



Eau Claire

# Community Foundation

For Good. **For Eau Claire.** For Ever.

306 S. BARSTOW STREET, SUITE 104, EAU CLAIRE, WI 54701 ~  
715-552-3801 ~ FAX 715-552-3802

[www.eccommunityfoundation.org](http://www.eccommunityfoundation.org)

## **ASSET PURCHASE OR IMPROVEMENT GRANT APPLICATION**

**GRANT APPLICATION DEADLINE: 5:00 P.M. MARCH 12, 2012**

### **WHEN PREPARING YOUR APPLICATION PLEASE FOLLOW THESE GUIDELINES:**

- See *Grant Guidelines* at our website when preparing this application. Applicants are encouraged to discuss their project with the Foundation staff prior to the deadline in order to learn if the request meets the Foundation's granting guidelines.
- Type the information requested by this 4-page application, which can be downloaded from our website. Handwritten applications will not be accepted. If you have problems using the application downloaded from the website, call the Grants Coordinator at 715-552-3801.
- Prepare a one-page cover letter that provides a brief introduction to your organization and a brief summary of the Asset Purchase/Improvement for which you are applying for funding, and include copies of this letter in the assembled grant application packet.
- Submit **the original plus fourteen (14) copies** of your proposal each assembled in the following order: cover letter, completed application which describes the Asset Purchase/Improvement Information, Financial Analysis, Additional Information about Your Organization, and Description of Your Asset Purchase/Improvement. Staple and punch for 3-hole binders. Do not include promotional materials from previous projects. Do not use report covers or binders.
- Submit **only one copy** of each of the documents listed in the Attachments section on page 4.
- Review this list one more time to make sure you have included everything and that your application complies with the guidelines.
- Mail or deliver your materials to the above address. **Fax or electronic submissions are not accepted.**

### **APPLICANT INFORMATION:**

**DATE SUBMITTED:** \_\_\_\_\_

Organization Name: \_\_\_\_\_ EIN: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Title: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Fax: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_ Organization Website: \_\_\_\_\_

What is the Mission of your organization?

***Application Continued on Next Page***

**ASSET PURCHASE/IMPROVEMENT INFORMATION:**

Describe asset purchase or improvement for which you are requesting funding:

Area impacted by this asset purchase or improvement:  Arts/Culture  Education  Environment  Recreation  Social Services

What do you plan to do with the grant? (Please give a brief explanation here)

Is this a new or ongoing project? New  Ongoing

If applicable: Project Start Date: \_\_\_\_\_ Project End Date: \_\_\_\_\_

Total Project Expenses: \$ \_\_\_\_\_ Amount Requested of the Eau Claire Community Foundation: \$ \_\_\_\_\_

How many people will this project serve? Directly  Indirectly  Please explain how you arrived at these numbers:

Date you need the funding: \_\_\_\_\_

Geographic area served: \_\_\_\_\_

Programs or purchases previously funded through the Eau Claire Community Foundation:

Date:	Grant amount:	Project:
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**FINANCIAL INFORMATION:**

**SOURCES OF FUNDING FOR THIS PURCHASE—LIST ALL THAT YOU ANTICIPATE APPLYING FOR**

INCOME SOURCE	SECURED FUNDING	+	FUNDING APPLIED FOR	=	TOTALS
EC Community Foundation	\$ _____	+	\$ _____	=	\$ _____
Other Foundations	\$ _____	+	\$ _____	=	\$ _____
Corporations	\$ _____	+	\$ _____	=	\$ _____
Other (specify)	\$ _____	+	\$ _____	=	\$ _____
<b>TOTAL:</b>					\$ _____

*Application Continued on Next Page*

**PROJECT EXPENSES**

Cost of item(s) \$ \_\_\_\_\_  
 Financing costs (if any) \$ \_\_\_\_\_  
 Maintenance \$ \_\_\_\_\_  
 Other (specify) \$ \_\_\_\_\_ Describe \_\_\_\_\_  
 \_\_\_\_\_  
**TOTAL:** \$ \_\_\_\_\_

If your request is not fully funded by the Eau Claire Community Foundation, how will you finance your asset purchase/improvement?

**ADDITIONAL INFORMATION ABOUT YOUR ORGANIZATION:**

Year of Incorporation: \_\_\_\_\_

Is your organization an IRS 501(c)(3) not-for-profit? Yes \_\_\_ or No, we are using another eligible organization as fiscal agent \_\_\_ or Pending Approval \_\_\_

Is your organization name the same as it appears on your IRS Letter of Determination? If not, explain. Yes \_\_\_ No \_\_\_

Organizational fiscal year: \_\_\_\_\_ Total annual budget: \_\_\_\_\_

Has this project been authorized by your agency's governing board: Yes \_\_\_ No \_\_\_

Has your governing board approved a policy which states that your organization does not discriminate on the basis of race, ancestry, color, age, familial status, handicap, religion, gender, sexual orientation, marital status, lawful sources of income, national origin, or any other discriminatory practice prohibited by state or federal law? Yes \_\_\_ No \_\_\_

We certify that the information provided in this application is correct to the best of our knowledge. We understand that additional information may be required by the Community Foundation to aid the Grant Review Committee members in their review of this request. We are available to answer your questions.

Executive Director/Board President:

Contact Person:

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature of Executive Director/Board President

\_\_\_\_\_  
Signature of Contact Person

Date: \_\_\_\_\_

Date: \_\_\_\_\_

*\*\*\*Applications for projects in close partnership with schools also require the signature of the Administrator:*

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Name of District

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

**Application Continued on Next Page**

**DESCRIPTION OF YOUR ASSET PURCHASE/IMPROVEMENT:**

*Using separate sheets of paper, type your answers to the following questions, in order and numbering your answers to correspond to the questions. Please limit to three typewritten, numbered pages.*

1. How does this proposal fit within the granting guidelines and mission of the Eau Claire Community Foundation?
2. How does this proposal fit within the mission of your organization?
3. Does the purchase/improvement address an important need of the community or of the applying organization?
4. How does it address this need?
5. Is the ongoing cost of the use/maintenance of this purchase/improvement sustainable without future funding from the Eau Claire Community Foundation?
6. How does your organization's overall operation and administrative operations benefit from this purchase/improvement?
7. Explain how you will measure the impact of this purchase/improvement.
8. Provide relevant details of the purchase/improvement, indicating how you chose particular item(s)/vendor(s).
9. Provide a financial analysis justifying this purchase/improvement.
10. Will there be a need to train staff and/or volunteers in the use of the purchased item(s) and if so, how will this be accomplished?

**REQUIRED ATTACHMENTS: INCLUDE ONLY ONE COPY OF EACH OF THE FOLLOWING DOCUMENTS**

1. Copy of tax exempt status letter from IRS or Government Certificate of exemption from public schools.
2. Most recent annual financial statement, independently audited, if available.
3. Current year operating budget including expenses and revenues.
4. List of current Board of Directors or equivalent governing body members.
5. Letters of support are required if another organization or individual is integral to the completion of the project and/or is a fiscal sponsor.

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**Please note:**

As part of the due diligence of the Eau Claire Community Foundation in reviewing grant applications, we will check the charitable status of your organization on this website: <http://www.irs.gov/charities/article/0,,id=96136,00.html>

[IRS Revenue Procedure 2011-33](#) sets forth reliance rules that permit a grantor to rely on a listing of charitable status found in IRS [Publication 78](#) or the [Business Master File](#) unless a public announcement is made stating that the organization is no longer a charitable organization. The IRS list of charities whose status was revoked due to failure to file Form 990 is a public announcement. It is for this reason that ECCF added checking the list of revoked charities for failure to file as a new step to our due diligence process.