

Pivoting to Respond Grant

Community Foundations of the Hudson Valley

Pivoting to Respond Grant Guidelines

The Community Foundations of the Hudson Valley recognizes the impact Covid-19 has had on our community and the nonprofit sector and is pivoting our Community Grants program to support recovery efforts.

The Pivoting to Respond Grant Program replaces our Community Grant programs for Dutchess, Putnam and Ulster Counties for the 2020/2021 cycle.

Funding Available:

It is anticipated that a minimum of \$100,000 will be available to grant.

We recognize the needs far surpass our available resources. Please understand that we will not be able to grant many of the requests we receive.

Awards:

Grants made through this program will not exceed \$10,000 per organization.

Deadline:

The Community Foundations will be accepting applications from **July 15th through August 31st.**

The Community Foundations' **Pivoting to Respond Grant Program** is a one-time opportunity to provide nonprofits and communities disproportionately impacted by Covid-19 and its economic consequences with unrestricted **General Operating Support (GOS)** funding to achieve their missions. GOS grants are flexible and allow funds to support an organization's ongoing administrative and infrastructure costs and to maintain existing, effective programs. While our longstanding Community Grant program focused on capacity building, training, development and program support, this grant cycle will focus on mission, impact, planning and recovery. Funding will support a broad variety of organizations and programming. Funding will have a focus on benefiting people who are from historically marginalized, under-served and under-resourced communities or populations based on their race, ethnicity, age, gender/gender identity, socioeconomic status, health status, abilities or geographic location.

Eligibility:

- Tax exempt organizations located in or providing services to Dutchess, Putnam and Ulster Counties, New York.
- Have been operating as a nonprofit organization for **at least one year** with 501(c)(3) status or an established fiscal sponsorship arrangement with a 501(c)(3) nonprofit.
- Are actively engaged in planning for the future.
- Can demonstrate financial resiliency.

Funding priority will be given to organizations serving communities of color, low-income, rural/geographically isolated, LGBTQIA+, individuals with disabilities, refugees, immigrants, or other historically marginalized, under-served and under-resourced communities or populations.

Please note that grants are not given to support:

- Political or partisan purposes
- Annual fund or campaign appeals
- Loan reimbursements for capital projects already underway or completed
- Endowments
- Private operating foundations
- For-profit organizations
- Religious organizations* *Please note grants may be made to support non-religious, community focused programs provided through religious/faith based organizations*
- Schools* *Please note grants may be made to support student/teacher community service programs targeted to assist community needs*

Review Criteria:

While this list is not exhaustive, the Foundations considers applications with the following criteria in mind:

- **Organization Feasibility:** Clearly demonstrates an ability to accomplish a proposed recovery plan, is viable in the long term and secures other sources of financial and in-kind support
- **Community Need/Opportunity:** Fosters trust and collaborative civic participation in addressing a vital community need and collectively improves community conditions
- **Diversity, Equity and Inclusion:** Develops and maintains community connections for the underserved & economically diverse; Incorporates diverse cultures, philosophies & experiences across their organization/programming

To avoid losing work, click on the "Save As Draft" button located at the top and bottom of the page at least once per hour. We recommend saving your application after attaching each

document to the application. Before submitting your completed application ***we strongly suggest*** that you click on "**Application Packet**" at the top of the page. This will allow you to create and save a PDF of your application and all attachments for your records and/or for you to share with others. You will also be able to view if all of your attachments are displaying the information correctly.

Please check your spelling, grammar and math!

Please note that we have intentionally left the character limits of the narrative sections of the application at their maximum size. Applicants do not need to fill the entire space unless needed.

If you have questions, please contact the Community Foundations at **(845) 452-3077** or email **grants@communityfoundationshv.org**.

Project Name*

Name of Project

Character Limit: 100

Organization Information

Tax Status*

Select the organization's tax status from the list below.

Choices

501(c)(3)

Faith-based Institution

Educational Institution

Governmental Institution

Other

Not a nonprofit organization but have a fiscal sponsor

If Other Status (Description)

If you selected other, describe the organization's non-profit status. If you are fiscally sponsored, specify the name of the organization that acts as a fiscal sponsor for the applicant organization.

Character Limit: 1500

Fiscal Sponsor Attachment

If utilizing a Fiscal Sponsor, please submit your Fiscal Sponsor Agreement or a letter from the sponsor stipulating that they have agreed to serve in this capacity.

File Size Limit: 1 MB

Organization's Purpose or Mission*

Provide a brief statement of the organization's purpose or mission. The mission statement should be a clear and succinct representation of the organization's purpose for existence.

Character Limit: 6000

History and Current Programs*

Please briefly describe your organization's history and current programs.

Character Limit: 10000

Years in Operation*

Please provide how many years your organization has been in operation.

Character Limit: 250

Geographic Service Area (Description)*

Briefly indicate the geographic service area of the organization as a whole. (City, Counties, Region, etc.)

Character Limit: 5000

Population Served (Description)*

Briefly describe the primary population served by the organization.

Character Limit: 8000

Population Served (# of People Served)*

Please provide us with the number of people served annually by the organization.

Character Limit: 10

Community Need*

Please describe the community need or opportunity your organization addresses.

If you are seeking data to support your application, please visit the MHV Community Profiles website mhvcommunityprofiles.org which contains comparative data on a variety of topics for our region.

Character Limit: 10000

Organizational Capacity - Board, Staff and Volunteers

Board*

Describe the structure, knowledge, engagement and support of your Board of Trustees/Directors or Governing Body.

Character Limit: 10000

Board/Governing Body List Attachment*

Please upload the names of current Board of Directors/Trustees/Governing Body and their occupations/affiliations.

File Size Limit: 1 MB

Staff*

Describe the current staffing structure of your organization including the current number of staff (full and part time).

Character Limit: 10000

Volunteers*

Describe the role of volunteers at your organization.

If your organization is run entirely by volunteers or they play a key role in service delivery, please detail the number of volunteers and how they perform the core functions for the organization to operate.

Character Limit: 10000

Diversity, Equity and Inclusion

Statement of Commitment to Diversity, Equity and Inclusion

If your organization has a board approved statement of its commitment to diversity, equity and inclusion, racial equity, racial justice or anti-racism, please include it here.

Character Limit: 2000

Does your organization primarily serve disproportionately impacted communities (including communities of color, low-income, rural/geographically isolated, LGBTQIA+, individuals with disabilities, refugees, immigrants, or other vulnerable or historically underserved populations)?*

Choices

Yes

No

Please describe the specific populations served and include how your Board, staff and/or volunteers represent and involve these populations in your decision-making processes.*

Character Limit: 10000

Describe how your organization works or is working towards promoting diversity, equity, and inclusion within your programs, staff, board, and/or volunteers.*

Character Limit: 10000

Impacts of COVID-19

Impact of COVID-19 on Organization*

Describe the impact COVID-19 has had on your organization's ability to fulfill its mission. *(Examples may include cancellation of programming, fundraising events, increased or decreased demand for services, staffing needs increased/decreased - layoffs or furloughing of staff, increased costs for health, safety or technology, funding cuts, etc.)*

Character Limit: 10000

COVID-19 Related Support*

Describe any support you have received to sustain your organization during the last several months of the pandemic. This may be in-kind (rent relief, volunteers), state and/or federal aid, foundation grants, loans, etc.

Character Limit: 10000

Financial Outlook*

What is your financial outlook for the next year?

What kinds of gaps are you anticipating or have confirmed?

What additional resources, if any, do you have to support your needs (cash reserves, endowment, loans, federal/state relief funds, etc.)?

Character Limit: 10000

Client/Community Impact*

Describe the anticipated impact to your clients and/or community if your current financial need is not met?

Character Limit: 10000

12 Month Goals*

While so much is still uncertain during this time, describe the plans or goals your organization is committed to achieving during the next year.

For example, this may be re-activating a program that has been on hold, sustaining a program at a limited capacity or increasing your impact.

Character Limit: 10000

Budget

Organizational Budget*

What is your organization's total operating budget for the current year (prior to any COVID-19 impacts)?

If you are a regional serving organization please provide the budget figure that reflects your work in Dutchess, Putnam and/or Ulster County. General Operating Support grants must still be targeted to programs and populations in our service region.

Character Limit: 20

Revised Organizational Budget due to COVID-19

If you have made changes to your organization budget due to COVID -19 please indicate the revised figure here:

Character Limit: 20

Budget Attachment*

Please upload a copy of your most recent organizational budget here.

File Size Limit: 4 MB

Budget Narrative

Please include a budget narrative, if needed, to explain any financial circumstances or to provide context to the budget attached.

Character Limit: 10000

Grant Request

Counties Served*

Please select the counties where your organization provides services. *(Select all that apply)*

Choices

Dutchess

Putnam

Ulster

Grant Amount Requested*

Organizations may ask for up to \$10,000.

Partial funding may be granted.

Character Limit: 20

Impact of Funding*

Describe the overall impact you anticipate if you receive funding.

While our grants are modest in size, describe how this support may help you position your organization towards greater financial, programmatic, and operational sustainability.

Character Limit: 10000

Attachments

Additional Attachment 1

Attach any additional relevant materials relating to the grant request here.

File Size Limit: 3 MB

Additional Attachment 2

File Size Limit: 3 MB

Other Information

Is there any other relevant information we might need to better understand the request?

Character Limit: 10000

Certifications

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By entering the signature information of the organization's Executive and clicking "I Agree" below, you certify that the Executive of the organization has reviewed and approved this application, and the statements contained in this application are true and correct to the best of your/their knowledge and belief.*

Choices

I Agree

I Do Not Agree

Organization Executive Authorization (Electronic Signature)*

Enter the organization Executive's full name, business title and the date of submission (e.g. Alex Perez, Executive Director, 9/15/2020).

Character Limit: 100