

MISSION STATEMENT: The mission of the Pocahontas County Foundation is to foster private giving, strengthen service providers and improve the County. It will promote endowment building, community betterment, grant-making, organizational collaboration, and public leadership for the benefit of Pocahontas County.

WHAT WE SUPPORT: The Pocahontas County Foundation will provide grants to improve life in Pocahontas County, Iowa. We want to support development of all our communities into places where people want to live, as well as to benefit rural areas of the county. Areas of Foundation giving are: arts & culture, human services, education, environmental/animals, public and society benefit, and health.

ELIGIBILITY TO APPLY FOR FUNDING:

- ▶ Tax exempt, non-profit entities classified by the IRS as 501(c)(3) or a 170 (c)(1) governmental entity
- ▶ If not 501(c)(3), must secure a fiscal sponsor who will be legally & financially responsible
- ▶ One application per organization

GRANT DEADLINES:

- ▶ **Wednesday, October 11, 2017** Mandatory informational meeting 6:30 pm at the Pocahontas County Conservation Building, 702 NW 7th St., Pocahontas, IA
- ▶ **Friday, November 17, 2017** Application Deadline. Grant must be postmarked by Nov. 15 and received by Nov. 17, 217
- ▶ **December 31, 2017** Grant Approval Complete - notifications will be emailed.
- ▶ **January, 2018** Grants Awarded. Information provided in award notification email.
- ▶ **September 14, 2018** Grant Evaluations due.
Must have completed evaluation for you to be eligible for further grants.

APPLICATION INSTRUCTIONS:

Checklist/Instructions:

- Organizational information has been completed
- Contact information has been completed. **An e-mail address must be provided for correspondence.**
- Project summary has been completed
- Project budget detail has been completed
- Project narrative information has been completed
- Project time-line has been completed
- 9 stapled copies of Application**, (Pages 3, 4, 5 & 6 required, may include one page with photos/description)
- If you are a new applicant, One Copy of 501 (c)(3) IRS Determination letter at the top of the packet
- All grant applications must be received via mail by the deadline date of **November 17, 2017**
- One Copy of Fiscal Sponsorship agreement (page 7) completed if a fiscal sponsor is being used
- MAIL 9 stapled copies to: Pocahontas County Foundation, PO Box 86, Pocahontas IA 50574 (postmarked by Nov. 15)



GRANT INFORMATION

POCAHONTAS COUNTY FOUNDATION BOARD MEMBERS:

Bill Winkleblack, Chair

Steve Trimble, Vice Chair

Megan Hauswirth, Treasurer

Wendy Panbecker, Secretary

Gary Devereaux

Advisory Member: Tom Grau

Donald Beneke

Kristy Mather

Glenda Mulder

Janell Rittgers

Gretchen Tiedeman

DEFINITIONS:

501(c)(3) or 170(c)(1): Organizations must be recognized by the Internal Revenue Service as tax-exempt, nonprofit, public charities under section 501(c)(3) or as a “unit of government” under Section 170(c)(1) to receive grant funding. A 501(c)(3) is a section of the Federal Tax Code, which establishes the criteria for tax-exempt charitable organizations. Section 170(c)(1) refers to agencies that conduct activities to benefit the public at large, like public schools, state universities, public libraries and volunteer fire departments.

Fiscal Sponsor: If your organization is not a qualified nonprofit, then you must secure a fiscal sponsor: an organization that is receiving the money on behalf of the grant applicant and is responsible for disbursing the money for the project and maintaining appropriate documentation. This entity must be a 501(C)(3) or a 170 (c)(1) unit of government in order to serve in this capacity. A fiscal sponsorship agreement must accompany the grant application if a fiscal sponsor is being used. (Use form on page 7, if a fiscal sponsor is required.)



GRANT APPLICATION

APPLICANT INFORMATION:

Applicant Requesting Funding (Fiscal Sponsor If the organization is not a 501(c)(3)) **REQUIRED:**

Organization conducting project (if different from Applicant/Fiscal Sponsor):

Project Title **REQUIRED:**

Federal tax identification number of Applicant/Fiscal Sponsor (EIN) **REQUIRED:**

Applicant/Fiscal Sponsor Address **REQUIRED:**

Applicant/Fiscal Sponsor Contact Person & Title **REQUIRED:**

Applicant/Fiscal Sponsor Contact Person Phone & Email **REQUIRED:**

Organization/Project Address (if different):

Organization/Project Contact Person, Phone, Email (if different than applicant):

PROJECT SUMMARY:

Total Cost of Project: _____ Amount Requested: _____ **BOTH REQUIRED**

- Type of Request (check one):
- Capital Based** : The building of or physical improvement of something
 - Program Based** : Operational, activity, general programmatic support

- Project Focus Area (check only one):
- Arts/Culture/Humanities
 - Human Services
 - Education
 - Environment/Animals
 - Public/Society Benefit
 - Health
 - Other

Brief Description of Organization:

Brief Description of Project:



GRANT APPLICATION

QUESTIONS OF PURPOSE:

Describe the need or problem being addressed by this project:

Explain how this project will benefit the citizens of this county:

What area or population is being served? (County wide, community, several communities)

Explain your organizations ability to carry out and ensure success of this project:

Describe the time-line of the project. **Funding will be for projects completed in 2018:**

Have you previously received funding from Pocahontas County Foundation? If so, when?



GRANT APPLICATION

PROJECT EXPENSES:

1.	Total Equipment Expense (Itemize Below)	
2.	Total Construction Expense (Itemize Below)	
3.	Total Landscaping Expense (Itemize Below)	
4.	Plant cost (identify annual or perennial)	
5.	Freight / Delivery Expense	
6.	Labor to install	
7.	Education program / community service (Itemize Below)	
8.	Other qualifying project (give details below)	
9.	Any other expenses (list below if necessary)	
	Total Project Expenditures	

ITEMIZED EQUIPMENT EXPENSES:

ITEMIZED CONSTRUCTION EXPENSES (not to include labor):

ITEMIZED LANDSCAPING EXPENSES (not to include labor):

ITEMIZED EDUCATION EXPENSES:

OTHER EXPENSES:

FOUNDATION REQUEST AMOUNT:

ADD LINES 1, 2, 3, 4, 7, 8, and 9 and subtract any revenue other than grant funds.	
Grant Award will not cover labor and shipping related cost.	

GRANT APPLICATION

PROJECT REVENUE:

1.	Applicants own money	
2.	Pledged funds from other sources (List Below)	
3.	Other Grant Receipts (List Below)	
4.	Matching Funds (List Below)	
5.	Additional Fundraising Needs	
6.	All Other Income (List Below)	
7.	In-kind Labor (List Below)	
8.	In-kind materials and services (List Below)	
9.	County Foundation Grant Request	
Total Project Revenue (Revenue must equal Total Project Expenditures on page 5)		

PLEGGED FUNDS or GRANT SOURCES

ANY OTHER INCOME (include matching funds, fundraising, etc.)

IN-KIND LABOR AND MATERIALS

FOUNDATION USE ONLY:

Is Project Fully Funded? YES NO AMOUNT FUNDED _____

If NO:

Is Project Partially Funded? YES NO AMOUNT FUNDED _____

If NO, what was the reason? _____

NOTES:	



FISCAL SPONSOR AGREEMENT

Only use if your agency does not qualify to accept funds: ONE COPY ONLY.

DATE: _____

Fiscal Sponsor, legal applicant:

Fiscal Sponsor Contact Person and Email:

Fiscal Sponsor Full Mailing Address:

Sponsored Organization Conducting Project:

Project Name:

Legal Applicant/Fiscal Sponsor, hereafter referred to as The Sponsor, has agreed to serve as a fiscal/program sponsor for _____, organization conducting the project, hereafter referred to as the Sponsored Organization, as outlined in the attached application and supporting materials. The Board of Directors of The Sponsor has passed a resolution adopting the Sponsored Organization’s project as a program or project consistent with the Sponsor’s purpose and mission. The Sponsored Organization’s financial activities will be accounted for as a program of The Sponsor for IRS auditing and financial reporting purposes.

Since the Organization is not recognized by the IRS as a charitable tax-exempt entity, The Sponsor must exercise full control over the Sponsored Organization’ financial administration, management and disbursement of funds resulting from this grant application. The Sponsor has delegated _____(name of person/s) as responsible for fulfilling of these accounting and reporting functions subject to the ultimate authority of the Board of Directors of The Sponsor. The Sponsor is responsible for ensuring completion of timely reports and submission of necessary financial statements to the Community Foundation’s Administrative Office (contact info below). Failure to insure timely reporting on behalf of the Sponsored Organization/Sponsor will also result in a loss of good standing.

This agreement will be in effect from the date of a grant award to support the above-named project until the grant funds are expended and the final report has been submitted and accepted.

We agree to the terms stated above in this agreement:

Legal Applicant/ Fiscal Sponsor Representatives

Signature: _____

Date: _____

Print Name: _____

Sponsored Organization Representative Signature

Signature: _____

Date: _____

Print Name: _____

Attach to this agreement the Fiscal Sponsor’s 501(c)(3) Tax-Exempt Determination Letter or comparable proof of charitable exemption. (i.e. a letter from a City, confirming their status as a government entity. Contact our Administrative Office with questions, or for examples of a letter from a City.)