

# CBL State Savings Bank Foundation

## 2024 Grant Application Instructions

*Below you will find instructions for completing each question on the application, emphasizing the types of information required to complete the application process. Feel free to refer back to this section for clarifications.*

### I. General Information

#### 1. Organization Information

Please provide the organization's name, physical and mailing address, office phone number, office fax number, and Tax Identification Number (FEIN).

#### 2. Whom should we contact regarding the grant?

Please list the individual who will serve as the organization's contact for all CBL State Savings Bank Foundation correspondence. Ensure that the contact information is current and that the individual is prepared to respond promptly to questions should they arise. If the contact person changes during the grant process, please notify Rhonda Turner at [rturner@cblbanklocal.com](mailto:rturner@cblbanklocal.com) or 864-877-2054.

#### 3. Is there a non-profit that is receiving the funds on behalf of the organization?

Most organizations applying for a grant will be registered non-profits and will check "no" to this question. However, some organizations function under the auspices of a fiscal sponsor - an established IRS 501(c)(3) tax-exempt organization that agrees to serve as the "fiscal agent" and accepts donations on behalf of the group that does not have a separate IRS tax exemption. If you do not have a separate IRS non-profit status, check "yes", list your fiscal sponsor, and be prepared to show documentation that they are aware of and support your application.

#### 4. What is the proposed use/purpose of the funds being requested?

Please briefly state the purpose of the funds requested, such as capital improvements, new or expanded programs, acquiring an asset, etc. Further explanation of the purpose may be explained in item #12.

#### 5. What is the amount of funding being requested from CBL State Savings Bank Foundation?

List the total that you are requesting from CBL State Savings Bank Foundation.

#### 6. What is the Total Grant Budget?

List the anticipated cost of implementing the entire project for which you are seeking funding.

#### 7. What is your Total Organizational Budget?

List the total annual expense budget for your organization, including both operational and programmatic expenses.

#### 8. What is the projected start date for the project/objective in which grant funding will be used?

List the date you anticipate beginning the project for which you are seeking funding.

#### 9. What is the projected end date for the project/objective in which grant funding will be used?

List the date you anticipate the project will be completed for which you are seeking funding.

**10. Have you received prior funding from CBL State Savings Bank Foundation?**

If CBL State Savings Bank Foundation has previously funded your organization, check “yes”. If you are uncertain if your organization has received funding in the past, contact Rhonda Turner at [rturner@cblbanklocal.com](mailto:rturner@cblbanklocal.com) or 864-877-2054.

**II. Narrative**

*On a separate sheet of paper, please respond briefly and adhere to word limits.*

**11. Briefly summarize the history and purpose of your organization.**

*(Maximum of 100 words)*

Provide details about your organization, its vision and mission, its ongoing programs and its impact on the community. Tell us why your organization is well-positioned to implement the program for which you are requesting funding.

**12. Describe in detail the specific project for which grant funding is sought.**

*(Maximum of 250 words)*

Provide enough detail about the project so that someone who is not familiar with your project can understand what you hope to do, why it is needed, and how it will impact your targeted populations. Include specific details about the number of people helped directly or indirectly by the project and what additional resources are needed to ensure successful outcomes.

**13. List 1-3 specific planned outcomes for your project.**

*(Maximum of 100 words)*

Briefly list up to 3 Planned Outcomes (sometimes referred to as your goals or objectives). In other words, what benefits or changes will occur for the populations served as a result of your project?

**14. List and describe any collaborations or partnerships with other organizations.**

*(Maximum of 50 words)*

List any individuals or organizations that you will work with to implement your project successfully. Do not list general partners for your organization but instead focus on those who will significantly ensure the project’s success. Provide contact information for key partners and indicate their level of commitment to the project for which you are requesting funding (joint applicant, new or existing partner, or potential partner.)

**15. Describe how the project will be sustained beyond CBL State Savings Bank Foundation. *(Maximum of 50 words)***

Explain what will happen with the program after the CBL Savings Bank Foundation grant and how the program or outcomes will be sustained over time.

**16. What makes this project compelling? What is its greatest impact?**

*(Maximum of 150 words)*

Provide an overview of your project by briefly summarizing and highlighting the potential impact on the community. Be convincing - tell your story. Feel free to use anecdotes, statistics, past successes and stories about the people whose lives will be changed as a result of your project.

### **III. Required Attachments**

*Please provide the following attachments along with your completed application. Failure to provide the following documents may disqualify your grant application for consideration.*

#### **17. Overall Organizational Budget**

Attach the complete organizational budget for your current fiscal year. For National Organizations, please include only the budget for the local affiliate.

#### **18. Project Budget**

Attach a Project Budget. Be sure to clearly indicate how you plan get any additional funding necessary for the completion of the project.

#### **19. Most Recent Form 990**

Attach the organization's most recent Form 990. If you do not have a 990 for the most recent fiscal year, please provide a brief explanation. Organizations that are not required to submit a tax return (e.g., hospitals, school systems) should attach a brief statement clarifying the exemption.

#### **20. List of Current Board Members and Executive Officers**

Provide a list of all current board members and executive officers who oversee the operations and success of your organization.

### **III. Acknowledgement Signature**

Please review the disclaimer in its entirety. Sign and date on the appropriate lines.