# 2024 MCCF City Challenge Grant Application Summary

**MAHASKA COUNTY COMMUNITY FOUNDATION**

**Building a Firm Foundation for the Future**

PO Box 207, Oskaloosa IA 52577 • [www.MahaskaFoundation.org](http://www.MahaskaFoundation.org/) • GrantAdmin@mahaskafoundation.org

**Organization conducting project: Grant Request: Total Project Expense: Organization Address:**

## Contact Person:

**Phone & Email Address:** **Type of Project: ** **Capital** (Building of or physical improvement of something)  **Program** (Operational, activity, equipment, general support) **Brief Project Summary:**

## ------------------------------- For Review Committee Notes and Scoring – Do not write below this line ------------------------------

**Notes**

|  |
| --- |
| **Grant Award History** |
| **SCORING** | **POINTS POSSIBLE** | **POINTS GIVEN** |
| **Planning** | **20** |  |
| **Demonstrated Need/Public Demand** | **20** |  |
| **Partnership/Local Support** | **10** |  |
| **Leveraged Activity/Matching Funds** | **20** |  |
| **Creativity/Innovation** | **5** |  |
| **Sustainability** | **5** |  |
| **Feasibility, Timeline & Budget** | **5** |  |
| **Impact/Benefits** | **15** |  |
|  |  |  |
| **TOTAL** | **100** |  |

**2024 MCCF Grant Application – Introduction**

**Mission Statement:** The mission of the Mahaska County Community Foundation (MCCF) is to assist local organizations to accomplish great things in Mahaska County. To do so, it will promote endowment building, community development, grant making, organizational collaboration, and public leadership for the benefit of Mahaska County’s residents.

**What we support:** MCCF is made up of community-minded individuals who have the ability to assess community needs, implement asset development, evaluate area grant applications, encourage partnerships and initiate activities to enhance Mahaska County. Each year the Foundation makes grant awards to worthwhile projects located in the county. Our foundation’s areas of emphasis include:

|  |  |  |
| --- | --- | --- |
| * **Arts & Culture**
 | * **Community Betterment**
 | * **Education**
 |
| * **Health & Human Services**
 | * **Recreation & Environment**
 | * **Youth Development**
 |

## MCCF Does Not Fund:

* Completed projects or projects already in progress
* Projects that have current budgeted support
* Emergency repairs/purchases
* Elimination of deficits
* Reduction of debt
* Ongoing project support and operating support

## Eligibility to apply for funding:

 Tax exempt, 170(c)(1) city entity or department operating within Mahaska County.

## Application Submission Details

* Application and all supporting documents must be submitted electronically to GrantAdmin@mahaskafoundation.org by the application deadline.
* Application deadline is **February 29, 2024 by 3:00 p.m.**
* Questions can be submitted via email to GrantAdmin@mahaskafoundation.org or by phoning MCCF President Amy Toubekis, 641.2953.9089
or MCCF Treasurer Madonna Bowie, 641.660.3029.

## Definitions & Explanations:

Organizations must be recognized by the Internal Revenue Service as tax-exempt, non-profit public charities under section 501(c)(3) or as a “unit of government” under Section 170(c)(1) to receive grant funding.

A 501(c)(3) is a section of the Federal Tax Code which establishes the criteria for tax-exempt charitable organizations.

Section 170(c)(1) refers to agencies that conduct activities to benefit the public at large, like public school, state universities, public libraries, and volunteer fire departments.

**2024 MCCF Grant Application – Checklist** Organizational information has been completed Contact information has been completed

Project Summary has been completed Project budget detail has been completed

Project narrative information has been completed Project time line has been completed

Copy of IRS Determination letter attached to grant application

**2024 MCCF Grant Application – Applicant Information**

City or City Department conducting project:

Project Address or Location:

Organization/Project Contact Person & Title:

Organization/Project Contact Person Phone & Email Address:

Federal Tax Identification Number of Applicant/Fiscal Sponsor (EIN):

Applicant Address (if different from above):

Applicant Contact Person (if different from above):

Applicant Contact Phone & Email (if different from above):

Project Title:

Amount Requested: Total Cost of Project:

Project Focus Area:

Art/Culture/Humanities Education Environment/Animals Health

  Human Services  Public/Society Benefit Other

Estimated number of individuals served:

How did you arrive at the number served?

**2024 MCCF Grant Application – Applicant Information (con’t.)**

Description of Organization:

Description of Project:

# 2024 MCCF Grant Application – Questions of Purpose

## PLANNING – 20 POINTS

1. Describe your organization's mission, program activities, and population served.
2. Describe your organization’s size, membership and leadership. Please include a list of your board members.
3. Describe the proposed project including the project goals and objectives. Discuss the population it will serve. Describe any planning that went into the project. Describe any research, investigation and/or analysis your organization did on this project. If this project is a phase of a larger project, explain.

# 2024 MCCF Grant Application – Questions of Purpose (con’t.)

## DEMONSTRATED NEED/PUBLIC DEMAND – 20 POINTS

1. Discuss the community needs for the project, the benefits for the community as a result of the project and the community support for the project.

## PARTNERSHIP/LOCAL SUPPORT – 10 POINTS

1. Outline resources, partners, partnerships and/or local support that will assist with the project and what their support brings to the project. Attach letters of support at the end of the application.

## LEVERAGED ACTIVITIY/MATCHING FUNDS – 20 POINTS

1. Outline funding secured, applied for and proposed for the project and or matching funds listed on the project budget form. Demonstrate leveraging of other community, regional, or state investments. Clearly document both financial and non-financial services and their value.

# 2024 MCCF Grant Application – Questions of Purpose (con’t.)

## CREATIVITY/INNOVATION – 5 POINTS

1. Describe any creative components, innovations, or new ways of dealing with problems that will be addressed by your project.

## SUSTAINABILITY – 5 POINTS

1. Who will administer this project? Please describe their qualifications to do so. Will there be ongoing expenses associated with this project including operations or maintenance costs? Explain how these will be addressed. If you do not receive this grant, will you be able to continue with the project?

## FEASIBILITY, TIMELINE & BUDGET – 5 POINTS

1. What is the timeline for this project? Include project start, finish, and milestones in your timeline.

## IMPACT/BENEFITS – 15 POINTS

1. Indicate desired impact and how you will measure and evaluate the results of the project. Be specific regarding community needs/issues your project will address.

# 2024 MCCF Grant Application – Project Budget

|  |
| --- |
| **INCOME** |
| **Source** | **Funds Secured** | **Funds Seeking** | **\*\*In-kind** | **Total Amount** |
| MCCF |  |  |  | $ 0.00 |
| Gov’t Grants |  |  |  | $ 0.00 |
|  |  |  |  | $ 0.00 |
|  |  |  |  | $ 0.00 |
| Foundations |  |  |  | $ 0.00 |
|  |  |  |  | $ 0.00 |
|  |  |  |  | $ 0.00 |
| Corporations |  |  |  | $ 0.00 |
|  |  |  |  | $ 0.00 |
|  |  |  |  | $ 0.00 |
| IndividualContributions |  |  |  | $ 0.00 |
|  |  |  |  | $ 0.00 |
|  |  |  |  | $ 0.00 |
| Fundraising Events |  |  |  | $ 0.00 |
|  |  |  |  | $ 0.00 |
|  |  |  |  | $ 0.00 |
| Other (Specify) |  |  |  | $ 0.00 |
|  |  |  |  | $ 0.00 |
| **Total Income** | $ 0.00 | $ 0.00 | $ 0.00 | $ 0.00 |
| **EXPENSE** |
| **Source** | **Expenses funded****by MCCF grant** | **In-Kind or Cash****Match** | **Total Amount** |
| Land Purchase |  |  | $ 0.00 |
| Professional Services |  |  | $ 0.00 |
| Construction Costs |  |  | $ 0.00 |
| Construction Supplies |  |  | $ 0.00 |
| Equipment Purchase |  |  | $ 0.00 |
| Training Costs |  |  | $ 0.00 |
| Personal Costs |  |  | $ 0.00 |
| Other Expense (Specify) |  |  | $ 0.00 |
|  |  |  | $ 0.00 |
|  |  |  | $ 0.00 |
|  |  |  | $ 0.00 |
|  |  |  | $ 0.00 |
| **Total Expense** | $ 0.00 | $ 0.00 | $ 0.00 |
| **Balance (income – Expense)** |  |  | $ 0.00 |

**\*\*In kind gift:** When a foundation or entity contributes goods or services in lieu of providing monetary grants.