

Carrie Winter Charitable Trust Grant Application Procedures and Guidelines

The Carrie Winter Trust was established to provide funds to benefit the youth of Richland County.

Funds are distributed semi-annually during the months of May and November.

To be considered for grant funds, applications **must be received** at the Trustee's office by end of business on **May 1** for the first period
And
November 1 for the second period.

If May 1 or November 1 should fall on a Saturday or Sunday,
Applications are due the **next** business day.

The Carrie Winter Trust is administered by the

First National Bank in Olney Trust Department
101 E. Main St. • PO Box 100
Olney, IL 62450

with the guidance of an Advisory Committee in accordance with the terms of the trust. The Advisory Committee includes a four member committee, with one individual representing each of the following organizations:

Richland County Bar Association
Olney Rotary Club
Dundas Ruritan Club and
Olney PEO.

The Advisory Committee will review all of the qualified grant applications for any given funding cycle. They will evaluate the quality and merit of each proposed project or activity as well as the community presence and reputation of the organization submitting the request. All applicants will be notified in writing of the Committee's decisions.

The Carrie Winter Trust is a private foundation within the meaning of Section 509(a) of the Internal Revenue Service Code, and it is a recognized tax-exempt organization under Section 501(c)(3). A copy of the Trust's IRS determination letter is available on request.

**Carrie Winter Charitable Trust
Grant Application Basic Information Form**

1. Organization/Group Applying:

Name: _____ FEIN: _____

Address: _____

City: _____ State: _____ Zip: _____

Contact Person: _____

Address of Contact Person: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Fax: _____ Email: _____

2. This organization is: (check all that apply)

<input type="checkbox"/> Recreation/Club Organization	<input type="checkbox"/> Non Profit Organization
<input type="checkbox"/> Religious/Charitable/Educational	<input type="checkbox"/> For Profit Organization
<input type="checkbox"/> Corporation	<input type="checkbox"/> Tax-Exempt, 501(c)3 entity
<input type="checkbox"/> Informal Group	<input type="checkbox"/> Tax Supported Entity
<input type="checkbox"/> Other _____	

3. Explain the project for which you are requesting funding: _____

4. Amount of funding requested: \$ _____

Will you accept partial funding? Yes No

Is this a multiyear project? Yes No

5. How many Richland County youth are involved in the project for which you are requesting funding? _____

6. Does your project benefit Richland County Youth only? Yes No

If no, what percentage of Richland County Youth? _____ %

7. What is the age range of youth involved for this project? _____

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8. Have you applied for funds in the past? Yes No First time applicant?

9. What is your mission statement/objective? _____

10. How long has the Applicant been operating? _____

11. Total # of Organization's Board Members: _____ Total # of staff: _____

 Total # of volunteers: _____ Not applicable

12. What type of organizational documents do you have? _____

13. What is the date of your organizational document? _____

14. When was the organizational document last revised or approved by the Board? _____

15. How many people are required to make a decision? _____

16. Who is authorized to make distribution of the assets or funds? _____

17. How are distributions decided? _____

18. Does distribution require more than one signature? Yes No

19. Are you bonded? Yes No

20. Do you have a set quorum? Yes No

21. Do you have regular meetings? Yes No

22. How often do you have meetings? _____

23. When was your last meeting? _____

Grant Application checklist of required information; please submit in the following order:

- Basic Information Form Page 1 & 2
- A brief narrative describing the project and/or program for which funding is being requested, including an assessment of need, primary beneficiaries, plans for implementation, other sources of funds and means of assessing results.
- A brief statement describing the organization's history, activities, objectives and purposes.
- An itemized budget for the proposed project, including a statement of amount of organization's own funds that will be applied to the project.
- A list of the organization's principal officers and/or directors, including addresses and phone numbers; if not an organization, a list of applicant's controlling person/persons, including addresses and phone numbers.
- If you are a tax exempt organization, you must submit a photocopy of your IRS determination letter confirming your status as a tax exempt organization.
- The signed grant application certification stating the information in the application is correct and accurate. (Note: Form is included in this application packet.)

ALL APPLICATIONS MUST ADHERE TO THE FOLLOWING PROCEDURES TO BE CONSIDERED FOR FUNDING

Failure to submit all required documentation and follow all funding procedures may result in rejection of your organization's application.

- All applicants' programs/projects must benefit the youth of Richland County, Illinois.
- All applications are limited to a maximum of 15 pages.
- All applications must include all required items listed in the above grant application checklist in exact format and a signed copy of the grant application certification as the last page.
- All applications must be submitted in five (5) identical copies.
- Each copy of the application must be stapled-no paper clips, covers or folders of any type. No cover pages.
- The grant deadline dates and times will be strictly adhered to, based on the date and time received in the offices of the Trustee, not based on date mailed.
- **Please do not submit the Illinois Department of Revenue Retailers' Occupation Tax Exemption letter or the Illinois Sales Tax Exemption Certificate. Any application that includes these documents or documents related to sales tax exemption will not be considered for funding for this grant period.**

GRANT APPLICATION CERTIFICATION

I hereby certify that:

- The information set forth in this grant application and the supporting documentation is correct.
- The Internal Revenue Service 501(c) (3) determination letter (if applicable) has not been revoked, cancelled or modified and is included in this application.
- All funds received pursuant to this grant request will be applied to the project or program as described in this application or returned to the Trustee.
- Within 9 months of being awarded a grant from the Carrie Winter Trust Fund, the organization will file a report with the Trustee detailing the use of the grant funds together with a narrative of the effects of the grant on the beneficiaries of the recipient.
- If requested by Trustee, the Applicant agrees to provide the Trust additional supporting documentation prior to disbursement of funds to Applicant.
- If requested by Trustee, Applicant may be required to enter into a separate agreement with Trustee regarding Applicant's assets upon dissolution of the Applicant.

Date: _____

Signature

Printed Name

Position/Title

(This signed form must accompany grant application request as the last page.)