

Grow Greene County Gaming Corporation

Grant Application

Our vision is to positively grow Greene County for families and businesses to thrive.

Grow Greene County Gaming Corporation's mission is to serve as a catalyst to leverage and coordinate resources, while providing opportunities for leadership and vision.

The Guiding Principles of Grow Greene County Gaming Corporation:

*Respectful *Strategic *Committed *Visionary

Grow Greene County Gaming Corporation (also known as Grow Greene) will generally <u>not</u> consider funding requests for the following:

- Ongoing annual operating expenses
- Any project at 100%
- Financial support for individuals or their families
- For-profit organizations or programs.
- Annual campaigns or capital campaigns for private organizations
- Endowment funds
- Fundraising events or activities both private and public
- Membership in civic or social organizations
- Projects directly related to religious worship
- Political activities

Grow Greene has these guidelines and requirements:

- •Grant application is available online October 1, 2022 or via email from growgreenecounty@gmail.com. Completed applications must be submitted via email by 4:00 PM, February 23, 2023. Grants can be dropped off during normal business hours at Greene County ISU Extension & Outreach 104 West Washington, Jefferson. On February 23th grant must be delivered to their office by 4:00 PM. Again, we encourage digital submission but will accept hard copies.
- •The minimum grant request is \$35,000. Grants less than \$35,000 must be submitted to the Greene County Community Foundation on their application form. http://forgreenecounty.org/
- •Competitive grant awards are made once per year in April and a progress report must be submitted in December. Representatives must attend the awards ceremony and acknowledge Grow Greene County in project publicity & marketing.
- •Grant recipients must complete a Project Completion form, available on the Grow Greene website, after their project is complete. If they fail to do this the recipients may not be eligible for future Grow Greene grants. Project Completion forms are available on the Grow Greene County website and due December 15th.

Only the following entities can receive Grow Greene grants:

- Nonprofit organizations.
- Government entities, such as municipalities, school districts and counties.
- Groups sponsored by a government entity or another non-profit that agrees to manage the grant funds (the "Fiscal Sponsor").

Grant Application Cover Page



1)	Organization requesting funds:
2)	Project title:
3)	One sentence description of the project:
4)	Federal tax identification number of applicant or fiscal sponsor (EIN) if any:
5)	Contact person:
6)	Address:
7)	Contact person phone & email:
Pho	ne: Email:
If us	sing a fiscal sponsor, provide the following:
8)	Fiscal sponsor:
9)	Fiscal sponsor contact person & title:
10)	Fiscal sponsor address:
Pho	ne: Email:
11)	Total project cost: Amount requested from Grow Greene:

1)	Describe the goals being addressed by this project.
2)	What area or population is being served?
2)	
3)	List the timeline of the project.
4)	Explain your organization's ability to carry out and ensure success of this project.

5) Identify community needs that will be met as a result of this project. Explain how this project will have a lasting benefit.
6) List a minimum of 3 letters of community support and attach to application. Please list names below.
1.
2. 3.
7) Expected starting date of project:
8) Expected completion date of project.
9) Explain any other collaboration in the project.
10) If Grow Greene did not fully fund your request, how would you complete your project?

Rows can be added if needed

	Total Project Costs	
	Itemize specific expenses below and provide dollar amount. Written estimates or bids should be attached.	
#	Item	Amount
1		
2		
3		
4		
5		
6		
7		
8		
	TOTAL	

	In-Kind Contributions	
	Attach letters of commitment if applicable.	
#	In-kind item, labor or other	Amount
1		
2		
3		
	TOTAL	

	Funding Sources Other Than Requesting from this Grant	
	Attach letters of commitment if applicable.	
#	Funding Source	Amount
1		
2		
3		
	TOTAL	

	Amount Requested from Grow Greene	
#	Provide detail if asking for specific items this grant will go toward.	Amount
1		
2		
3		
	TOTAL	

The undersigned certify that they are authorized to represent the organization applying for a grant and that the information contained in the application is accurate. Minutes of board action showing approval of this project and the grant application must be included in the grant application packet.

The undersigned agree that if a grant is awarded to the organization:

- the grant will be used for the purpose outlined in the grant application and may not be expended for any other purpose without prior written approval from Grow Greene.
- Grow Greene has received nothing of material value in exchange for the grant.
- there is no personal benefit or conflict of interest in this application.
- information about the organization, project photos and the grant may be used by Grow Greene in any published materials.
- representatives of the organization receiving this grant will publicize the results of the grant received by the organization and will acknowledge Grow Greene County Gaming Corporation for its contribution.
- to the best of our knowledge and belief, all data in this application is true and correct.
- the budget will provide sufficient resources to meet the goals identified in this application.
- to the best of our knowledge and belief, this organization is in compliance with all IRS and Iowa requirements for non-profit corporations, and all appropriate forms and filings are current. (IRS requires filing of Form 990 and State of Iowa requires bi-annual renewal of Certificate of Purpose.)
- if awarded, the organization/agency will comply with Grow Greene guidelines.

A copy of your board's minutes with evidence of board included in the application packet to Grow Greene.	approval of the proposed pr	oject must be
Signature of Authorized Project Representative	(Print Name)	Date
Signature of Project Chairperson (if different from above)	(Print Name)	Date
Signature of Fiscal Sponsor Representative (if different from above)	(Print Name & Title)	Date
Signatures of all remaining board members endorsing thi	is application and the compl	etion of this project

Checklist Page

Grow Greene Grant Application

The grant application packet must be in the following order: Cover Page, Description of Project, Projected Budget, Signature and Affirmation Page, board minutes, letters of support. If applicable include information regarding fiscal sponsor or financial statements at this point. If summitting through our online application the order will be taken care of.
Grant application packets must be stapled in the top left-hand corner. Do not bind applications in any other way.
Cover Page
Description of Project-maximum five pages
Projected Budget
Signature and Affirmation page with all necessary signatures
Board minutes
Minimum of 3 letters of support
Attachment 1 if your organization has a fiscal sponsor
Financial statement from organization if not a city, county, school or a subdivision of the State of Iowa
Digital copy of the entire grant application packet must be submitted via email by 4:00 PM on February 23, 2023 at growgreenecounty@gmail.com .
Hard copy submissions should include 12 grant application packets by mail or hand delivery:
If mailing grant application packet it must be received by, February 23, 2023 and mailed to Grow Greene County PO Box 437 Jefferson, IA 50129
OR
If hand delivering the grant application packet it must be dropped off at Greene County ISU Extension & Outreach 104 West Washington, Jefferson during normal business hours. If hand delivering on February 23, 2023 it must be delivered to the Greene County ISU Extension & Outreach office by 4:00 PM

Do <u>NOT</u> fill out this form if the applicant is a city, county, a subdivision of the State of Iowa or a non-profit entity. Only fill out this form if your organization is <u>not</u> one of the above.

FISCAL SPONSORSHIP AGREEMENT

Date:
Fiscal Sponsor (Legal Applicant):
Fiscal Sponsor Contact Person and Email:
Fiscal Sponsor Full Mailing Address:
Sponsored Organization Conducting Project:
Project Name:
(Legal Applicant/Fiscal Sponsor), hereafter referred to as The Fiscal Sponsor) has agreed to serve as a fiscal/program sponsor for the
Legal Applicant/ Fiscal Sponsor Representative Signature:
Printed Name: Date: Sponsored Organization Representative Signature:
Printed Name: Date:

Note: If the Fiscal Sponsor is a 501(c)(3), the Grow Greene County Gaming Corporation may request a copy of the $\underline{501(c)(3)}$ Tax-Exempt Determination Letter or comparable proof of charitable exemption.