

Spirit of St. Louis Women's Fund 2020-2021

St. Louis Community Foundation

Organizational Information

Doing Business As

If applicable, please provide the legal name your organization is doing business as

Character Limit: 100

Top Executive Contact*

Please provide the name, prefix, title for your top executive

Character Limit: 250

Please provide the phone number for your top executive*

Character Limit: 15

Please provide an email contact for your top executive*

Character Limit: 254

Main Contact for Proposal

If different from the applicant, please provide the name, prefix, title, email address and phone number for this project's primary contact

Character Limit: 250

Board President Contact*

Please provide the name of your Board President

Character Limit: 250

Please provide a contact phone number for your Board President*

Character Limit: 15

Please provide an email contact for your current Board President*

Character Limit: 254

Organization Mission Statement*

Please provide your organization's mission statement

Character Limit: 500

Type of Request:*

(Applicants are encouraged to consider submitting for general operating support given uncertainty during the ongoing pandemic. Project/program support and capacity building

support requests are also welcomed. Capacity building strengthens the development of an organization's core skills and capabilities, such as leadership, management, finance/fund-raising, programs, and evaluation, in order to build the organization's effectiveness and sustainability.)

Choices

New Project/Program
Existing Project/Program
Expansion of Existing Project
Capacity Building Support
General Operating Support

Specific Project to be Funded*

(if general operating request, please indicate)

Character Limit: 100

Proposal Summary*

In 100 words or less summarize the purpose of this request

Character Limit: 250

Organization/and or Project Focus*

Please check one:

Choices

Arts & Culture
Education
Environment
Health
Social Services

Amount Requested*

(\$5000 - \$25,000)

Character Limit: 20

Total Project Budget*

Please provide the project budget for the proposed funding period.

Character Limit: 20

Organization's Current Annual Budget*

Character Limit: 20

Fiscal Year*

Please provide the dates of your organization's current fiscal year

Character Limit: 50

Total Served*

Number of people served by the proposed project

Character Limit: 10

Organization Founding*

Year organization was founded:

Character Limit: 5

Paid Staff*

Please provide the total number of paid staff

Character Limit: 10

Past SOS Funding*

Has SOS funded this organization in the past? If yes, please list year(s) funded and the amounts received

Character Limit: 100

Organization Target Population*

Organization's total target population and geographic area(s) served (include all specific counties)

Character Limit: 1000

Proposed Project's Target Population*

Proposed Project's target population and geographic area(s) served (include specific counties within SOS service area).

Character Limit: 1000

Other Funding Sources*

Does your organization receive funding from a giving federation or a national organization? List all that apply (e.g. United Way, Arts and Education Council, Jewish Federation)

Character Limit: 500

How did your organization hear about SOS?*

Character Limit: 250

Organizational and Project Summary

History & Accomplishments*

Please provide a brief summary of your organization's history and a brief description of your previous year's accomplishments.

Character Limit: 1500

Diversity, Equity and Inclusion*

Please provide a statement on how your organization addresses diversity, equity and inclusion in your staffing, board, volunteers and clients served. How are the racial/ethnic groups most affected by your organization's work represented?

Character Limit: 1500

Purpose of Funding Request*

What is the purpose of your funding request?

Character Limit: 1500

Community Needs*

Please describe the community/client needs or problems that will be addressed by this project.

Character Limit: 1500

Goals & Objectives*

Please describe the overall project or organization goal, objectives/actions and outcomes/impact with anticipated numerical results.

Character Limit: 1500

Partnerships*

If applicable please provide the names and a brief description of roles of collaborative partners on this project.

Character Limit: 1500

Required Attachments

1. IRS Letter of Determination.*

Provide evidence of public charity status such as (1) Copy of current determination letter under section 501(c)(3) of the Internal Revenue Code issued; or (2) Copy of determination letter of the parent organization in the Greater St. Louis Community and the annual Group Exemption Report most recently filed with the IRS (if a local affiliate exempt under a group exemption).

File Size Limit: 1 MB

2. Project Budget*

Using the Budget Template provided on the SOS website - link located under Application Process heading on the left side of the page

File Size Limit: 1 MB

3. Organizational Financial Summary*

Using the Budget Template provided on the SOS website - link located under Application Process heading on the left side of the page

File Size Limit: 1 MB

4. Organizational Current Budget*

Please use the template provided on the SOS Website or your own spreadsheet

File Size Limit: 1 MB

Agreement

Agreement*

I certify, to the best of my knowledge, that all information included in this proposal is correct. The tax-exempt status of this organization is still in effect. If a grant is awarded to this organization, then the proceeds of that grant will not be distributed or used to benefit any organization or individual supporting or engaged in unlawful activities.

In compliance with the USA Patriot Act and other counterterrorism laws, I certify that all funds received from this funder will be used in compliance with all applicable anti-terrorist financing and asset control laws, statutes, and executive orders. (Enter Date)

Character Limit: 10