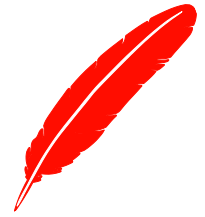


**The Community Chest of Port Washington  
2020 Grant Application  
Filing Deadline: March 20, 2020**

*Grant decisions will be made in June 2020;  
Funds will be distributed during Calendar Year 2021*



**GENERAL INSTRUCTIONS**

- Applicant need not be in Port Washington, but the services for which funding is sought **MUST** benefit Port Washington residents.
- Applicant must have been in existence long enough to have filed a Form 990/990-EZ with the IRS.
- Proposal must be typed (12-point type); cover page can be neatly hand-written.
- Use headings as provided.
- Do NOT submit any materials other than those specifically requested.
- The Executive Director/CEO and the Board Chair must sign the grant application.
- If you received a grant during calendar year 2019 and did NOT submit a grant report (*due on February 20, 2020*), you are NOT eligible to apply for this grant.
- These grant funds are **not** meant for “start-ups” or for capital expenditures. Contact the Community Chest for grant funds that might be available for start-ups or capital items at (516) 767-2121.
- Grants will NOT be awarded to individuals, for political action or lobbying, or to organizations for re-granting or to subsidize fundraising events.

Email one (1) digital copy and mail three (3) hard copies of your grant application and any attachments to the Community Chest at [info@portchest.org](mailto:info@portchest.org) by **March 20, 2020**.

The Community Chest of Port Washington  
382 Main Street Ste 105  
Port Washington, NY 11050

If you have questions about anything required in the application (including the attachments), contact the Community Chest prior to the application deadline at (516) 767-2121 or

[jmeerharnick@portchest.org](mailto:jmeerharnick@portchest.org).

**COMMUNITY CHEST OF PORT WASHINGTON  
2020 Grant Application Form Cover Sheet**

1. Date of application  1a. Grant Request \$

2. Is your organization a 501 (c)(3) charitable organization?

2a. If "no", **STOP HERE**, you are NOT eligible for a Community Chest of Port Washington grant

3. Legal name of Organization

3a. What type of services do you provide?

3b. Address

3c. Website  3d. Phone

1. Purpose of the grant (one sentence)

2. Contact name and title

3. Email  Phone

4. Contact mailing address

5. Person to whom grant checks would be mailed

6. Mailing address for grant checks

7. Executive Director/CEO

8. Board Chair

9. Organization's Fiscal Year End (ex/ "June 30")

10. This request is for  General Operating Support or  Specific program support

10a. If specific program support, Program Name

10b. Total program budget \$

10c. Dates covered by this program

11. Number of unique Port Washington residents served for the last completed fiscal year   
*(What do we mean by "Unique"? If Jane Doe is in more than one program or attends more than one class, she is only counted once.)*

12. Number of unique Port Wash. residents projected to be served for the current fiscal year

**I have reviewed the 2020 Grant Application and attachments as submitted to the Community Chest of Port Washington and attest that the information is, to the best of my knowledge, true and complete.**

Executive Director, Signature and Print Name

Date

Board Chair, Signature and Print Name

Date

**COMMUNITY CHEST OF PORT WASHINGTON**  
**2020 Grant Application Form**  
**Grant Proposal**

**I. PROPOSAL SUMMARY:** one-half page, maximum

Briefly summarize the purpose of your organization. Explain why you are requesting this grant, what outcomes you hope to achieve, and how you will spend the funds if a grant is made.

**II. NARRATIVE (A – C):** Three pages maximum.

**A. Background** – Describe the work of your organization, addressing each of the following:

1. A brief description of its history and mission.
2. The need or problem that your organization works to address, and the population that your organization serves, including socio-economic status, race, ethnicity, gender, sexual orientation, age, physical ability and language.
3. Current programs and accomplishments. Emphasize achievements of the recent past.
4. Number of paid full-time staff; paid part-time staff; volunteers.
5. Your organization’s collaborations – both formal and informal – with other organizations working to meet the needs of Port Washington residents.

**B. Funding Request** – Describe the program for which you seek funding.

1. If applying for **GENERAL OPERATING SUPPORT**, briefly describe how this grant would be used and include:
  - How many *unique* Port Washington residents will be served by your organization?
  - If the organization has undergone any material changes regarding your organization, staffing, management or board of directors in the past year.
2. If your request is for a **SPECIFIC PROGRAM**, please explain the program including:
  - A statement of the program’s primary purpose, the need or problem it addresses, and how it fits into the mission of your organization.
  - The population that you plan to serve and how this population will benefit.
  - Tell us how many *unique* Port Washington residents will be served by your program. (See Grant Cover sheet for definition of “unique.”)
  - Strategies that you will use and specific program services you will provide in implementing your program.
  - How long has the program been operating?
  - The proposed staffing for the program and the names and titles of the staff who will direct the program.

**C. Evaluation** – Explain how you will measure the effectiveness and impact of your activities.

Describe your criteria for a successful program and the results you expect to have achieved by the end of the funding period.

### III. ATTACHMENTS – Label all attachments

#### A. Financial Information – All applicants must provide A1-A4.

*If the document heading does not indicate dates, provide the dates that each document covers.*

1. **MOST RECENT FINANCIAL STATEMENTS.** Provide an **income statement** for your most recently completed fiscal year and a **balance sheet** for the year then ended. Audited financial statements are preferable but not required. This statement reflects *actual* expenses and funds.
2. Aligned in side by side on the same page for comparison purposes, **BOARD APPROVED OPERATING BUDGETS** (revenue and expense) for your *current* and *most recently completed* fiscal year. The current year's budget will end sometime during calendar year 2020; the most recently completed budget will be the year prior to the current year.
3. Aligned side by side on the same page, a **LIST OF FOUNDATION AND CORPORATE SUPPORTERS** and all other sources of income with amounts, for your current and most recently completed fiscal year.
4. List the foundations, corporations, and other **SOURCES** that you are **SOLICITING FOR FUNDING** and, to the best of your knowledge, the status of each proposal (possible, likely, unlikely).

In addition, **if program funding is being requested:**

5. A **CURRENT BUDGET FOR THE PROGRAM.** This statement is a line by line projection of income and expenses for this program. This will most likely be for calendar year 2021 or a fiscal year that ends sometime in calendar year 2021.

#### B. **Other Supporting Materials** (these are not optional)

1. A list of your Board of Directors, with their titles and/or affiliations.
2. One paragraph resumes of key program staff, including qualifications relevant to the specific request.
3. A copy of your most recent Independent Auditors' report (or a letter on your letterhead explaining why you do not have one).

#### C. **Tax Returns: Documents should be sent digitally only** (these are not optional):

1. IRS Form 990, 990-EZ, 990-PF or 990-N) for your most recently completed fiscal year.  
Please include "Form 990 and [your organization's name]" in the file name.
2. NYS Form CHAR 500 for your most recently completed fiscal year.  
Please include "CHAR 500 and [your organization's name]" in the file name.

#### D. **Other Materials (optional and sent digitally only):**

Newsletters, news clippings, annual report, thank you letters from clients, program evaluations or surveys etc.

#### E. **For NEW applicants ONLY:** A copy of your most recent IRS tax determination letter.