## Tyndall Community Foundation Box 454 Tyndall, South Dakota 57066

### **Grant Application Form**

Deadline:	
Applicant's Official I	Name
	a tax-exempt 501(c)3 entity? Yes No le your EIN or Tax ID #
Contact Person: Na	me
Ado	ress
City	/State
Hor	ne Phone
	rk Phone
Ema	ail
we	osite
Foundation dollars	requested : \$
Date of Request:	
	cription of the project, the need for the project, and anticipated community benefits. Include a brie and source of current funds. Attach separately.
Project Start Date	
Anticipated Comple	tion Date
	and and attest that all information herein is true and complete to the best of my knowledge. I ritten follow-up is required, and I will submit a report following the completion of this project.
Signature/Title	Date
Please mail to:	Tyndall Community Foundation Box 45
	Tyndall, South Dakota, 57066

# Grant-making Guidelines Tyndall Community Foundation

#### **Qualification:**

- 1) Purpose of the project should fulfill a community need. (for example: is your project going to benefit the community in general)
- 2) IRS now requires a non-profit organization be verified by the IRS. Proof of non-profit status may be required upon request. Governmental entities (cities, counties, schools) and churches are exempt from the verification requirements and do qualify to receive grant funding.

#### **Discrimination:**

Applications from agencies offering services exclusively to one gender, age, group or race will be closely scrutinized for discriminatory practices.

#### **Fund Distribution:**

- 1) Grant applications must be completed in full.
- 2) Grants will be reviewed and awarded at the discretion of the Tyndall Community Foundation Board.
- 3) All applicants will be informed verbally and /or in writing to the approval or disapproval of their application.
- 4) Funds must be used within 12 months from awarding or funds will revert back to the community funds account.

#### **Limitations:**

Tyndall Community Foundation will grant no more than a maximum of 4.5% of Fund's Value in any single year.

Recipients may be eligible for one grant every other year, unless surplus money is available.

GRANT ACCEPTANCE POLICY: Must be completed for all grants requiring <b>expenditure responsibility</b> by grant			
recipient.			
Any grant made will be sub	eject to the terms herein.		
Grant Applicant (Organizat	tion or Group):		
1. <b>Public Recognition:</b> The Foundation appreciates the grantee's efforts to publicize the grant and the fund within the South Dakota Community Foundation that awarded the grant.			
stated and budgete and its budget may a. Exp	d in the Grant Application y not be changed except with	ded may be spent only in accordance with the goals and objectives you submitted, as approved by the Foundation. The funded project a prior written approval of the Foundation. against the grant before or after the date of the grant period without foundation.	
org equ	ganization unless the organi	ased with grant funds shall be the property of the grantee zation should go out of existence. In that case, the ownership of the to the Foundation unless ownership is transferred to another	
3. Disbursements to Grantees:			
a. Gra	ant funds will be disbursed	to the grantee upon receipt of signed contract.	
	•	grant funds received and for maintaining adequate supporting records must be maintained for these grant funds.	
	_	turn to the Foundation any funds not spent by the close of the grant of the Foundation for an extension of the grant period for	
<b>5. Review of Grant A</b> statement of expenditure		rnish the Foundation with a closing grant evaluation and	
Also, the Foundation would appreciate photos and copies of articles published about the grant activity.			
<b>6. Limit of Commitm</b> provide other or additional	-	ılated in this contract, the Foundation has no obligation to	
<del>-</del>	=	nd statement of expenditures must be submitted to the SDCF <u>within</u> t. Failure to do so will result in a two (2) year suspension from	
SIGNATURE			
Grant Applicant (Person Responsible):			
Signature	Γ	Date	