COMMUNITY BUILDING 2021 APPLICATION QUESTIONS

THIS DOCUMENT CAN NOT BE SUBMITTED AS AN APPLICATION

This document lists the questions that are on the Community Building grant application. We have created it to help applicants review the questions and draft their applications. Please note that there is a 150-word maximum limit on most questions. To apply for a Community Building grant please go to our online grant application system, at www.mainecf.org and click the “Apply” button at the top of the page or click here: https://mainecf-grants.smapply.io/

Organizational Overview

Organization Name and EIN
Organization Legal Name: _______________________________________________________
DBA (doing business as): _____________________________________________________
EIN (Employee Identification Number): ____________________________________________

Organizational Address: Please enter your organization's primary mailing address.
Street: ______________________________________________________
City: __________________________ State: __________________________ Zip code: __________________________
County: __________________________ Phone: __________________________
Website: __________________________

Grant Application Contact: This is the person MCF will contact for questions about the application.
First Name: __________________________ Last Name: __________________________
Title: __________________________
Phone: __________________________ Email: __________________________

Organization Mission: Briefly describe the organization's mission or purpose and the primary population(s) served. (Limit: 100 words)
____________________________________________
____________________________________________
____________________________________________

Programs and Services: Briefly describe one or two of your organization's most important programs. (Limit: 100 words):
____________________________________________
____________________________________________

Number of Staff: __________________________
Number of Volunteers: __________________________
Year founded: __________________________

Organization CEO/President, lead officer: List the name of the person in the leadership role for this organization
First Name: __________________________
Last Name: __________________________
Title: __________________________
Phone: __________________________
Email: __________________________

Fiscal Sponsor (If Applicable)
Fiscal Sponsor: __________________________
Contact Name/Title: __________________________

Proposal Information

The Community Building Grant Program invests in local projects and organizations that work to build strong communities. For the 2021 grant cycle, the focus will be on building community resilience in response to the COVID-19 pandemic.
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Amount Requested from MaineCF (max $10,000): $____________________
Total Project Budget: $____________________

One Sentence Proposal Description
Describe your proposed project or activity by completing the following sentence in 25 words or less: We request support...
Note: This sentence will be used in our database and in press releases. It works best when it is short and simple.
__________________________________________________________________________________________________

Interest Area
Select up to three of the following areas that best describe the focus of your project or organization.

- Animal-Related
- Arts/Culture/Humanities
- Civil Rights/Social Action/Advocacy
- Community Improvement/Capacity Building
- Crime/Legal-Related
- Diseases/Disorders/Medical Disciplines
- Education
- Employment
- Environment
- Food/Agriculture/Nutrition
- Health Care
- Housing/Shelter
- Human Services
- Medical Research
- Mental Health/Crisis Intervention
- Philanthropy/Volunteerism
- Public/Societal Benefit
- Public Safety/Disaster Preparedness/Relief
- Recreation/Sports
- Science/Technology
- Social Science
- Unknown/Other
- Youth Development

Type of Request - Please choose ONE option
Capacity Building Support is for activities that will make your organization stronger, more efficient, and/or more effective in response to COVID-19.
Project Support is for New or Expanding Projects or Ongoing programs (including changes) responding to COVID-19.

- Capacity Building
- Project Support - Expanding
- Project Support - New
- Project Support - Ongoing

Primary County Served
Identify the ONE county that will most directly benefit from funding requested in this application. Select Statewide if 3 or more counties will directly benefit from the funding requested in this application. Note: Your answer will determine which committee will review your application.

- Androscoggin
- Aroostook
- Cumberland
- Franklin
- Hancock
- Kennebec
- Knox
- Lincoln
- Oxford
- Penobscot
- Piscataquis
- Sagadahoc
- Somerset
- Waldo
- Washington
- York
- Statewide
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Timing
Identify the start and end dates of the activities you plan to fund with a MaineCF grant. Please note that MaineCF grants may not be used for expenses already incurred. This grant program cannot provide funding for activities that occur before June 1.
Starting Date (mo/yr): ____________________
Ending Date (mo/yr): ____________________

Proposal Description
In this section, you will describe challenges in your community as a result of COVID-19 and how you will address them using your community's strengths.

1. Why is this project or activity needed?
Explain the impact of COVID-19 on your community and/or organization that your work will address.

2. What is the goal of your work?
Describe the point of your project. What are you trying to achieve for your community? This should be just a few sentences that expand on your one sentence description to give us the big picture of your project.

3. What specific activities are you planning to do?
List of up to five specific activities you will do in your project or capacity building work.

4. What are the results you want to achieve?
Describe up to three results that you hope to achieve. Try to include specific details whenever possible.

5. How will you know if you are making progress?
Describe how you will keep track of your progress and know if you are reaching the results you described above.

6. Who will directly benefit from your work?
Select all the groups that will be directly served by your project or organization.

- Black, Indigenous, and people of color
- Essential workers
- Older people, 60+ years old (especially those experiencing poverty or isolation)
- People experiencing domestic abuse or violence
- People experiencing poverty, hunger, or homelessness
- People with mental health challenges, including substance use disorder
- Youth at higher risk (especially those who are homeless, recently incarcerated, or who have mental health challenges, including substance use disorders)
- No specific population
- Other, please specify: ____________________

7. About how many people will benefit from your work?
This is an estimate of the number of people who will participate in your project or are served by your organization.
8. How will people benefit from your work?
Describe how your work will help community members by increasing at least one of the following: skills, knowledge, abilities, and/or well-being.

9. How will you involve the people who will benefit from your work?
Describe how the people served by your work will be involved in design, delivery, and/or evaluation.
Project Support: Describe how people will be involved in the project.
Capacity Building Support: Describe how people are involved in your programs and/or services.

10. How will you maximize community strengths and resources?
Explain how your project or organization:
- Builds or strengthens community resources,
- Makes community resources more accessible, or
- Increases the use of community resources.

Note: Community strengths or resources includes people, partnerships, organizations, buildings, natural environment, etc.

11. Who are the key staff for this project?
Provide a brief description of the specific roles, responsibilities, and qualifications of key staff for this project. This should be in a short paragraph. Please do not include resumes.

12. Will you be partnering or collaborating with other organizations?
List any organizations that you will partner with to make this project successful. Include a brief description of what each partner organization will do in this project (Examples: engage members, provide training, share resources, etc.).

Proposal Funding

Amount Requested from MaineCF (max $10,000): $____________________
Total Project Budget: $____________________

Budget Description
Describe how you plan to use the grant funds if you receive them.
Important Note: Community Building grants cannot be used for any of the following:
- General Operating Expenses: This includes any expenses related to the daily operation or running of the organization. For example, rent, utilities, office equipment, supplies, insurance, etc. While operating expenses may be included as “indirect costs,” (up to 20% of the request) they are not eligible as full requests.
- Major Capital Expenses: This includes purchasing assets such as buildings, land, or vehicles.
- Camperships: This includes funding for admission, enrollment, tuition, or other costs related to short-term programs that are primarily recreational or social.
- Endowments, Capital Campaigns, or Annual Appeals
Project Revenues
List all the funding sources you have identified for your project. This includes this MaineCF request, grants from other foundations, in-kind donations (donations of time, goods, or services from your organization or others), and earned income (fees for services or income from sales). The total amount must match your Total Project Budget listed above.

<table>
<thead>
<tr>
<th>Name of Funding Source</th>
<th>Amount</th>
<th>Status (Pending or Secured)</th>
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<tbody>
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Project Budget
List the specific items or expenses needed for your project under Expense Items. For each item, list the amount you request from MaineCF in Amount from MaineCF. List the amount you will need from other sources in Amount from Other Sources if that applies.

Important things to consider:
- You must account for all the funding you are requesting from MaineCF with this grant application.
- The total amount from MaineCF must match the Amount Requested from MaineCF listed above.
- You can list up to ten items in the Project Budget. If you have more than ten, you can combine like items into categories (examples: project materials and supplies or volunteer and staff time).
- Your Project Budget may include up to 20% of the total amount requested from MaineCF for indirect costs (overhead expenses). These funds may be used for overhead or operating expenses (examples: rent, utilities, bookkeeping), but you must label this line in your budget as “Indirect” in the Expense Items column. (DO NOT specify how the Indirect funds will be used.)
- Your total request must NOT be more than $10,000 (the maximum Community Building grant).

<table>
<thead>
<tr>
<th>Expense Item</th>
<th>Amount from MaineCF</th>
<th>Amount from Other Sources</th>
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<tbody>
<tr>
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Organizational Financial Information
Please note: Public Schools and Municipalities do not need to complete this section. All other applicants should refer to your organization’s IRS 990 form, Part I and Part IX for information for this section.

Operating Budget
Please provide information from the most recent completed fiscal or financial year. If your organization is new this year, please estimate the current fiscal year’s information. If your organization is exempt from this requirement type "N/A" in the two fields below.
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Fiscal Year Operating Budget- $: ____________________
Fiscal Year Start and End Dates (mo/yr-mo/yr): ____________________

<table>
<thead>
<tr>
<th>Revenues</th>
<th></th>
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<tbody>
<tr>
<td>Individual and Business Contributions</td>
<td>$</td>
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<tr>
<td>Foundation Grants</td>
<td>$</td>
</tr>
<tr>
<td>Government Funding</td>
<td>$</td>
</tr>
<tr>
<td>Program Income (fees or other forms of earned income)</td>
<td>$</td>
</tr>
<tr>
<td>Interest, Dividends, and Endowment Income</td>
<td>$</td>
</tr>
<tr>
<td>Other Revenue</td>
<td>$</td>
</tr>
<tr>
<td>Total</td>
<td>$</td>
</tr>
</tbody>
</table>

Other Revenues Explanation: If you listed an amount for "Other Revenue" above, please identify the sources here. (Examples: fees, fines, ticket sales, etc.)
__________________________________________________________________

<table>
<thead>
<tr>
<th>Expenses</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>For Programs</td>
<td>$</td>
</tr>
<tr>
<td>For Management and Administration</td>
<td>$</td>
</tr>
<tr>
<td>For Fundraising</td>
<td>$</td>
</tr>
<tr>
<td>Other Expenses</td>
<td>$</td>
</tr>
<tr>
<td>Total</td>
<td>$</td>
</tr>
</tbody>
</table>

Other Expenses Explanation: If you listed an amount for "Other Expenses" above, please identify the sources here. (Examples: fees, legal or accounting costs, etc.)
__________________________________________________________________

Total Revenues Minus Total Expenses: $____________________

Deficit Explanation
If your expenses exceeded revenues for the last fiscal year, please explain how this shortfall was financed: ________________
__________________________________________________________________

Attachments
(In the online grant application system, you will be able to upload these items as attachments.)

Required for all applicants: List all the members of your organization's board or advisory committee.

Other documents that may be required:
Review the following conditions to determine what additional documents are required with your application.
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<table>
<thead>
<tr>
<th>Condition</th>
<th>Required Document</th>
</tr>
</thead>
<tbody>
<tr>
<td>If your group does not have an assigned tax status and you are applying</td>
<td>MaineCF’s Fiscal Sponsorship Agreement Form completed and signed by an authorized representative of each entity. The form and frequently asked questions can be found here.</td>
</tr>
<tr>
<td>with a fiscal sponsor</td>
<td></td>
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<tr>
<td>If you are applying for a project that includes working with a school</td>
<td>A letter of agreement from a school representative that explains the school’s level of involvement</td>
</tr>
<tr>
<td>If you are applying for a project that includes a partnership with another</td>
<td>A letter of agreement from the partner organization that explains their level of involvement.</td>
</tr>
<tr>
<td>organization (other than a school)</td>
<td></td>
</tr>
<tr>
<td>If your organization is a public school or school district</td>
<td>A letter from the principal or superintendent agreeing to accept MaineCF grant funds for your project</td>
</tr>
<tr>
<td>A municipal library</td>
<td>A letter from the Town or City Manager confirming your organization’s municipal status. (Note that libraries with separate 501(c)(3) tax-exempt public charity status do not need this letter.)</td>
</tr>
<tr>
<td>A town/city or government/municipal agency</td>
<td>A letter from the head of agency agreeing to accept MaineCF grant funds for your project</td>
</tr>
</tbody>
</table>

If you do not have electronic versions of these materials, please download this Cover Sheet and mail these materials to the Maine Community Foundation.

Please DO NOT INCLUDE:
- Audited financials or 990 forms
- 501(c)(3) letters of determination
- Annual Reports
- General letters of support

Terms and Conditions

By checking the boxes below, the applicant and the fiscal sponsor (if applicable) hereby indicate(s) agreement with the following terms and conditions:

☐ The information contained in this proposal and in any attachments is true and correct to the best of your knowledge.

☐ The applicant organization is one of the following: 1. A nonprofit, charitable organization tax-exempt under section 501(c)(3) of the Internal Revenue Code and also classified as an organization described in section 509(a)(1) or 509(a)(2); 2. A municipality; 3. A public school; 4. A public agency working for the State of Maine; 5. An Indian tribal government (or political subdivision) recognized by the Department of the Interior; or 6. A group without any tax status with a fiscal sponsor that is one of the above eligible organizations.

☐ Any funds received as a result of this proposal will be used only for the purpose specified in the award letter. No part of any grant will be used for a political campaign or to support attempts to influence legislation of any government body other than through making available the results of non-partisan analysis, study, and research. No portion of the award will be granted to any secondary grantee.

☐ Any funds received as a result of this proposal will be returned if the grant recipient loses its exemption from the federal income taxation as provided for under section 501(c)(3) of the Internal Revenue Code.

☐ Grant funds should be expended within 12 months after payment is issued. At the end of this period any unexpended grant funds should be returned or a written request for an extension of time should be submitted to grants@mainecf.org
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☐ MAINECF NON-DISCRIMINATION POLICY Maine Community Foundation seeks to promote respect for all people. In its competitive grant programs, the foundation will support organizations that do not intend to deny services, employment, or volunteer involvement on the basis of race or ethnicity, age, ancestry or national origin, sexual orientation, gender identity or gender expression, physical or mental disability, or religion. It is not the intent of this policy to deny support for programs that serve specifically defined populations. By signing this form, the applicant organization confirms that it is in compliance with this policy.

☐ The applicant organization authorizes MaineCF to share this proposal in its entirety with other potential funding sources at its discretion.

Digital Signature: ________________________________

***This is the end of the application.***