

Letter of Inquiry Sample Questions - Grant Cycle 4 - 2022-2023

Grant Guidelines & Eligibility

1. To apply for an Impact Central Illinois grant, an organization must meet ALL Eligibility Requirements.

I have read the 2023 Eligibility Requirements and Grant Guidelines and the Grant FAQs on the website and understand what Impact Central Illinois will fund and will not fund. By checking the items below, I confirm our organization's eligibility to apply.

- Our organization is classified as a "Public Charity" with tax exempt status, in good standing, under Section 501(c)(3) of the Internal Revenue Code for a minimum of 36 months prior to applying for the grant.*
- We provide services in Peoria, Tazewell, and/or Woodford County.*
- We agree to use the full amount of the grant within 24 months.*

2. Any 501(c)3 organization satisfying the grant guidelines and with a program within the scope of our funding guidelines may apply for funding to support social outreach and charitable service programs that benefit the community at large. Impact Central Illinois does not require the organization to refrain from incorporating its foundational ideology of justice and charity in its program methodology, activities, or facilities which serve the community at large. However, as a collective giving organization, Impact Central Illinois reserves the right to determine the grant recipients based upon full disclosure of that ideology.

Please disclose the following information:

- Is participation in the program restricted to certain individuals in any way? This may include restricting participation in the program/project to adherents/members of a particular community, race, color, ethnicity, nationality, political orientation, religious affiliation, marital status, age, gender, or other designation. Please explain.
- Does the program require a written or signed document stating belief of a particular ideology in order to participate in the proposed program/project? Please explain.
- Does the program require the participants to join a particular community, political party, or religious affiliation prior to receiving the benefits of the program? Please explain.

- Does the program require the participants to actively engage in public displays of support or worship as a condition of receiving the benefits of the program? Does the program provide an option for those participants who wish to refrain? Please explain.

3. Impact Central Illinois grants may not be used to fund any of the following:

- Debt reduction
- Endowments/memorials
- Bridge funding or interim financing
- Operational deficits
- Partisan, political lobbying or legislative activities
- Fundraising activities or events where the sole purpose of the activity or event is to raise additional operating funds for the organization
- Private Foundations
- Advertising where the sole purpose of the advertising is to raise the profile of the organization within the community for the primary reason of meeting fundraising goals
- Litigation/legal expenses

By checking this box, I confirm our organization agrees that the project being proposed for funding from the Impact Central Illinois grant will not be used for any of the above stated purposes.

4. Impact Central Illinois will only fund capital projects to improve property owned by the applicant organization or leased by that applicant with a minimum of 5 years remaining on the lease as of January 1, 2023.

- By checking this box, I confirm our organization owns or has signed a long term lease with a minimum of 5 years remaining on all property being proposed for the capital improvements we are asking to be funded by the Impact Central Illinois grant.*
- By checking this box, I confirm this is not applicable to our organization's project or program being proposed on this Letter of Inquiry.*

5. Is there any pending litigation involving your organization or have there been any legal judgments against your organization in the past three years? If yes, please explain.

6. Please share your organization's net income for the past three (3) fiscal years. Please briefly explain the net income trajectory over the past three (3) fiscal years, highlighting any material increase or decrease which occurred.

Organization Profile

1. Organization Name (Agency Profile)
2. Legal Name of Organization:
3. Website
4. Federal EIN
5. Organization Mission Statement:
6. Month and Year Founded - *Organization must have been in operation and have held its 501(c)(3) status for a minimum of 36 months prior to the Letter of Inquiry due date.*

NOTE: You will be asked to attach a copy of your IRS charitable status determination letter to this Letter of Inquiry before submission is complete.

7. Organization Mailing Address - Street, City, State, Zip Code
8. Organization Phone Number
9. List all Board Members and Titles
10. Primary Contact Name and Title - *This will be the person contacted if there are any questions about your Letter of Inquiry.*
11. Primary Contact Email Address
12. Primary Contact Phone Number
13. Total Reported Operating Revenues for the Last Full Fiscal Year
 - *If over \$250,000, you qualify for the Impact Grant.*
 - *If less than \$250,000, you qualify for the Inspire Grant.*

Should you be invited to the Full Grant Application Phase, you will be asked to submit the following financial documents:

- *A copy of the three most recently filed IRS Form 990s (990, 990-N, 990EZ).*
- *A copy of the three most recent audits, if audit eligible.*
- *A copy of three years of financial statements. (Balance Sheet, Income Statement OR Statement of Financial Activity, Statement of Financial Position)*

Proposed Project or Program Information:

1. Name of the Project or Program for which you are seeking funding. *(This title will be shared with the Impact Central Illinois membership on the Final Voting Ballot should your project or program be selected as a finalist.)*
2. Select one of the following Grant Types that aligns with your organization's total operating revenue for the most recent fiscal year.
 - a. *Inspire Grant* - this grant is reserved for nonprofit organizations with an annual operating revenue of less than \$250,000 in the most recent fiscal year.
 - b. *Impact Grant* - this grant is reserved for nonprofit organizations with an annual operating revenue of greater than \$250,000 in the most recent fiscal year.
3. Select one of the following Focus Areas that best fits your project.
 - a. *Health & Community Wellbeing*- caring for the holistic health of the people in our community through projects which address mental & physical health, environmental health, therapeutic animal programs, addiction & recovery, healthcare access & advocacy, recreational opportunities and public safety in our community.
 - b. *Education & Community Development* - supporting the development of talent within our community through projects which address educational outcomes, youth development, early childhood development & childcare, career development, job readiness, community leadership, cultural and arts advancement and civic engagement.
 - c. *Social Services & Basic Needs* - caring for basic needs within our community through projects which address adequate and affordable housing, eviction & homelessness prevention & support, recidivism prevention & support, domestic violence case management & family support, child abuse, foster care & adoptive services, crisis intervention, and hunger & food security
4. A total Project or Program Budget, in the amount of \$X,XXX or greater, needs to be submitted with this Letter of Inquiry. The budget amount must be used within a 24 month period.
5. This grant will support: (Please check only one)
 - o An existing program(s)*
 - o The expansion of an existing program(s)*
 - o A new project or program*
 - o Capital improvement(s)*
 - o A combination of the above*
6. Program Partnership – If the proposed program is a partnership of two or more non-profits, share the roles each will have in the delivery of the program services and explain the oversight of the program. (75 words or less)
 - a. List any for-profit organizations supporting the program and their role.(if applicable)
7. In 75 words or less, provide a summary of your Proposed Project or Program. *(This summary will be shared with the Impact Central Illinois membership on*

- the Final Voting Ballot should your project or program be selected as a finalist.)*
8. Impact Central Illinois supports programs or projects proposed by **Highly Capable** organizations to address **Measurable Needs** within our community with **Innovative Solutions**. In 200 words or less, provide a high level response to the following questions.
 - a. Why is your organization Highly Capable of completing your proposed project?
 - b. What is the Measurable Need existing within our community which is driving your desire to complete your proposed project?
 - c. Why do you consider your proposed project to be an Innovative Solution for our community?

Required Submission Attachments & Approval:

1. Project or Program Budget

NOTE: The Project or Program Budget form can be accessed from the Letter of Inquiry section on the Apply for a Grant page of the Impact Central Illinois website. The Project/Program Budget must be uploaded with your Letter of Inquiry to complete submission.

2. Copy of your IRS charitable status determination letter. 501(c)(3) tax exempt status must be in good standing.

NOTE: An Illinois sales tax exemption letter WILL NOT BE ACCEPTED as proof of your 501(c)(3) status.

Executive Director's Approval: I certify that I reviewed this Letter of Inquiry along with the Impact Central Illinois Eligibility Requirements and Grant Guidelines prior to submission, and the information provided in the application is accurate and verifiable.

- Please provide name and title to indicate approval.