2025 GUIDELINES

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Description automatically generatedPurpose:

**PROGRAM SUPPORT GRANT APPLICATION**

Program Support Grants support new, innovative programs and sustain current and/or ongoing programs of nonprofits that serve Linn County, Iowa.

DEADLINE:

The Program Support Grant deadlines for 2025 are Friday, March 14, 2025 (please note the deadline has been extended from Friday, March 7, 2025 due to the delay in the new online system launch) and Friday, September 12th both at 4:30 pm Central Time.

ORGANIZATION ELIGIBILITY:

* The Community Foundation accepts applications from nonprofit organizations with a 501(c)(3) status, governmental organizations, and non-501(c)(3) organizations that have a current fiscal sponsorship agreement with a 501(c)(3) organization.
* Multiple organizations may submit a joint application for a collaborative project – contact Program Officer to discuss this further.
* Organizations based outside of Linn County may only apply for the Linn County portion of program costs.

INELIGIBLE ACTIVITIES:

* Fundraising events and activities
* Religious activities or efforts supporting an organization’s core religious mission – contact Program Officer for clarification.
* Scholarships for primary and secondary education and post-secondary degree programs
* Expenses that have occurred or will occur during the grant review process (which is approximately 10 weeks from the grant deadline)
* Travel out of the region
* Re-granting awarded funds to other nonprofits
* Capital infrastructure [bricks and mortar] projects
* Organization with an active Program Support grant:
  + For example, if a one-year Program Support grant (short or full) is awarded in the fall of the previous year, organization may not apply again until fall of the current year.
  + If a time extension was requested to complete a previous grant, please contact Program Officer to confirm eligibility.

Maximum Request Amount

* For organizations with operating budgets greater than $125,000, the maximum request amount is $25,000 per year.
* Organizations with operating budgets less than $125,000 may request an amount up to 20% of their operating budget per request (rounded up to the nearest $100).
  + The Community Foundation generally does not fund more than 20% of an organization’s operating budget between Program Support and Organization Support grants total in a calendar year.
* Organizations that are primarily volunteer-driven and/or have a very small operating budget should contact the program officer to discuss the eligible amount for their specific situation.
* New initiatives are limited to a single year request. Contact the Program Officer if you have questions about this.

Duration of grants:

12-24 months

# Grantmaking Equity Statement

The Greater Cedar Rapids Community Foundation supports people and places that shape our community, through our broad multi-sector grantmaking strategy. The Community Foundation Board of Directors has adopted the following statement as it relates to implementing this strategy:

The Community Foundation prioritizes grant funding for nonprofit organizations that are deeply engaged in or actively working to improve organizational equity and justice practices. The foundation commits to providing learning and funding resources to assist in this transformational process.

These equity and justice practices may include, but not be limited to, employment practices, volunteer opportunities, and delivery of programs and services and should be considered as they relate to under-resourced communities or to legally protected characteristics, including race, color, religion, gender, national origin, ancestry, age, medical condition, disability, veteran status, marital status, sexual orientation, or any other characteristic protected by law.

Who can see this information?

Staff and grant committee members review all grant application materials. Committee members receive two additional resources about applicant organizations:

* A list of all grant awards during the last five years from the following Greater Good funds: Funds for the Community, Program Support, Organization Support, Endowment Challenge, Rapid Response, and Linn County Grants
* A financial summary from submitted IRS-990’s for the last five years.

Questions?

Contact Sanjana Raghavan, Program Officer, at [sanjana.raghavan@gcrcf.org](mailto:sanjana.raghavan@gcrcf.org) or at 319.200.2279.

APPLICATION QUESTIONS

**Pre-Qualifying Questions**

Has the Organization Profile been updated in the last 12 months?\*

Is the organization a governmental, 501(c)(3) or a non 501(c)(3) organization that has a current fiscal sponsorship agreement with a 501(c)(3)?\*

Will the proposed project/programming serve Linn County, Iowa?\*

**Proposal Summary**

**Proposal Title:** Use a title that describes the program or project*.* This may be used in publications such as the Community Foundation website, annual reports, communication with donors, and other print or online publications. *(50 characters)\**

**Proposal Summary Statement:** Provide a two-three sentence summary of the project. The narrative, project budget, and objectives (for a program/project request) detailed in the application should align with the proposal summary. This may be used in publications such as the Community Foundation website, annual reports, communication with donors and other print or online publications. (300 characters)\*

**Total project budget including all funding:**\*

**Amount of funding already committed to the program/project:** \*

**Is this a 2-year request?** (Yes/No)\*

**Dollar amount requested in year 1:**

**Dollar amount requested in year 2:**

**Total dollar amount requested from this grant program:** This amount should be based on information found at the beginning of this document along with eligibility criteria. *\**

**Organization Profile**

**Mission statement:** *(500 characters)\**

**Charitable status: \***

**IRS Ruling Year:\***

**Brief organizational history:** *(1000 characters)\**

**Description of key programs:** *(1500 characters)\**

**Target population description**: *(500 characters)\**

**Number of individuals served annually by the organization:** This calculation should count each individual once, regardless of the number of activities or services the person may have accessed.\*

**Number of paid employees or total Full Time Equivalents (FTEs):\***

**Total organization budget for the current fiscal:\***

**Fiscal year end date: \***

**List of Board of Director names and professional roles:** Do not copy and paste from a PDF or from a formatted table.\*

**Organization Demographics:** Please provide current racial and ethnic demographics for board and staff below entered as numbers. We encourage organizations to follow GuideStar’s best practice to anonymously collect self-reported, demographic data each year from board and staff members.\*

|  |  |  |  |
| --- | --- | --- | --- |
| BOARD |  | STAFF |  |
| How many board members publicly self-identify as: | | How many staff members publicly self-identify as: | |
|  |
| Asian/Asian American |  | Asian/Asian American |  |  |
| Black/African American |  | Black/African American |  |  |
| Hispanic/Latino/Latina/Latinx |  | Hispanic/Latino/Latina/Latinx |  |  |
| Native American/American Indian/Alaska Native/Indigenous |  | Native American/American Indian/Alaska Native/Indigenous |  |  |
| Middle Eastern/North African |  | Middle Eastern/North African |  |  |
| Native Hawaiian/Pacific Islander |  | Native Hawaiian/Pacific Islander |  |  |
| White/Caucasian/European |  | White/Caucasian/European |  |  |
| Multi-Racial/Multi-Ethnic (2+ races/ethnicities) |  | Multi-Racial/Multi-Ethnic (2+ races/ethnicities) |  |  |
| Prefer to identify with another race/ethnicity |  | Prefer to identify with another race/ethnicity |  |  |
| Decline to state |  | Decline to state |  |  |
| Unknown |  | Unknown |  |  |

**If the organization has not collected racial and ethnicity demographics for board and staff, please explain below (optional)** *(500 characters)*

**Description of volunteer support within organization**: *(500 characters)\**

**Organization Practices**

**Describe how the organization’s board and leadership staff work together in managing overall organization strategy and planning *OR* for primarily volunteer organizations, how does the board manage strategy, planning, and operations.** *(1000 characters)\**

**Describe the equity strategies the organization uses within internal operations and in serving the community.** (*2000 characters*)

**What future plans does the organization have for advancing its equity goals?** *(1000 characters)*

**Proposal Details**

**Explain the proposal. Describe how the program or project will be carried out outlining the relevant activities and timelines.** NOTE: for organizations based outside of Linn County or serving a larger geographical area, please detail activities and impact specific to Linn County only. *(2000 characters)\**

**How will a typical participant be involved with this program, and what impact would it have on them? How will you let them know about the program/project?** *(2000 characters)\**

**How many unduplicated individuals will this program/project serve?** This calculation should count each individual once, regardless of the number of activities or services the person may have accessed.\*

**If providing such a count is not possible, please explain:** *(500 characters)*

**Project Development**

**Is this an existing program?** (Yes/No)\*

**For an existing program: Describe how the program has changed or developed over time. What did the organization learn that led to the changes?** *(1500 characters)\**

**OR**

**For a new program: Why will this be beneficial to our community? What rationale supports this program or project?** This may include such items as data, best practices, evidence from similar programs operating in other communities, etc. (1500 characters)\*

**What other support, if any, is the community providing for this program/project?** This may include in-kind support or nonprofit partnerships) *(1500 characters)\**

**Organization Impact**

**Identify similar work in the community. What is the gap this program fills?** *(1500 characters)\**

**Describe the organization’s value to the community.** This may include the economic impact, improvements to quality of life, or advancing equity within the community.(*2000 characters)\**

**Objective**

**Objective:** One primary objective is required. Be specific. The objective must be measurable – for example, to provide 5,000 lunches to students or provide four exhibits with educational opportunities for working artists*. (200 characters)\**

**Evaluation method:** How will you collect data to report on how well this objective was met? *(300 characters)\**

ALL REQUESTS

**Document Uploads**

**Program/Project budget:** upload a completed budget, using the Community Foundation template that can be downloaded at the bottom of the page linked [here](https://www.gcrcf.org/resources-for-nonprofit-organizations-serving-linn-county-iowa/grants/grant-opportunities-and-deadlines/program-support-grants/). If this is a 2-year request, a separate budget for each year must be included. \*

**Financial Documents:** the Balance Sheet (sometimes called the Statement of Financial Position) is a financial statement that reports the assets, liabilities, and equity of the organization on a given date.  The Profit and Loss Statement (sometimes called the statement of activities, income statement, or the income and expenses statement) summarizes the revenues, costs, and expenses incurred by the organization during a specific period of time. An example of a Balance Sheet and Profit and Loss Statement can be found [here](https://www.gcrcf.org/wp-content/uploads/2023/08/Example-Statement-of-Financial-Position-Statement-of-Activities.pdf). Financial documents provided should be dated no earlier than the end of the applicant organization’s most recent fiscal year.Contact [Sanjana Raghavan](mailto:sanjana.raghavan@gcrcf.org)if you have any questions.\*

**Optional attachments:** up to six pages of additional attachments may be included as necessary.

**Submission Information and Signature**

Name of the person we should contact for questions regarding this specific application.

**First name: \***

**Last name: \***

**Job Title: \***

**Email address:\***

**Preferred phone number:**

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**PROGRAM SUPPORT GRANT SCORING CRITERIA**

A strong application will show that the organization addresses the criteria below in relation to the soundness of the proposal, the readiness of the organization to undertake this activity and measurable impact given the organization's size and longevity.

PROJECT/PROGRAM AND EVALUATION *(maximum 5 points)*

* Description clearly explains program operation/project execution and timelines are clear and well planned
* Best practices mentioned as appropriate; local data provided
* Budget is calculated correctly and is realistic; service delivery costs are reasonable
* Desired project objective/evaluation plan clearly stated/appropriate

PROJECT/PROGRAM SCOPE *(maximum 5 points)*

* Proposed project is in line with organization’s mission/goals
* Effort deepens, broadens or expands organization's mission, program offerings or audience (when appropriate)
* Volunteers or collaborative partnerships leverage dollars, provide expertise or expand programming (when appropriate)

PROJECT/PROGRAM COMMUNITY IMPACT *(maximum 5 points)*

* Proposed activities provide value to the local community
* Proposed activities fill a unique place within the current landscape of the sector
* Proposed activities a positive economic impact on the community

ORGANIZATION LEADERSHIP AND FINANCIAL MANAGEMENT *(maximum 5 points)*

* Organization has existing strong governance practices in place
* Organization budget is balanced and appropriate to age, circumstances, and size

Organization Equity Practices *(maximum 5 points)*

* Organization collects and has shared current organizational demographics for both board and staff in this application
* Organization’s commitment to equity and justice is reflected in their self-description and strategic documents
* Organization’s commitment to equity is reflected in their internal operations
* Organization’s commitment to equity is reflected in how they serve the community

**Total Score** *(maximum 25 points)* \*

*\* See next page for additional information about scoring matrix values.*

SCORING MATRIX VALUES

|  |  |
| --- | --- |
| SCORE | MEANING |
| 1 | Unacceptable response:   * None provided * Demonstrating a significant misunderstanding of the question * Not meeting the criteria even to a minimum extent |
| 2 | Weak response:   * Meeting certain aspects to a minimum extent but fails in others * Little evidence of ability to meet or deliver to the proposed criteria |
| 3 | Fair response as:   * Meeting the majority but not all aspects of the criteria * Adequate evidence of ability to meet or deliver to the proposed criteria |
| 4 | Good response:   * Meeting all aspects of the criteria * Comprehensive, clear proposal demonstrating a good understanding of the criteria * Clear evidence of ability to meet or deliver to the proposed criteria |
| 5 | Response which exceeds criteria:   * Materially exceeding the criteria, through a creative or innovative response or where additional ‘added value’ areas have been identified * Clear evidence of ability to exceed the proposed criteria |

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