

2020-2021 BOARD MEMBERS

Wendy Panbecker, Chair
Steve Trimble, Vice-Chair
Megan Hauswirth, Treasurer
Karisa Stuchlik, Secretary

Donald Beneke, Board Member
Gary Devereaux, Board Member
Glenda Mulder, Board Member
Kristy Mather, Board Member

Dan Duitscher, Board Member
Margo Underwood, Advisor
Tom Grau, Advisor

FOUNDATION AREAS OF GIVING

Arts & Culture
Human Services

Education
Health

Environmental
Public & Society Benefit

Recreation

The Pocahontas County Foundation will provide grants to improve life in Pocahontas County, Iowa. We want to support development of all our communities into places where people want to live, as well as to benefit rural areas of the county.

ELIGIBILITY TO APPLY FOR FUNDING

- Tax exempt, non-profit entities classified by the IRS as 501(c)(3) or a 170 (c)(1) governmental entity
- If not 501(c)(3), must secure a fiscal sponsor who will be legally & financially responsible
- One standard and/or one high impact application per organization

501(c)(3) or 170(c)(1): Organizations must be recognized by the Internal Revenue Service as tax-exempt, nonprofit, public charities under section 501(c)(3) or as a "unit of government" under Section 170(c)(1) to receive grant funding. A 501(c)(3) is a section of the Federal Tax Code, which establishes the criteria for tax-exempt charitable organizations. Section 170(c)(1) refers to agencies that conduct activities to benefit the public at large, like public schools, state universities, public libraries and volunteer fire departments.

FISCAL SPONSOR: If your organization is not a qualified nonprofit, then you must secure a fiscal sponsor: an organization that is receiving the money on behalf of the grant applicant and is responsible for disbursing the money for the project and maintaining appropriate documentation. This entity must be a 501(C)(3) or a 170 (c)(1) unit of government in order to serve in this capacity. A fiscal sponsorship agreement must accompany the grant application if a fiscal sponsor is being used. (Use form on page 5, if a fiscal sponsor is required.)

2020-2021 GRANT DEADLINES

- Wednesday, October 7, 2020 Mandatory Information Meeting - 6:30 pm at the Rolfe Community Center, Rolfe, IA
- Friday, November 20, 2020 Application Deadline.
 - If mailed, must be postmarked by November 17, 2020
 - If emailed you will receive receipt confirmation within 24 hours of receiving.
 - Applications received after November 20, 2020 will not be accepted.
- December 31, 2020 Award Notifications will be emailed
- January 20, 2021 Grant Award Dinner 6:00 pm at the Palmer Community Center (Make-Up Date: January 27th)
- September 10, 2021 Grant Evaluations due. If not completed, future funding will be restricted.

APPLICATION CHECKLIST

- Organizational information has been completed
- Contact information has been completed. An e-mail address must be provided for correspondence.
- Project summary and budget detail, narrative information and time-line has been completed
- One (1) copy of the Grant Application (pages 2, 3, & 4 required), may include one additional page with photos/description
- If you are a new applicant, one copy of 501 (c)(3) IRS Determination letter at the top of the packet
- One copy of Fiscal Sponsorship agreement (page 5) completed ONLY if a fiscal sponsor is being used
- ALL grant applications must be received by mail or emailed by the deadline date of November 20, 2020

MAIL ONE (1) copy (no staples please) to: Pocahontas County Foundation, 28111 510th St., Pocahontas IA 50574

ALL INFORMATION BELOW IS REQUIRED - INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED FOR FUNDING

PROJECT TITLE		
ORGANIZATION NAME (if no Fiscal Sponsor required)		
APPLICANT (or Fiscal Sponsor)		FED TAX ID
<input type="checkbox"/> 501(c)(3) Organization	<input type="checkbox"/> 170(c)1 Government	<input type="checkbox"/> OTHER
ADDRESS		
CITY	STATE	ZIP
CONTACT PERSON & TITLE		
CONTACT PHONE		CONTACT EMAIL

PROJECT BUDGET	AMOUNT REQUESTING
PROJECT START DATE	PROJECT COMPLETE DATE
TYPE OF GRANT <input type="checkbox"/> COMMUNITY <input type="checkbox"/> HIGH IMPACT (must impact entire county)	
TYPE OF PROJECT <input type="checkbox"/> CAPITAL (building of or physical improvement of something) <input type="checkbox"/> PROGRAM (operational, activity, general support)	
PROJECT FOCUS AREA (select one) <input type="checkbox"/> ARTS / CULTURE <input type="checkbox"/> EDUCATION <input type="checkbox"/> HEALTH <input type="checkbox"/> RECREATION <input type="checkbox"/> ENVIRONMENT <input type="checkbox"/> HUMAN SERVICES <input type="checkbox"/> PUBLIC / SOCIETY BENEFIT <input type="checkbox"/> OTHER _____	
BRIEF DESCRIPTION OF ORGANIZATION	
BRIEF DESCRIPTION OF PROJECT	

SIGNATURE

DATE

MAIL 1 loose copy to: POCO Foundation, 28111 510th St., Pocahontas IA 50574

and/or EMAIL to pocofoundation@pocahontas-county.com

QUESTIONS: Contact Wendy Panbecker 515-338-0488 by phone or text or email: pocofoundation@pocahontas-county.com

ALL INFORMATION BELOW IS REQUIRED - INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED FOR FUNDING

Describe the need or problem being addressed by this project:

Explain how this project will benefit the citizens of this county:

What area or population is being served? (county-wide, community, several communities)

Explain your organizations ability to carry out and ensure success of this project:

Describe the time-line of the project. Funding will be for projects completed in 2021.

Have you previously received funding from Pocahontas County Foundation? If so, when?

FOUNDATION USE ONLY
APPLICANT NO.

	PROJECT COST / EXPENSE	\$ Amount
1.	Total Item/Equipment/Material Cost	
2.	Total Construction Cost	
3.	Total Landscaping/Plant Cost	
4.	Education Program / Community Service Cost	
5.	Other Qualifying Project Cost	
6.	Freight / Delivery Cost (Will not be funded.)	
7.	Labor to Install (Figure @ \$17/hr. Will not be funded.)	
8.	Total Project Expenditures	

	PROJECT REVENUE	\$ Amount
9.	Applicants Own Money	
10.	All Other Income	
11.	In-kind Materials & Services (include labor from above)	
12.	Total Project Revenue	

Please Note: This form will not auto calculate the grant request form. You will need to calculate the figures below to get your request amount.

	CALCULATE TO DETERMINE GRANT REQUEST	\$ Amount
13.	Total Expenditures (enter amount from line 8)	
14.	Less Freight/Delilvery (enter amount from line 6)	
15.	Less Revenue (enter amount from line 12)	
16.	EQUALS GRANT REQUEST AMOUNT	

ITEMIZED COSTS & REVENUE:	\$ Amount

GRANT REQUEST AMOUNT: <i>Dollar listed for item 16.</i> Note: <i>Grant Award will not cover labor and shipping related cost.</i>	
--	--

FOUNDATION USE ONLY

Project is Fully Funded
 Project is Partially Funded
 Project is Not Funded

Amount Funded: _____

Additional Info Needed: _____

NOTES: _____

**ONLY USE IF YOUR AGENCY DOES NOT QUALIFY TO ACCEPT FUNDS:
ONLY ONE COPY NEEDED.**

FISCAL SPONSOR (legal applicant)		DATE
FISCAL SPONSOR CONTACT NAME		
ADDRESS		
CITY	STATE	ZIP
CONTACT PERSON & TITLE		
CONTACT PHONE	CONTACT EMAIL	
SPONSORED ORGANIZATION CONDUCTION PROJECT		
PROJECT NAME		

Legal Applicant/Fiscal Sponsor, hereafter referred to as The Sponsor, has agreed to serve as a fiscal/program sponsor for _____, organization conducting the project, hereafter referred to as the Sponsored Organization, as outlined in the attached application and supporting materials. The Board of Directors of The Sponsor has passed a resolution adopting the Sponsored Organization's project as a program or project consistent with the Sponsor's purpose and mission. The Sponsored Organization's financial activities will be accounted for as a program of The Sponsor for IRS auditing and financial reporting purposes.

Since the Organization is not recognized by the IRS as a charitable tax-exempt entity, The Sponsor must exercise full control over the Sponsored Organization' financial administration, management and disbursement of funds resulting from this grant application. The Sponsor has delegated _____(name of person/s) as responsible for fulfilling of these accounting and reporting functions subject to the ultimate authority of the Board of Directors of The Sponsor. The Sponsor is responsible for ensuring completion of timely reports and submission of necessary financial statements to the Community Foundation's Administrative Office (contact info below). Failure to insure timely reporting on behalf of the Sponsored Organization/Sponsor will also result in a loss of good standing.

This agreement will be in effect from the date of a grant award to support the above-named project until the grant funds are expended and the final report has been submitted and accepted.

We agree to the terms stated above in this agreement:

Legal Applicant/ Fiscal Sponsor Representatives

Signature: _____

Date: _____

Print Name: _____

Sponsored Organization Representative Signature

Signature: _____

Date: _____

Print Name: _____

Attach to this agreement the Fiscal Sponsor's 501(c)(3) Tax-Exempt Determination Letter or comparable proof of charitable exemption. (i.e. a letter from a City, confirming their status as a government entity. Contact our Administrative Office with questions, or for examples of a letter from a City.)