

# Dallas County Foundation

## Grant Application

~ 2012 ~

Dear Nonprofit Colleague,

We are pleased to announce the availability of the Dallas County Foundation Grant Application. This form was developed to make the grant seeking process simpler and more efficient for nonprofits.

The Dallas County Foundation was formed in 2005 to coordinate and provide philanthropic support for improvement projects in Dallas County. The mission of the Dallas County Foundation is to foster private giving, strengthen service providers, and improve the conditions of the communities and rural areas of greater Dallas County. The Foundation's Board of Directors is made up of individuals who will assess county/community needs, implement asset development, evaluate area grant applications, encourage partnerships and initiate activities to enhance Dallas County. Each year the foundation will make grant awards to worthwhile projects located in the county that are identified through a grants application process. Our foundation's areas of emphasis include:

Arts & Culture

Youth Development

Education

Health & Human Services

Community Improvement

Recreation & Environment

The Dallas County Foundation makes grants to **I.R.C. 501(c)(3),(5) or (6) 'tax exempt' organizations and 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 rural areas, community, county, or area of interest. Our foundation promotes endowment building, county/community grantmaking, organizational collaboration, and public leadership for the benefit of the Dallas County area.

The number of grants awarded will depend greatly upon the amount of funds available to the Dallas County Foundation each fiscal year. The minimum grant which may be awarded during each grant cycle is \$500; the maximum grant awarded for any one proposal is \$25,000.

Please submit **One** original and **Four** copies of the completed application by **mail** to:

Dallas County Foundation

Attn: Dean Boettcher

P.O. Box 46

Adel, Iowa 50003

**or you may drop off completed applications at:**

Adel City Hall

Office of Adel Partners Chamber of Commerce

301 South 10<sup>th</sup> St. Adel, Iowa

If you have questions, you may call Dean Boettcher at 515-993-4881 or by email at [dwboettcher@msn.com](mailto:dwboettcher@msn.com) ( Grant Applications are available via E-Mail )

The application deadline for the first grant cycle of **2012** is **Monday, April 2, 2012. --- 5:00 P.M.**

**Completed Applications must be received by the April 2, 2012 deadline.**

~ Dallas County Foundation Grant Committee

# Dallas County Foundation

## Cover Sheet

Date of application: \_\_\_\_\_ Application submitted to: \_\_\_\_\_

### Organization Information

Name of organization \_\_\_\_\_ Legal name (as listed with IRS) \_\_\_\_\_

Organization Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_ Employer Identification Number (EIN) \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Web site \_\_\_\_\_

Name of contact person regarding this application \_\_\_\_\_ Phone \_\_\_\_\_ E-mail \_\_\_\_\_

Type of funding sought (circle one): Capital Support Special Project

Project focus area (circle all that apply): Youth Development Community Improvement Health & Human Services  
Education Recreation & Environment Arts & Culture

Is your organization an IRS 501(c)(3) not-for-profit? \_\_\_\_\_ Yes \_\_\_\_\_ No

If no, is your organization a 170b unit of government? \_\_\_\_\_ Yes \_\_\_\_\_ No

If no, you must have a fiscal agent. Please list name, address, phone and fiscal agent contact person:

\_\_\_\_\_ Fiscal agent's EIN number \_\_\_\_\_

What is your fiscal calendar? (Mo/Yr) to (Mo/Yr) \_\_\_\_\_

**//For the remainder of this application, please use an additional page whenever necessary.\\**

Describe your organization's charitable purpose, program activities, and population served.

List any major changes that have taken place in your organization in the last two years.

Briefly describe your organization's history (year organized) and major accomplishments.

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## Application

### Request Summary

Describe the proposed project, including the goals and objectives. Discuss the community need for the project, the benefits for the community as a result of the project and the community support for the project.

Population served  
(estimated #): \_\_\_\_\_

Grant monies needed:  
(Mo/Yr) to (Mo/Yr) \_\_\_\_\_

Total project cost: \$ \_\_\_\_\_

Total requested from the  
County Foundation: \$ \_\_\_\_\_

Are matching  
funds being used? \_\_\_\_\_

What percentage of total funds raised are  
matched dollars? \_\_\_\_\_ %

Outline other resources or partners identified to assist with the project; other funding secured, applied for and proposed for the project:

Indicate desired impact and how you will measure and evaluate the results of the project. Be specific regarding community needs/issues your project will address.

What is the timeline for this project?

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## Attachments

In order to be considered for funding, your application **MUST** include the following items:

- Copy of Federal IRS Tax-exempt status letter Must be Attached. No Exceptions.**
- List of Board of Directors and their affiliations
- Copy of most recent CPA audit, financial statement or tax return (IRS 990 form)
- Signed 'Letter of Intent' to act as a fiscal agent – only if you are not 501(c)3 or 170b status
- Signed Applicant Board Approval Agreement (see below)

**Board Approval from Applicant Organization:**

We approve submission of this grant request and certify that the purpose of this request is charitable and that monies received from the Community Foundation will be used solely for the project stated in this application.

\_\_\_\_\_ *Board Chairman*

\_\_\_\_\_ *Date*

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**For Foundation use only:**

|                    |                |                |              |            |
|--------------------|----------------|----------------|--------------|------------|
| Grant Committee    | Determination: | Approved _____ | Denied _____ | Date _____ |
| Board of Directors | Determination: | Approved _____ | Denied _____ | Date _____ |
| Voting Membership  | Determination: | Approved _____ | Denied _____ | Date _____ |

This application has been approved in the amount of \$ \_\_\_\_\_ on (date) \_\_\_\_\_.

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## 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               | \$ _____        |
| <br><i>Revenue</i>              |                 |
| Government contracts            | \$ _____        |
| Earned income                   | \$ _____        |
| Other (specify)                 | \$ _____        |
| _____                           | \$ _____        |
| _____                           | \$ _____        |
| _____                           | \$ _____        |
| <b>Total Income</b>             | <b>\$ _____</b> |

### 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)                           | \$ _____        |
| _____                                     | \$ _____        |
| _____                                     | \$ _____        |
| <b>Total Expense</b>                      | <b>\$ _____</b> |
| <b>Balance (Income less Expense)</b>      | <b>\$ _____</b> |

# Dallas County Foundation

## Balance Sheet

Date \_\_\_\_\_

### Assets

|                     |                 |
|---------------------|-----------------|
| Cash                | \$ _____        |
| Securities          | \$ _____        |
| Real Estate         | \$ _____        |
| Other (specify)     | _____           |
| _____               | \$ _____        |
| _____               | \$ _____        |
| _____               | \$ _____        |
| <b>Total Assets</b> | <b>\$ _____</b> |

### Liabilities

|                                          |                 |
|------------------------------------------|-----------------|
| Current                                  | \$ _____        |
| Long-term                                | \$ _____        |
| Other (specify)                          | _____           |
| _____                                    | \$ _____        |
| _____                                    | \$ _____        |
| _____                                    | \$ _____        |
| <b>Total Liabilities</b>                 | <b>\$ _____</b> |
| <b>Net Worth</b>                         | <b>\$ _____</b> |
| <b>Total Liabilities &amp; Net Worth</b> | <b>\$ _____</b> |

# Dallas County Foundation

**Evaluation – To be returned upon completion of grant or project year-end  
Mandatory Requirement – Attach photos, Press Releases, Info.**

Organization: \_\_\_\_\_

Project Name: \_\_\_\_\_

Please briefly summarize the goals of your project. Were you able to attain the goals of your project? Please explain. Were there any unexpected successes/benefits?

What method was used to evaluate the project? Please detail program/project results and the tools you used to measure the change.

Were there any unexpected barriers to overcome? What were they and how were you able to address them?

Do you plan to continue the project? If yes, will any of the past year's experiences cause you to change the project? If yes, how will the project be changed?

Was there any publicity, including any recognition of the Community Foundation grant, on your project? If yes, please describe and attach copies. Please include pictures of your project implementation and/or results.

\_\_\_\_\_  
*Board Chairman*

\_\_\_\_\_  
*Date*