

# Community Investment Grant Application

Community Investment Grants supply broad, diverse, and responsive funds to support a strong and vibrant Owen County community.

Grant decisions are intended to support the mission of the Community Foundation — to enhance the quality of life for all citizens of Owen County, now and for generations to come. OCCF Community Investment Grants support projects that address community needs and have lasting value.

#### • Who Can Apply?

The Community Foundation invites all charitable organizations including charitable 501(c)(3) organizations, schools, churches, and governmental agencies in or serving Owen County to apply for grants. If your organization does not meet these criteria but your project meets the OCCF's charitable goals, we may be able to partner you with a fiscal sponsor, so please contact our office for assistance.

### • What is the Range of Grant Awards?

Community Investment Grants range from \$1,000 to \$5,000. Organizations have the option to crowdfund if they want up to \$10,000 or if they want to leverage our dollars with a matching campaign.

#### Application Deadlines

Grant committees review Community Investment Grant requests over three times per year. 2022 application deadlines for committee review are March 14, 2022; July 15, 2022; and October 14, 2022.

#### Funding Categories

The Community Foundation has identified the following areas of emphasis for grantmaking, based on our 2022-2026 Strategic Plan. Areas of focus may change annually, as our community needs shift.

- Education
- Nonprofit Capacity Building
- Youth Philanthropy
- Human Services
- MYPath Trail System
- Attracting and Retaining "Rising Generations" (25-40-year-olds)
  - May include other areas of emphasis such as quality of place, arts & culture, trails & parks, etc.

Additionally, the Community Foundation will consider requests for initiatives to support community wellness; culture; economic development; transportation; agriculture; natural resources; broadband access; historic & archaeological resources; hazard mitigation; innovation & entrepreneurship; and quality of place.

#### • Final Report Required

Organizations that have received grants and wish to apply again must first have submitted a final report for any previously funded projects or programs. The final report deadlines may vary; grantees should refer to their Grant Agreement to determine Final Report dates.

**INSTRUCTIONS:** Complete this application, attach your tax certificate, and mail or email your completed application to the OCCF to:

maria@owencountycf.org or mail to: PO Box 503, Spencer, IN 47460.

Brief summary of your request: (max 200 characters)

We will contact you if more information is needed. Do not write on the back of this application or attach another sheet unless requested. Incomplete applications will not be reviewed and will be returned.

	Application Date:
Organization Name:	Federal ID#:
Organization Director:	Phone:
Organization Mailing Address:	Email:
Type of Organization (please check):	
$\square$ 501(c)(3) $\square$ School $\square$ Church $\square$ Governmental Entity	□ Other:
Director Signature:	Date:
Board Officer Signature:(a person other than the person signing above)	Date:
As an authorized representative of this organization, I have reviewed the grant information is accurate. We understand that if the OCCF approves a grant, the returned before funds are released. When the money has been spent, if requir submitted.	Grant Agreement must be signed and
AGREEMENT: By signing this electronic signature acknowledgment form, I agree legally binding equivalent to my handwritten signature. Whenever I execute as validity and meaning as my handwritten signature. I will not, at any time in the electronic signature or claim that my electronic signature is not legally binding	n electronic signature, it has the same e future, repudiate the meaning of my
Name and title of person making application:	
	Phone:
Please specify the amount of your request:	

#### ORGANIZATION PROFILE

1. What is your organization's mission statement? (max 200 characters)

2. Choose the selection that most closely represents your organization's mission: ☐ Community and civic engagement ☐ Arts and culture ☐ Economic opportunity ☐ Education and youth ☐ Health and wellness ☐ Environment and animal welfare ☐ Housing and human services 3. Choose any additional focus areas that align with your organization: ☐ Arts and culture ☐ Community and civic engagement ☐ Economic opportunity ☐ Education and youth ☐ Environment and animal welfare ☐ Health and wellness ☐ Housing and human services 4. The Community Foundation supports activities that benefit the residents of Owen County; however, some grant funds are for specific townships in Owen County. Please indicate the primary geographic area of your services in Owen County: ☐ Owen County (countywide) ☐ Cataract / Jennings Township ☐ Coal City / Jefferson Township ☐ Freedom / Franklin Township ☐ Gosport / Wayne Township □ Other

5. Please describe the population that your organization serves. (max 650 characters)

6. How many unduplicated persons did your organization serve last year? We know many nonprofits are not able to track participation. We are comfortable with an estimate and appreciate additional brief comments or context to help us understand the scope of your work. (max 250 characters)

### **FUNDING REQUEST**

We will accept applications from organizations with a regional or statewide geography, but your application should clearly demonstrate how grant funds will be used for programs and services within Owen County. We will accept applications for programs run by religious organizations if the program meets a crit pro org

hib	Il need in the community and does not require religious participation. Please note that this pition does not apply to funds created by donors who have specifically designated religious stations as beneficiaries of the funds.
7.	Amount Requested:
lf y	<b>21 Grant Report</b> you received a grant from the Community Foundation in 2021, a grant report or site visit is required fore submitting an application for 2022.
8.	Have you submitted a 2021 grant report or had a site visit with a Community Foundation representative? If you did not receive a grant in 2022, please select N/A.
	□ Yes
	□ No
	□ N/A
	ant Reporting Options  If approved for funding, would you like to be considered for a site visit by the Community Foundation in lieu of a written grant report during the 2023 calendar year? Note: Reporting option can be changed through Spring 2023.
	$\hfill\Box$ Yes, my organization would like to be considered for a site visit.
	$\ \square$ No, my organization would prefer to complete a written grant report.
10	. May we share this proposal with other potential funders?
	□ Yes
	□ No

## NARRATIVE QUESTIONS

Organization Overview	Orga	ınizatio	on Ove	rview
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11. Briefly describe how you carry out your mission.  What are your organization's primary activities, programs, and/or services? How do these programs and/or services contribute to your organization's overall mission? (max 400 characters)
<ul> <li>12. Describe your project in more detail:         <ul> <li>a. Explain or describe the need for the project/program for which you are seeking funding. Also What sources of verification can you cite to verify this need? (e.g., statistics, surveys, etc.) (max 400 characters)</li> </ul> </li> </ul>
b. Describe how this project/program will address the identified need. (This is an opportunity for you to explain how your program will work.) (max 400 characters)
c. Describe your organization's ability to carry out this project. (max 300 characters)
d. Your proposed timeline: (max 400 characters)

13. Please explai	in the expected benefits of this grant:
	will you measure and assess the benefit and impact of your project? (i.e., a follow-up sment, a benchmark by which you can chart your progress, etc.)
b. Who v	will be served, benefited, or impacted? Please quantify.
carry on the commitment	ation is for a new service, pilot project, survey, or study, explain the source of funds to project (if any will be needed) after any initial grant money is spent. Are there is or guarantees for these funds? If funded, do you plant to ask the Foundation for this project again?
15. Describe any	collaboration, partnerships, and joint ventures as related to this project.
•	relations methods will be used to communicate to your donors/members/supporters any t you receive from the Foundation

## SUMMARY OF HOW THIS PROJECT (ACTIVITY) WILL BE FINANCED

Note: We place a lower priority on projects where Owen County Community Foundation is the sole funder.

Source of Funds	Amount	% of Total Project
From federal, state, city or county government (	specify):	
From other foundations (specify if these are secu	red or pending):	
Public contributions or donations		
Loans Your organization's contributions	-	
Other sources:		
Requested from Community Foundation:		
<ul> <li>Project/Activity Expenses (How the proj</li> <li>List items from top to bottom in order of</li> <li>Please place an asterisk * next to the item Community Foundation.</li> </ul>	importance to the succes	
Item	Amount	% of Total Project
TOTAL PROJECT/ACTIVITY EXPENSES:		

Additional Information:

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## Frequently asked questions:

What if I have problems filling out this application? Please call Maria O'Connor, 812-829-1725.

**I need more room to explain, can I attach a letter?** No, use the space that is provided, please be brief and complete. If we require additional information we will contact you.

Who do I contact if my situation changes? If your business situation or funding sources change drastically for the good or the bad, please contact the Foundation by email and explain the situation.

**Can I print out the application and write it by hand?** No, we cannot accept handwritten applications. If you need help to fill this application please reach out to the Maria, maria@owencountycf.org

What if I am a charitable organization with no nonprofit status? Contact the Owen County Community Foundation, and we may be able to help you find a partnering organization that will take the financial responsibility for the grant. If you receive a grant, the grant agreement should be signed by the supporting organization and the check will be made payable to the supporting organization.

### Submit your completed application and grant agreement by

Email: maria@owencountycf.org

OR

By mail: OCCF, PO Box 503, Spencer, IN 47460



# Owen County Community Foundation Rapid Response Grant Grant Agreement

Grantee organization:	
This grant agreement is between the grantee organization and the Foundation, Inc. It is understood that funds will be used only for grant request. If an exception is needed, the request must be advance by Owen County Community Foundation.	the purpose(s) as outlined in this
If required, the grantee organization agrees to submit a final repuse of all grant funds or no later than 13-months from date the grantee organization agrees to submit a final repuse of all grant funds or no later than 13-months from date the grantee organization agrees to submit a final repuse of all grant funds or no later than 13-months from date the grantee organization agrees to submit a final repuse of all grant funds or no later than 13-months from date the grantee organization agrees to submit a final repuse of all grant funds or no later than 13-months from date the grantee organization agrees to submit a final repuse of all grant funds or no later than 13-months from date the grantee organization agrees are granteed organization.	•
Payments will be made at the time the grant application is approximpporting organization.	ved to the grantee <u>or to the</u>
These grants are generously provided by donors to Owen County of funds. When you receive your check, you will be notified of the fask you to acknowledge the funding source and the Owen County thank you acknowledgement.	unding source. We respectfully
Unused funds (more than \$25) should be returned as soon as p to the Owen County Community Foundation and put an explanation	
Agreed by Owen County Community Foundation:	Date:
Janet Rummel, President & CEO	
Agreed by Grantee/Supporting Organization:	Date:
Signature of Grantee Organization	

# Verification of Charitable Use of Funds for non-501(c)(3) Organizations

We verify, that as a duly appointed representative of an organization that is not a 501(c)(3) corporation, we will use any and all funds received through the Owen County Community Foundation for charitable purposes.

If at any time the Grants Committee or the Board of Owen County Community Foundation, Inc. determines that the funds distributed to our organization were not used in a charitable manner, we agree to repay those funds to the Owen County Community Foundation, Inc. for redistribution to an organization that will use them in a charitable manner. Funds will be used for activities as outlined in the attached application. Name of Organization Printed name of duly appointed representative and title held within the organization Signature Date Printed name of duly appointed representative and title held within the organization

Signature

Date