRANT APPLICATION FORMAT

Each application should include a cover sheet and supporting information, in the following format:

A. Application Cover Sheet: *(Use form provided or duplicate on computer – Arial~10 pt.)*

B. Project Description: *(Should be typed in 12 pt. font, with no less than one-inch margins.)*

In one page or less, describe your proposed project. What do you plan to do, and why? Where and when? (Time line) Who will be responsible for carrying out the proposed project?

C. Additional Narrative:

Please provide the suggested information, as appropriate, in five (single-sided) pages or less:

1. Applicant's Ability to Carry Out Project

Does applicant have a record of effective service? Is the applicant qualified and prepared to take on the proposed project? Is there broad community support (volunteers and finances) for the project?

2. Need:

Does the proposed project address one or more of the prioritized needs? (If so, which ones?) How was the need for the project identified? What other resources are available to fund or undertake the project? What other funding sources have been considered and explored? Why is a Cherokee County Legacy Foundation Grant needed to make this project happen?

3. Impact:

What will be the result of this project? What will the project produce? How many people will be directly impacted by this project? Describe the individuals impacted by the project. How will Cherokee County communities be enhanced or improved by this project? What other future spin-offs are anticipated?

4. Budget:

How much is being requested from Cherokee County Legacy Foundation for this project? What is the total cost of the project? What is the source of other funds being provided for this project? Is the budget realistic? Is the funding amount requested appropriate?

5. Evaluation and Sustainability:

What are the expected outcomes of this project? How will those outcomes be measured? Will this be a one-time event or an on-going project? If it is intended to be on-going, how will it be sustained?

D. Supporting Documents: *(Only one complete set of documents is required and should be attached to the original application. Sample forms are included for your use, if needed.)*

For any questions regarding the requested information or documents, please contact:

Vernon Winterhof
(712) 434-5416
vwinterhof@ilecmail.com

- { **1.** Current Copy of IRS Determination ruling letter indicating that you are a tax-exempt organization under Section 501(c)(3) of the Internal Revenue Code.
Note: If your organization is a subsidiary of a nonprofit organization, a government unit, or represented by a fiscal agent, attach a copy of that organization's IRS ruling as well as a verification letter signed by an official of their governing body.
- { **2.** Names and titles of organization leadership, including trustees, directors, board officers and key staff personnel.
- { **3.** Organization's current operating budget, including a list of principle sources of income.
- { **4.** Organization's detailed project budget.
- { **5.** Organization's most recent year-end financial statement. *(If available, one copy of audited statement should be attached to the original application.)*
- { **6.** *(Optional)* Any attachments that will help clarify your organization's credibility or intent of the project, i.e.: newspaper clippings, letters of support, brochures, annual reports, etc. Please be concise.

Send an original and 10 copies of the grant application to:

Cherokee County Legacy Foundation
ISU Extension Office
209 Centennial Dr. Ste. A
Cherokee, IA 51012

Applications must be postmarked by February 1, 2010 and received by February 8, 2010 to be considered.

Grant awards will be determined by **April 30, 2010**. Notification letters will be sent out at that time. If approved, a *Grant Agreement Form* will be included. The Foundation will disburse funds within 30 days of receiving the completed *Grant Agreement Form*.

GRANT RECIPIENT'S RESPONSIBILITIES:

Organizations receiving grants must sign a *Grant Agreement Form* indicating their willingness to use the awarded grant for the purpose requested, file a final report, credit the Cherokee County Legacy Foundation in appropriate media releases, provide documentation of purchases within six months of grant distribution (unless an extension is granted), and return any portion of the grant monies not used for the designated purposes.

GRANT REVIEW CRITERIA

These principles have been established to assure equitable and effective grant making for the greater Cherokee County, thus enhancing its quality of life and perpetuating its heritage.

- A. The applying organization must be located and/or serve clients in the immediate Cherokee County boundaries as determined by the Foundation Board.
- B. The applicant must be a 501(c)(3) non-profit charitable organization, a 170(b) government unit, or an organization represented by a qualified fiscal unit, tax exempt under the IRS regulations. No grants will be made that jeopardize the tax exempt status of the Foundation.
- C. The Foundation makes grants to support creative and innovative programs, current or emerging charitable opportunities, services not presently offered, and occasional capital projects – all of which should enhance the quality of life in the county. Grants are not made to support annual operating budgets.
- D. Projects that apply to broad segments of the population, as well as projects proposed by coalitions of service providers and likely to gain support from matching fund arrangements will attain higher priority ratings.
- E. Proposed projects should not represent duplication of initiative already undertaken by other non-profit agencies.
- F. Requests will generally be denied for crisis intervention, current budget support, elimination of deficits, reduction of debt, or funding of completed projects or foundations.
- G. Programs and projects of religious institutions will be considered if they have an ecumenical base or are designed to serve persons in need of food, clothing, shelter, or counseling without regard to religious affiliation.
- H. Generally, grants will range in size from \$250 to \$10,000. Grant awards up to \$2,500 will be made in one complete payment, while larger grants may be distributed in two payments. Only one grant application can be submitted per organization per grant cycle.

Grant Proposals will be judged on the basis of such things as:

- The merit of the project for meeting priority community and county needs
- The ability and past experience of the staff to successfully complete projects
- The clarity and measurability of the project's goals
- The feasibility of the time frame given for completion of the project
- The number of Cherokee county residents to be impacted by the project

Cherokee County Legacy Foundation

Organization Budget

If you already prepared an organization budget that contains this information, please feel free to submit it in its original form. Feel free to attach a budget narrative explaining your numbers if necessary.

Budget for the period _____ to _____

INCOME

<u>Source</u>	<u>Amount</u>
<i>Support</i>	
Government grants	\$ _____
Foundations	\$ _____
Corporations	\$ _____
Individual contributions	\$ _____
Fundraising events and products	\$ _____
Membership income	\$ _____
 <i>Revenue</i>	
Government contracts	\$ _____
Earned income	\$ _____
Other (specify)	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
Total Income	\$ _____

EXPENSES

<u>Item</u>	<u>Amount</u>
Salaries & wages	\$ _____
Insurance, benefits & other related taxes	\$ _____
Consultants & professional fees	\$ _____
Travel	\$ _____
Equipment	\$ _____
Rent and utilities	\$ _____
General operating	\$ _____
Other (specify)	\$ _____
_____	\$ _____
_____	\$ _____
Total Expense	\$ _____
Balance (Income less Expense)	\$ _____

CHEROKEE COUNTY LEGACY FOUNDATION

BALANCE SHEET

Date _____

Assets

Cash	\$ _____
Securities	\$ _____
Real Estate	\$ _____
Other (specify)	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
Total Assets	\$ _____

Liabilities

Current	\$ _____
Long-term	\$ _____
Other (specify)	_____
_____	\$ _____
_____	\$ _____
_____	\$ _____
Total Liabilities	\$ _____
Net Worth	\$ _____
Total Liabilities & Net Worth	\$ _____

Non-501(c)(3) Fiscal Sponsorship Agreement

Applicant: _____

Fiscal Sponsor: _____

_____(hereafter referred to as **Organization**)
Has agreed to serve as a fiscal/program sponsor for _____
(hereafter referred to as **Applicant**) as outlined in the attached grant application and supporting materials. The Board of Directors of the **Organization** has approved adopting the **Applicant** as a program or project consistent with its purpose and mission. The Applicant's financial activities will be accounted for as a program of the Organization for IRS auditing and financial reporting purposes.

Sine the **Applicant** is not a recognized tax-exempt entity; the **Organization** must exercise full control over the **Applicant's** financial administration, management and disbursement of funds. If a grant is awarded, the **Organization** is responsible for ensuring completion of timely reports and submission of necessary financial statements required by the grantor Community foundation. Failure to insure timely reporting on behalf of the **Applicant** will result in a loss of good standing.

We agree to the terms stated above.

Signed this _____ day of _____, _____ (year)

On behalf of _____ (the **Applicant**)

By: _____
signature print name

Title

Signed this _____ day of _____, _____ (year)

On behalf of _____ (the **Organization**)

By: _____
signature print name

Title

Address/City/State/Zip: _____

Telephone Number: _____

- Attach to this Agreement the Fiscal Sponsor's 501(c)(3) IRS Determination Ruling Letter or comparable proof of charitable exemption (i.e. a letter from a City official confirming the status of the Applicant as a recognized unit of local government.)