Stabilization Grants 2020

Community Foundation of Western Massachusetts

Instructions
Welcome to the Community Foundation of Western Massachusetts' Stabilization Grant 2020 application. Here are few tips to keep in mind before you start your grant submission.

1. If you are unclear about any aspect of the grant application, please send an email to Sheila Toto at stoto@communityfoundation.org.
2. If you experience any technical issues with the application, please contact tech@communityfoundation.org.

We are here to assist you with the grants process. Please contact us if you have any questions at grants@communityfoundation.org.

Grant Focus:
The goal of Stabilization Grants is to provide up to six months of unrestricted general operating support to nonprofit organizations that are recovering from the COVID-19 health crisis and its economic impact. Grants will be awarded to a select group of organizations that can clearly demonstrate financial need due to COVID-19.

As part of the decision making process CFWM will give preference to organizations that:

- Align with the Foundation's new strategic focus areas of:
  - A strong start for all children through high-quality early education and care
  - Accessible and more affordable post-secondary education and training, providing pathways to completion and employment (college completion and work force development)
  - A vibrant local arts and creativity ecosystem to support self-expression, economic vitality, and connection.
- Have racially diverse leadership - board members and executive staff.
- Are committed to a re-envisioned organization.
- Actively serve vulnerable populations.

Program Details:

- Eligible organizations must have been operating as a 501(c)(3) organization or an established fiscal sponsorship arrangement for at least two years.
- Funding will only be provided to organizations located and serving residents in Hampden, Hampshire and/or Franklin counties.
There will be a minimum of $2,000,000 for this grant opportunity with a goal of awarding 65% of the funds to organizations aligned with the Foundation's stated strategic focus areas.

This opportunity will award grants up to $50,000 to support up to 6 months of operations.

Only one application per 501(c)(3) organization. An exception may be made in fiscal sponsorship situations. Please contact Sheila Toto at stoto@communityfoundation.org to discuss prior to the submission of an application.

What will **NOT** be included in this phase of funding:

- Grants to individuals
- Sectarian or religious organizations unless as a fiscal sponsor for a broad community benefit
- Higher education institutions
- Support for political purposes
- Capital campaigns for buildings, land acquisition, or endowment
- To support academic research
- Private educational organizations that derive less than fifty percent of revenue from public sources.

**Deadline:**
The online grant application will close at 11:59 p.m. EST on September 1, 2020.

**Review:**
- To expedite the decision-making process, review of the application is based only on information and documents submitted.

**Outcomes:**
- All applicants will be notified of the decision by September 30, 2020.

**Organization Information**

**Physical Location of Organization**
Please enter the address of your physical location, if different from your mailing address. If the address is the same, leave this field blank.

*Character Limit: 250*
How long has the organization been incorporated or established?*
Please indicate how long the organization has been incorporated. If not incorporated, indicate how long ago the organization has been established.

Choices
Less than 2 years
Two years or more

Organization’s Formal Mission Statement*
Character Limit: 750

Is your organization fiscally sponsored?*
Choices
Yes
No

Fiscal Sponsor Information
More information about the requirements for fiscal sponsorship can be found here:
http://communityfoundation.org/nonprofits/fiscally-sponsored-organizations-fiscal-sponsors/

Fiscal Sponsorship Form*
Please complete and upload the Fiscal Sponsorship Agreement form. A copy of the form can be found here: http://communityfoundation.org/grants/forms/

File Size Limit: 1 MB

Signed Agreement between the fiscal sponsor and the sponsored organization.*
Please upload the signed agreement (i.e. MOU) between your organization and the fiscal sponsor.

File Size Limit: 1 MB

Copy of the fiscal sponsor's Meeting Minutes or equivalent*
Please upload a copy of the fiscal sponsor's meeting minutes showing the fiscal sponsor's governing authority approved the agreement or a copy of the resolution allowing the 501(c)(3) organization to act as the fiscal sponsor for the non 501(c)(3) entity or a copy of the resolution allowing an individual officer to enter into a fiscal sponsorship relationship.

File Size Limit: 1 MB

Current audited or reviewed financials*
Please upload the current audited or reviewed financial statements (not a 990 tax form) for the 501(c)(3) organization that will serve as the project’s fiscal sponsor. Compiled financial statements will not be accepted.

File Size Limit: 6 MB
Application Information

Alignment with the Foundation's Strategic Priority Areas*
The Foundation recently adopted the following new strategic focus areas:

- A strong start for all children through high-quality early education and care
- Accessible and more affordable post-secondary education and training, providing pathways to completion and employment (college completion and work force development)
- A vibrant local arts and creativity ecosystem to support self-expression, economic vitality, and connection

With which of these strategic priorities does the work of your organization align? Select all that apply.

**Choices**
A strong start for all children
Accessible more affordable post-secondary education and training
A vibrant local arts and creativity ecosystem
The work of our organization falls outside of the stated focus areas

**Does your organization regularly provide programs and services for a vulnerable population?**
For the purpose of this application and given the current pandemic, vulnerable population is defined as:

- Vulnerable seniors
- People without stable housing
- Families with individuals who are food insecure
- Residents who have limited English proficiency
- Individuals with health vulnerabilities, including those with compromised immune systems, mental health disorders and/or those who are struggling with addiction.

**Choices**
Yes
No
**Vulnerable Populations**

**Select populations***
Please indicate from the list below the populations your organization works with regularly. The selection of "Individuals with health vulnerabilities" includes those with compromised immune systems, mental health disorders, and/or those who are struggling with addiction.

**Choices**
- Vulnerable seniors
- People without stable housing
- Families and individuals who are food insecure
- Residents who have limited English proficiency
- Individuals with health vulnerabilities

**Percentage of Work***
What percentage of the organization's work is dedicated to addressing the needs of the populations selected?

**Choices**
- Less than 20%
- 21% - 50%
- 51% - 75%
- 76% - 100%

**Organization Demographics**

**Organization Focus Area***
The focus of the organization primarily benefits which of the following areas or sectors. Please choose **no more than two areas** as the primary focus of the organization.

**Choices**
- Arts and Culture
- Economic Development
- Education
- Environmental
- General Health
- Housing
- Human Services
- Non classifiable

**Population Served***
**Primary** population served by the organization. Please choose **no more than two options**.

**Choices**
- At-Risk Youth
- Disabled
- Disease, Illness
- Gay, Bi, Transgender
General Public or Non-Specific
Homeless
Immigrants, Refugees, Migrants
Incarcerated
Low-Income

Age Group*
Primary age group served by the organization. Please choose no more than two options.

Choices
General Public or Non-Specific
Infant & Toddlers (Birth - 3 years of age)
Preschool (3-5 years of age)
Children (5-12 years of age)
Teens (13-19 years of age)
Young Adults (20-26 years of age)
Adults (non-senior / non-young adult)
Seniors (65 years or older)
Youth General

Gender*
Primary gender served by the organization.

Choices
Female
Gender Neutral
General Public
Male
Transgender

Ethnicity*
Primary ethnicity/racial group served by the organization.

Choices
American Indian or Alaska Native
Asian
Black or African American
General Public or Non-Specific
Hispanic, Latino or Spanish origin
Middle Eastern or North African
Native Hawaiian or Other Pacific Islander
White

County(ies) Served
Please estimate the percentage distribution the organization will serve in each of the following counties. Cannot exceed 100%. Enter only whole numbers. The percentage sign is assumed.
Franklin County*
Please enter the percentage as a whole number or 0 if this county is not served by the organization. The percentage sign is assumed.

Character Limit: 3

Hampden County*
Please enter the percentage as a whole number or 0 if this county is not served by the organization. The percentage sign is assumed.

Character Limit: 3

Hampshire County*
Please enter the percentage as a whole number or 0 if this county is not served by the organization. The percentage sign is assumed.

Character Limit: 3

Other*
Please enter the percentage as a whole number or 0 if this county is not served by the organization. The percentage sign is assumed.

Character Limit: 3

County- Other
Please explain what other counties are served by this organization.*

Character Limit: 500

Leadership Information

How many members make up your Board?*

Character Limit: 3

How many times does your Board normally convene in a 12-month period?*

Character Limit: 2

How often has there been a quorum at those Board meetings?*

Choices
None of the meetings
At least one meeting OR less than half of the meetings
More than half of the meetings, but not all
All of the meetings

What has your Board done to ensure organization viability through this crisis?*

Maximum of 1500 characters including spaces.
What tough choices is the organization making as a result of the pandemic?*
Maximum of 1500 characters including spaces.

The Foundation is committed to increasing equity and opportunity so that all who live in the Pioneer Valley have access to a satisfying quality of life. The following two questions are optional. Your response would help the Foundation quantify its giving to organizations led by people of color to assess how equitably Foundation dollars are allocated.

**Board Members**
What percentage of your board is made up of people who identify as a person of color?

**Choices**
- Up to 25%
- Up to 50%
- Up to 75%
- Up to 100%

**Executive Leader**
Does the organization's CEO, Executive Director or equivalent position identify as a person of color?

**Choices**
- Yes
- No

**Executive Director Information**
How long has the Executive Director or equivalent been in this position?*

**Choices**
- Less than one year
- 1 year - 3 years
- 4 years - 10 years
- More than 10 years
- This position is currently vacant

How long has the Exec. Director or equivalent been associated with the organization in any capacity?*

**Choices**
- Less than one year
- 1 year - 3 years
- 4 years - 10 years
More than 10 years

**Organization Financials**

**Fiscal Year End Date**
*Character Limit: 10*

**Organization Operating Budget**
Enter the current fiscal year operating budget amount for the 501(c)(3) organization.
*Character Limit: 20*

**Upload the current Operating Budget**
Please attach the organization's operating budget that is current as of our 09/01/2020 grant deadline. The budget should include sources of income and expenses and reflect a 12-month fiscal year.
*File Size Limit: 2 MB*

**What do you want us to know about your current operating budget?**
Maximum of 700 characters including spaces.
*Character Limit: 700*

**Upload a Balance sheet as of June 30, 2020**
Please upload the organization's Balance sheet as of June 30, 2020.
*File Size Limit: 2 MB*

**Upload a Balance sheet as of December 31, 2019**
Please upload the organization's Balance sheet as of December 31, 2019.
*File Size Limit: 2 MB*

**Upload an Income & Expense statement as of June 30, 2020**
Please upload the organization's Income & Expense statement as of June 30, 2020.
*File Size Limit: 2 MB*

**Upload an Income & Expense statement as of December 31, 2019**
Please upload the organization's Income & Expense statement as of December 31, 2019.
*File Size Limit: 2 MB*

**Upload the most recent IRS Form 990 or 990EZ**
Please upload the organization's most recent IRS Form 990 or 990EZ. If you are unable to provide either of these forms, please contact Sheila Toto, Senior Program Officer, at stoto@communityfoundation.org.
COVID-19 Impact

Project Name*
Please create a project name using the following format:

(Your organization name)-Operating 2020
***You may need to abbreviate your organization name if it exceeds the field length allowed. Maximum of 125 characters including spaces.
Character Limit: 125

The following questions will provide us with information about how your organization has been addressing the challenges you faced during the pandemic.

Is your organization currently operating?*
Choices
Yes
No

Currently Operating
How has COVID-19 impacted your organization's operations (including staffing & volunteers)?*
Maximum of 1,500 characters including spaces.
Character Limit: 1500

How has COVID-19 impacted your organization's programming?*
Maximum of 1,500 characters including spaces.
Character Limit: 1500

How has COVID-19 impacted your organization's fundraising efforts?*
Maximum of 1,500 characters including spaces.
Character Limit: 1500
Currently Not Operating

Why isn't the organization currently operating?*
Please briefly explain why the organization is not operating at this time. Maximum of 1,500 characters including spaces.

Character Limit: 1500

What date did the organization suspend operations during the pandemic?*

Character Limit: 10

When do you anticipate the organization re-opening?*

Choices
We have no plans at this time
Anticipate re-opening prior to October 1, 2020
Anticipate re-opening between October 2 and December 1, 2020
Anticipate re-opening after December 1, 2020

Looking Ahead

Looking ahead at the next 6 months, what do you see your organization prioritizing and working on?*

Maximum of 1,200 characters including spaces.

Character Limit: 1200

To what extent is the Board and staff committed to a re-envisioned organization?*

Choices
We do not see a need at this time for re-envisioning
We have a need for re-envisioning, but have not been able to start
We are beginning the re-envisioning work

Closing Comments

Closing Comments
Please indicate below if there is any additional information you would like to provide.
Maximum of 1,000 characters including spaces.

Character Limit: 1000

Thank you for taking the time to complete the application. Once you are satisfied with your responses and attachments, please SUBMIT the application. The SUBMIT button can be found in the bottom, right corner of your screen.