## Warren County Philanthropic Partnership

### **Grant Application Instructions**

The Warren County Philanthropic Partnership makes grants to IRS section 501(c)(3) 'tax exempt' organizations and IRS section 170(b) 'unit of government' organizations to assist in fulfilling the foundation's mission to *foster private giving, strengthen service providers and improve the conditions of the communities in Warren County.* 

The project will be considered for a WCPP Grant if the following criteria are met:

- The organization is a section 501(c)(3) or a section 170(b) unit of government. Section 170(b) units of government include counties, cities, and schools.
- If not one of those listed above, the organization needs a fiscal sponsor (\*see description below), who will be legally and financially responsible.
- The project is in Warren County or serves Warren County residents.
- The application contains all required elements.
- 1. Project Type:
  - A **capital-based** request refers to the building of or the physical improvement of something.
  - A program-based request refers to activity or general programmatic support.

Awards will not be made for debt relief and ongoing operation subsidies, fundraising expenses, endowments, and politically sensitive or religious purposes.

2. Project Area of Focus:

Arts/Culture/Humanities – Museums, Historic Preservation, Exhibits, *etc.* Education – Schools (all ages), Adult Learning Programs, *etc.* Environment/Animals – Environmental Protection, Beautification, Animal-Related Issues Health – General, Rehabilitative, Mental, etc.

Human Services – Public Protection/Safety, Recreation, Youth Development, Social Support, General Human Services

**Public/Society Benefit** – Community Improvement/Development, Philanthropy/Volunteerism, Capacity Building, Civil Rights, *etc*.

3. Project Budget:

The project budget should only include information that pertains to the specific project for which funds are being requested. Budgets must be itemized with exact quotes or estimations from work estimates, vendor quotes, catalog prices, or website prices. In-kind contributions may be material donations, equipment use or donations, or building space. Volunteer hours may not be included. A scoring matrix is included with these instructions. Your application may score very well in most areas and may be competitive, however it may not score as well in the budget area without matching funds. Sources of matching funds may include other grants received, donated money, and raised money. *Grant applications with incomplete project budget information will be disqualified.* 

4. Grant Amounts:

Grant amounts awarded by WCPP are dependent upon the allocation of funds available to WCPP each fiscal year and are limited to nonprofits located in Warren County or projects serving Warren County. Finishing dollar award amounts of up to \$5,000 may be awarded.

Beginning in 2018, Warren County Philanthropic Partnership may award one High Impact Award in an amount of up to \$10,000 for larger projects with significant impact on Warren County.

If grant funds are awarded, receipts for all expenditures and proof of publicity/media coverage must be submitted with the Final Grant Evaluation within nine (9) months of receiving grant funds. Grant funds may not be used for items or services purchased before grant is awarded nor for items or services not listed in the project budget.

## **SCORING MATRIX**

Excellent, Outstanding or Very Good (8-10 points per box)	Good, Strong, or Adequate (6-7 points per box)	Poor, Weak, or Inadequate (1-5 points per box)		
Project Description	Project Description	Project Description		
<ul> <li>A. Need for Project</li> <li>Strong evidence of community support.</li> <li>Goals are clearly stated.</li> <li>Very evident how this project will enhance the community.</li> </ul>	<ul> <li>A. Need for Project</li> <li>Some evidence of community support.</li> <li>Goals are adequately stated.</li> <li>Some evidence of how this project will enhance the community.</li> </ul>	<ul> <li>A. Need for Project</li> <li>Little evidence of community support.</li> <li>Goals poorly stated.</li> <li>Little evidence of how this project will enhance the community.</li> </ul>		
<ul> <li>B. Partnerships and Visibility</li> <li>Strong evidence of community partners.</li> <li>Project provides high visibility to the WCPP.</li> </ul>	<ul> <li>B. Partnerships and Visibility</li> <li>Some evidence of community partners.</li> <li>Project provides some visibility to the WCPP.</li> </ul>	<ul> <li>B. Partnerships and Visibility</li> <li>No evidence of community partners.</li> <li>Project provides minimal/no visibility to the WCPP.</li> </ul>		
<ul> <li>C. Impact Indicators</li> <li>Desired impact is clearly stated.</li> <li>Impact measures are clearly stated.</li> <li>A method to evaluate the results of the project is clearly stated.</li> </ul>	<ul> <li>C. Impact Indicators</li> <li>Desired impact is adequately stated.</li> <li>Impact measures are adequately stated.</li> <li>A method to evaluate the results of the project is adequately stated.</li> </ul>	<ul> <li>C. Impact Indicators</li> <li>Desired impact is poorly stated.</li> <li>Impact measures are poorly stated.</li> <li>There is no method to evaluate the results of the project.</li> </ul>		
Budget	Budget	Budget		
A. Project is highly leveraged with matching funds. Greater than 50%	A. Project is moderately leveraged with matching funds. Up to 50%	A. Project is not leveraged with matching funds.		
B. Other resources and partners are committed to the project.	B. Some resources and partners identified for the project.	B. Very limited/no resources and partners have not been identified for the project.		

## **Application Requirements**

- Applicants must provide the original completed application (not including application instructions, matrix and application requirements pages), PLUS four (4) copies of the application.
- The original application and all copies must be signed.
- Application and copies of the application must include each of the following items:
  - Copy of latest Federal IRS Tax-exempt status letter
  - Signed letter of intent from fiscal sponsor if your organization is not 501(c)3 or 170(b) status
  - Letter(s) of commitment for grants, in-kind contributions, and other funding sources that match your request, estimates or bids
  - Estimates and quotes for materials or services (if estimates are from websites, unit prices and total price must be clearly marked or highlighted)
- Grant application must be postmarked **by March 1, 2018** to Warren County Philanthropic Partnership, P.O. Box 218, Indianola, IA 50125
- Applications must be typed using the format of this application to be considered

Submitting an incomplete application will remove your proposal from the grant scoring process.

#### APPLICATIONS MUST BE POSTMARKED BY 5:00 pm on March 1, 2018

Submit signed original and four copies by mail to:

#### Warren County Philanthropic Partnership P.O. Box 218 Indianola, IA 50125

For any questions, please email info@warrencountypp.org

\*A **fiscal sponsor** is an organization or party who receives the money on behalf of the grant applicant and who is responsible for disbursing the money for the project and maintaining appropriate documentation (receipts, etc.). The entity serving as the fiscal sponsor must be a section 501(c)(3) or section 170(b) unit of government.

# **Grant Application**

Organization Information

Name of Organization			Legal r	name (as listed with IRS)		
Address	City, State, ZIP		Employer Identification Number (EIN)			
Phone Number	Fax Number			Website		
Organization Contact Person	on Phone Number Email		Email			
Type of Funding	Capital-Based	Capital-Based Program-Based		I		
Project Area of Focus	Arts, Culture & Humanities			Educations		
	Human Service		I	Health		
Environmental & Animals			Public & Society Benefit			
Is your organization an IRS 501(c)3 nonprofit? Y			es	No		
If no, is your organization a 17	70(b) unit of government?	Y	es	No		

If no, you must have a fiscal sponsor who will be legally and financially responsible. Please attach a letter from fiscal sponsor stating their willingness to be your fiscal sponsor.

Fiscal Sponsor Name	Address		City, State, Z	IP	
Fiscal Sponsor Contact Pe	erson	Phone Number	EIN Number		r
Has your organization reco	eived WCPP grant	funds in the past?	Yes	No	)
If yes, what year?		Award Amount			
Have you met all required	conditions of the p	revious grant agreeme	ent?	Yes	No
If no, please explain:					
Name of Project:					
Estimated Number of Peo	ple Directly Served	by Project:			
\$	\$		\$		
Total Project Cost	Amount of Mat	ching Funds	Amount F	Requesti	ng
Percentage of matching do (Matching dollars divided by tot					

Provide a two to three sentence summary of grant project:

## **Project Description and Need**

Describe the proposed project and how it will enhance the community:

What are the goals and objectives of the project?

#### Partnership and Visibility

Is there community and volunteer support for the project? Explain.

How will the project include partnerships and visibility with community partners?

How will contributions from Warren County Philanthropic Partnership be recognized?

## Impact Indicators

What is the desired impact of the project?

How will you evaluate the results of the project?

#### **Project Budget**

Is the project leveraged by matching funds? Please explain:	Yes	No	

Are other resources already received or committed to the project? Yes No

If other resources, such as grants or in-kind contributions already received or committed to this project, please explain and attach letters of commitment:

#### PLEASE NOTE: SECTION D MUST EQUAL THE TOTAL OF SECTIONS A, B and C

Α	TOTAL COST OF GRANT REQUESTED FROM WCPP           (Itemize below and estimate dollar amount) Please attach letter(s) of commitment.				
#	Item	Amount (\$)			
1					
2					
3					
4					
5					
	Grant amount requested from WCPP				
в	FUNDING FROM SOURCES OTHER THAN THIS GRANT (Itemize below and estimate dollar amount) <i>Please attach letter(s) of commitment.</i>				
#	ltem	Amount (\$)			
1					
2					
3					
4					
5					
	Total funding from sources other than this grant				
с	C <b>IN-KIND CONTRIBUTIONS</b> Volunteer hours not included as in-kind contribution. (Itemize below and estimate dollar amount) <i>Please attach letter(s) of commitment.</i>				
#		Amount (\$)			
1					
2					
3					
4					
5					
	Total In-Kind Contributions				
D	Total Project Costs				

#### **Applicant Organization Board Approval**

We approve submission of this grant request and certify that the purpose of this request is charitable and that monies received from Warren County Philanthropic Partnership will be used solely for the project stated in the application. All projects must be completed within nine months of receipt of grant funding.

Typed or Printed Authorized Agent/Title

Date

Authorized Agent/Title Signature (Each copy of the grant application must be signed)