1

# Wyoming Community Foundation Competitive Grant - Spring 2023 - WYCF

Wyoming Community Foundation

### Project Information

## This application is for the Wyoming Community Foundation (WYCF) General Competitive Grant - Spring 2023 Cycle.

Deadline to submit your application: 11:59 pm MT, Wednesday, March 15th, 2023 If you need assistance, please contact program staff at 307-721-8300 or allison@wycf.org

If you intended to apply to a different grant program, please return to the "apply" page to view other available opportunities.

#### 1. Project name\*

If this is a general operating request, please title the request as **General Operating -** [Organization Name].

Character Limit: 100

#### 2. Request amount?\*

How much funding are you requesting from WYCF? Please round up to the nearest dollar amount. Most grant amounts are between \$1,000 and \$10,000, with other amounts occasionally considered. If your request is higher, please contact Programs staff at (307)721-8300.

Character Limit: 20

### 3. Summary\*

Please provide a brief summary or abstract of your proposal.

(expected length: 1-3 sentences)

Character Limit: 250

### 4. Which best describes your request?\*

Select at least one. If uncertain, please see our website here for more information or contact program staff at WYCF to discuss at (307) 721-8300.

#### **Choices**

**Annual Operating Support** 

Capacity Building Project (includes staff professional development)

Re-occurring Program
One-time Program/Project
Capital Campaign
Vital Maintenance/Repairs/Equipment
Other (please describe in the next question)

#### 5. What is the purpose of your request?\*

- 1. What is the problem or community need your project or organization seeks to address? Please show how will you use WYCF grant funding to address this problem.
- 2. How does your program or organization address this need in the long-term?

If requesting **General Operating support**: Please describe what impact your organization has in its target communities, and also detail one key program run by your organization. When requesting General Operating, it is important to avoid naming specific line items in your budget.

(expected length: 4-6 paragraphs)

Character Limit: 5000

#### 6. How will you know if your project is successful?\*

- 1. During the year-long grant period, what goals and/or benefits to the community do you hope to achieve?
- 2. Please include any metrics which will be used to measure progress. *Be specific. Cite expected service numbers.* If this change is not visible in the community, why?

Character Limit: 3000

Printed On: 16 December 2022

Collaboration is significant to successful nonprofit work. Please check all that apply. You will be asked to elaborate on your collaborations, and please note we may contact those listed.

### 7. How do you collaborate in your community?\*

You must select at least one option. It is encouraged that you select any and all options that apply.

#### Choices

Referral or Programmatic Collaboration Financial Collaboration We hope to gain meaningful collaborations in the future

### Collaboration- Programmatic

#### 7a. Referral or Programmatic Collaboration\*

What is the nature of your collaboration or partnering? Which partners are already on board? How will collaborations enhance your chances for success? Please note, we do contact collaborators and discuss the nature of your collaborations.

Character Limit: 2500

### Collaboration- Financial

#### 7b. Financial Collaboration\*

What organizations do you request support from or collaborate with to share resources? If this is a project request, what other organizations are you requesting support from for this project? Please note that in-kind donations can be identified on your project budget, but are not the same as a financial gift.

Character Limit: 3000

Do you plan to use this grant as match for other funding?\*

#### Choices

Yes

No

### Collaboration- Future

7c. Who do you hope to begin a partnership or collaborate with in the future?\*

If there are organizations that you hope to work with for programmatic or financial collaboration, please list them and share why this collaboration would be beneficial.

Character Limit: 3000

### Match Funding

Please elaborate on plans for match funding.\*

### Geography related to services provided

#### 8. Population to be served by organization\*

The Wyoming Community Foundation believes in addressing diversity, equity, and inclusion in grantmaking to best support marginalized and/or underserved communities. Please provide a description of the population you serve and include any of the following: socio-economic base, ethnicity, age range, geographic location, gender, ability, etc. Be as specific as possible and share percentages if/when available.

Character Limit: 5000

## 9. Does your organization work statewide or have statewide impact?\* Choices

Yes

No

### Statewide Impact

9a. Please describe the geographic distribution of your organization's impact.\*

Character Limit: 3000

The Wyoming Community Foundation utilizes several geographically restricted funds in our competitive grantmaking. Below please list the total number of people across the state you expect your organization to provide direct services to over the 12 month grant period, as well as in the following counties: Converse, Natrona, Sheridan, Johnson, Uinta, Sublette, Sweetwater, and Fremont Counties. If it is difficult to predict geographic distribution of impact, please elaborate above.

Total number of individuals to be impacted throughout the State of Wyoming\*

Character Limit: 7

Total number of individuals to be impacted in Converse County\*

Character Limit: 7

Total number of individuals to be impacted in Fremont County\*

Character Limit: 7

Total number of individuals to be impacted in Johnson County\*

Character Limit: 7

Total number of individuals to be impacted in Natrona County\*

### Total number of individuals to be impacted in Platte County\*

Character Limit: 7

Total number of individuals to be impacted in Sheridan County\*

Character Limit: 7

Total number of individuals to be impacted in Sublette County\*

Character Limit: 7

Total number of individuals to be impacted in Sweetwater County\*

Character Limit: 7

Total number of individuals to be impacted in Uinta County\*

Character Limit: 7

Total number of individuals to be impacted in South Big Horn County\*

(Greybull, Burlington, Otto, Basin, Manderson, Hyattville)

Character Limit: 7

### County Level Impact

## 9a. If you selected "No" above, what counties will be affected if grant funds are awarded?

Choose all that apply.

#### Choices

**Albany County** 

**Big Horn County** 

**Campbell County** 

**Carbon County** 

**Converse County** 

**Crook County** 

Fremont County

**Goshen County** 

**Hot Springs County** 

Johnson County

**Laramie County** 

Lincoln County

Natrona County

Niobrara County

Park County

**Platte County** 

**Sheridan County** 

**Sublette County** 

**Sweetwater County** 

Teton County Uinta County Washakie County Weston County

Below please list the number of people in each county selected above that you expect to DIRECTLY impact with this project in the span of 12 months. If this is a general operating request, these numbers should reflect people impacted by your organization's services in general. If the nature of the work/project makes it difficult to answer these questions, please contact Program staff at WYCF to discuss.

### Albany County

How many people in this county are expected to be **directly** impacted by the project or as a result of receiving a grant?

### **Albany County**

Character Limit: 7

### Big Horn County

How many people in this county are expected to be **directly** impacted by the project or as a result of receiving a grant?

### **Big Horn County**

Character Limit: 7

### Will your organization be serving any of the following towns:\*

Greybull, Burlington, Otto, Basin, Manderson, Hyattville

**Choices** 

Yes

No

### Campbell County

How many people in this county are expected to be **directly** impacted by the project or as a result of receiving a grant?

### **Campbell County**

### Carbon County

How many people in this county are expected to be **directly** impacted by the project or as a result of receiving a grant?

### **Carbon County**

Character Limit: 7

### Converse County

How many people in this county are expected to be **directly** impacted by the project or as a result of receiving a grant?

#### **Converse County**

Character Limit: 7

### Crook County

How many people in this county are expected to be **directly** impacted by the project or as a result of receiving a grant?

### **Crook County**

Character Limit: 7

### Fremont County

How many people in this county are expected to be **directly** impacted by the project or as a result of receiving a grant?

### **Fremont County**

Character Limit: 7

### Goshen County

How many people in this county are expected to be **directly** impacted by the project or as a result of receiving a grant?

### **Goshen County**

Character Limit: 7

### Hot Springs County

How many people in this county are expected to be **directly** impacted by the project or as a result of receiving a grant?

### **Hot Springs County**

Character Limit: 7

### Johnson County

How many people in this county are expected to be **directly** impacted by the project or as a result of receiving a grant?

#### **Johnson County**

Character Limit: 7

### Laramie County

How many people in this county are expected to be **directly** impacted by the project or as a result of receiving a grant?

### **Laramie County**

Character Limit: 7

### Lincoln County

How many people in this county are expected to be **directly** impacted by the project or as a result of receiving a grant?

### **Lincoln County**

Character Limit: 7

### Will services be provided in the City of Kemmerer directly?\*

#### Choices

Yes

No

### Natrona County

How many people in this county are expected to be **directly** impacted by the project or as a result of receiving a grant?

#### **Natrona County**

Character Limit: 7

### Niobrara County

How many people in this county are expected to be **directly** impacted by the project or as a result of receiving a grant?

#### **Niobrara County**

Character Limit: 7

### Park County

How many people in this county are expected to be **directly** impacted by the project or as a result of receiving a grant?

### **Park County**

Character Limit: 7

### Platte County

How many people in this county are expected to be **directly** impacted by the project or as a result of receiving a grant?

### **Platte County**

### Sheridan County

How many people in this county are expected to be **directly** impacted by the project or as a result of receiving a grant?

#### **Sheridan County**

Character Limit: 7

### Sublette County

How many people in this county are expected to be **directly** impacted by the project or as a result of receiving a grant?

### **Sublette County**

Character Limit: 7

### Sweetwater County

How many people in this county are expected to be **directly** impacted by the project or as a result of receiving a grant?

### **Sweetwater County**

Character Limit: 7

### Are services directly provided in Wamsutter?\*

#### Choices

Yes

No

### Teton County

How many people in this county are expected to be **directly** impacted by the project or as a result of receiving a grant?

### **Teton County**

### **Uinta County**

How many people in this county are expected to be **directly** impacted by the project or as a result of receiving a grant?

#### **Uinta County**

Character Limit: 7

### Washakie County

How many people in this county are expected to be **directly** impacted by the project or as a result of receiving a grant?

#### **Washakie County**

Character Limit: 7

### Weston County

How many people in this county are expected to be **directly** impacted by the project or as a result of receiving a grant?

### **Weston County**

Character Limit: 7

### Organization Information

The following information about your organization can be imported directly from GuideStar.org (GS). To import from Guidestar, please hover your mouse over the star symbol of each section. Information can be edited after import. If you do not have a GS profile, you may manually input this information. WYCF uses GS as part of our due diligence process to confirm your nonprofit status. We recommend updating your GS profile annually.

#### 10. EIN\*

Character Limit: 250

### 11. Mission statement\*

Character Limit: 500

#### 12. Website URL\*

Please include the link to your organization's website and/or facebook page below.

Character Limit: 5000

### 13. Are you using a fiscal sponsor?\*

If yes, you will be asked to provide the contact's email address and they will be asked to confirm. An organization using a fiscal sponsor is operating under the EIN of another non-profit organization.

Organizations applying using a fiscal sponsor must provide financial documents relating to both the organization and the fiscal sponsor. This includes an operating budget, income statement, and balance sheet for both, if available. We encourage organizations using a fiscal sponsor to contact WYCF staff to discuss and clarify any questions at 307-721-8300.

#### Choices

Yes

No

#### 14. Number of full-time staff\*

This is one way to help WYCF understand the capacity of your organization. You are not required to have staff. If a board member or volunteer is submitting this application then list **0**.

Character Limit: 100

#### 15. Number of part-time staff

Character Limit: 100

#### 15. Board member list

Please upload a current list of your board members and include their place of employment (if applicable). *Municipalities/school districts are not required to provide this.* 

File Size Limit: 1 MB

#### 16. Board member contributions\*

Having a board that is supportive of your organization demonstrates belief in the mission. What **percentage** of your board members make a financial contribution(s) **of any size** to your organization on an annual basis?

#### Choices

0-24%

25-49%

50-74%

75%-100%

We do not have a board

#### 17. Please elaborate on board member contributions

If you answered 0%-49% to the previous question, please share any reasons why your organization's board contributions are lower than expected. This information will provide important context to WYCF's board when considering your application.

Character Limit: 5000

#### 18. This question is to help you and your organization confirm eligibility.\*

### Financial Information

Please do not upload your Form 990 and do not upload duplicate financial documents.

#### 20. Fiscal year start date\*

Example: if your organization's fiscal year runs from July to June, please list 'July 1'.

Character Limit: 250

#### 21. Fiscal year end date\*

Character Limit: 250

#### 22. Project budget sheet

Please upload your project budget sheet (required unless your request is for general operating support).

File Size Limit: 3 MB

## The organization budget, income statement, and balance sheet attachments should reflect an entire, complete fiscal year.

For example, if your fiscal year ends December 31st, please upload an Income Statement reflecting Jan-Dec 2021 rather than the last 11 months.

### 23. Organization budget\*

Please upload the most current board approved annual operating budget. *Municipality/school district, please upload a statement indicating that you are a municipality/school district as we do not want the budget that large.* 

File Size Limit: 5 MB

#### 24. Income statement\*

Please upload a copy of your most recent fiscal-year end income statement. This document may also be called a profit and loss (P&L) statement or a statement of financial activities. *Municipality/school district, please upload a statement indicating that you are municipality/school district as we do not want a budget that large.* 

We would like a full year of financial documentation.

File Size Limit: 5 MB

#### 25. Balance sheet\*

Please provide a copy of your most recent balance sheet.

File Size Limit: 5 MB

#### 26. Budget Narrative

Please describe any line items on your budget that might raise questions. Refer to the instructions on our website if unsure.

Character Limit: 5000

## 27. Please confirm that the financial statements uploaded reflect a full, completed fiscal year.\*

If your organization is a school district/municipality or if your organization's 501(c)3 status was granted less than a year ago, select 'no'. Again, If your fiscal year ends June 30th, we need statements reflecting the most recently completed fiscal year rather than the most recent 11 months.

#### Choices

Yes

No

### 28. Subject-matter tracking\*

This question is for WYCF tracking purposes and will have no impact on your application being awarded or declined.

### 29. Subject-matter tracking\*

This question is for WYCF tracking purposes and will have no impact on your application being awarded or declined.

If applicable to your organization's work, below are helpful links to resources offered by the Wyoming Community Foundation and its priority funds.

Wyoming Women's Foundation Self-Sufficiency Standard
Wyoming Community Foundation's Kids Count Data
Wyoming Afterschool Alliance Resources for education and afterschool programming

### Fiscal Sponsorship

### Third Party Email\*

If you are using a fiscal sponsor, please enter the email address of their CEO/Executive Director.

This question will have you write a brief email to the recipient. The purpose is so you can inform them in your own words that you are listing them as the fiscal sponsor and that they will need to confirm with us. This person will receive two emails: the one you wrote and another containing the link to the confirmation form.

Character Limit: 254

### Additional Information

#### 30. Additional information

You are welcome to provide additional information that might strengthen your request, but was not covered by the application; or upload any specific materials that WYCF staff or board may have requested from you in past requests.

Character Limit: 2000 | File Size Limit: 2 MB

#### 30a. Additional Document Upload Space (optional)

File Size Limit: 4 MB

#### You have reached the end of the application.

Please know that you will not be able to make any edits after clicking "Submit". It is recommended that applicants double check their application for mistakes before submitting.

Additionally, you will be notified regardless of whether your request is approved or denied.

Notifications will be sent to all applicants on **June 15th, 2023**. The notification and other grant-related emails will come from "administrator@grantinterface.com". Please add this address to your contacts so you do not miss any important information! You will not be sent any advertisements, spam, or other irrelevant emails from this address.

#### How are we doing?

Printed On: 16 December 2022

We are always striving to improve our processes. Please let us know how we're doing by filling out this short, anonymous survey.

Thank you!