



sweet grass
COMMUNITY
FOUNDATION

2019 GRANT APPLICATION COVER SHEET

Deadline: Friday, March 15th

Name of Organization: _____

EIN#: _____

Mailing Address: _____

Contact Person & Title: _____ **Email:** _____

Total Organization Budget: _____

Type of Organization: (Please check one of the following)

- 501(c)(3) Organization (Attach Your Determination letter from the IRS)
- Publicly-Owned Tax Exempt Organization

Amount Requested: \$ _____ **Total Project Cost:** \$ _____

Is this a recurring expense? Y N

Please include a brief, one sentence description of your proposed project:

Authorized Signature: _____

Date: _____

Title: _____



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Sweet Grass Community Foundation

Grant Application

Cultivate generosity, simplify giving, build endowments, and distribute funds to benefit the community.

Our focus is to bring together local organizations and resources to enhance our community.

Eligibility Applicants must be tax exempt under the provisions of Section 501(c)3 of the Internal Revenue Code or a publicly-owned tax exempt organization.

About the Grants

- Grant size up to \$1,500
- Grants must be used for proposed activity/work benefitting Sweet Grass County
- Grant requests are reviewed by a committee and approved by the board of Sweet Grass Community Foundation
- Incomplete applications will not be considered

Other Criteria

Higher priority will be given to projects that:

- Address important, unmet needs
- Long term and/or substantial community impact
- Enjoy support from community members
- Have sustainable funding
- Will be completed within one year of grant award

Ineligible proposed projects:

- Sponsorship of 1 time event
- Conferences and workshops
- Planning, research or untested projects
- Partisan or sectarian activities

What is Required in the Application Package

- Grant application cover sheet
- Mission Statement
- Proposal narrative (See description below)
- Organizations funding sources
- Copy of 501c3 designation letter or, if publicly-owned tax exempt organization, proof thereof
- Roster of board members

Proposal Narrative Description (2 Page Maximum)

- Briefly describe the proposed activity. Be as specific as possible.
- Who will benefit from the proposed activity?
- What impact will the project have in Sweet Grass County?
- Budget Summary – Include the Following
 - Amount of this Request
 - Amount of Other Confirmed Funding
 - Total Cost for Proposed Activity/Work

Completed Applications

- Application packages must be received by March 15
- Complete online or Mail a copy of the package to:

Sweet Grass Community Foundation
PO Box 517
Big Timber, MT 59011

Grant Cycle Schedule

Deadline	Grants Awarded
March 15	April

For Questions

Please contact the Committee Chair at grants@sweetgrasscf.org

For more about Sweet Grass Community Foundation, please check out our website at www.sweetgrasscf.org



*Lobbying any employee of SGCF, the Committee, or Board Member before, during or after the grant has or has not been awarded is strictly forbidden. This will jeopardize a grant in progress or any future grant request. Committee members, Board Members and employees are not permitted to discuss grant applications with anyone outside SGCF.