

Responsive Grantmaking 2021 - Cycle 1

The William J. and Dorothy K. O'Neill Foundation, Inc.

Funding Request Description

Project Name*

Please enter General Operating Support.

Character Limit: 100

Amount Requested from the O'Neill Foundation*

Organizations may request no more than 10% of their total operating budget (up to \$50,000).

Our Responsive Grantmaking Program is extremely competitive. Although you may request no more than 10% of your total operating budget (up to \$50,000), realistically, the average grant size will be in the \$25,000 range.

Character Limit: 20

Communities Served*

Select only the community served for this grant request. Select ONE.

Choices

DC - Washington, DC (limited to DC proper)

FL - Greater Orlando

HI - Big Island

MD - Anne Arundel County and Baltimore City

NY - New York City

OH - Cuyahoga County

TX - Harris, Montgomery and Waller Counties

VT - Bennington and Rutland Counties

Grantmaking Topic Area*

We recognize that whole-family approaches are interdisciplinary; however, please select only one topic that represents your primary work with families.

Choices

Health & Well-Being

Educational Success

Homelessness

Organization Background and Proposal Narrative

Mission Statement*

What is your organization's mission statement?

Character Limit: 10000

Organization Description*

Provide a brief overview of your organization's core programs and activities. What are your key strategies for strengthening families? Your response should be no more than two brief paragraphs.

Character Limit: 10000

Governance*

Briefly describe how your organization is governed.

Character Limit: 10000

Board of Directors*

Upload a list of all board members with terms, occupations and affiliations.

File Size Limit: 1 MB

Organizational Structure

Please upload your organizational chart, if applicable.

File Size Limit: 2 MB

Leadership/Staffing*

Describe any significant staff changes that have occurred within the past twelve months or are expected to take place in the coming year.

Character Limit: 10000

Does your organization currently collect demographic data for board and/or staff?*

Choices

Yes

No

Board & Senior Leadership Demographics

The following demographic questions around Board and Senior Leadership are optional and are to gather more data about the organizations we fund. Your answers will not impact our funding decisions.

Enter the percentage in each category.

- Enter whole numbers only (no fractions or decimals) and do not enter a % sign with the number.
- If you do not have a percentage to enter for the category, enter 0.
- Your total must equal 100%.
- You may skip these questions if you do not collect this data or would not like to share the data with us at this time.

% of Board: African-American/Black*Character Limit: 4***% of Board: Native American/Alaskan Native***Character Limit: 4***% of Board: Asian/Asian American***Character Limit: 3***% of Board: Arab-American/Middle Eastern/North African***Character Limit: 3***% of Board: White/Caucasian***Character Limit: 3***% of Board: Hispanic/Latinx***Character Limit: 3***% of Board: Native Hawaiian/Pacific Islander***Character Limit: 3***% of Board: Categorized as "Other"***Character Limit: 3***% of Board: Unknown/Decline to State***Character Limit: 3***% of Senior Leadership: African-American/Black***Character Limit: 3***% of Senior Leadership: Native American/Alaskan Native***Character Limit: 3***% of Senior Leadership: Arab American/ Middle Eastern/ North African***Character Limit: 3*

% of Senior Leadership: Asian/ Asian-American

Character Limit: 3

% of Senior Leadership: White/ Caucasian

Character Limit: 3

% of Senior Leadership: Hispanic/ Latinx

Character Limit: 3

% of Senior Leadership: Native Hawaiian/ Pacific Islander

Character Limit: 3

% of Senior Leadership: Categorized as "Other"

Character Limit: 3

% of Senior Leadership: Unknown/ Decline to State

Character Limit: 3

Participant Voice*

Check all the ways in which you include the voice of families in your organizational structure and service delivery.

Choices

Our beneficiaries serve on the Board

Our beneficiaries serve on advisory boards, councils, and/or committees

Our beneficiaries serve as staff

Our beneficiaries regularly provide input into design/ implementation of our programs and services

Other, please specify below

If selected other, please specify:

Character Limit: 250

Community Alignment*

Describe your organization's primary collaborations and partnerships with other organizations and community initiatives focused on achieving better outcomes for families.

Character Limit: 10000

Evaluation*

How does your organization currently collect and use data to measure impact and make programmatic/organizational decisions? What client management system do you use?

Character Limit: 10000

Total number of clients served*

List the total number of clients served by the organization during your previously completed fiscal year.

Enter a whole number, not a range.

Character Limit: 15

Enter the percentage of clients served in each category.

- Enter whole numbers only (no fractions or decimals) and do not enter a % sign with the number.
- If you do not have a percentage to enter for the category, enter 0.
- Your total must equal 100%.

% of Total Served: African-American/Black*

Character Limit: 3

% of Total Served: Asian or Asian-American*

Character Limit: 3

% of Total Served: White/Caucasian*

Character Limit: 3

% of Total Served: Hispanic/Latinx*

Character Limit: 3

% of Total Served: Native American/Alaskan Native*

Character Limit: 3

% of Total Served: Native Hawaiian or Pacific Islander*

Character Limit: 3

% of Total Served: Categorized as "Other"*

Character Limit: 3

Strategic Plan

Our General Operating Support application was centered on organizations having a high-level strategic road map (a strategic plan, business plan or visioning document) to guide the organization's workplan over the course of the grant period. We recognize, however, that the COVID-19 crisis has fundamentally changed the environment and that there are still many unknowns. We know that nonprofits are in the process of rethinking core assumptions and re-imagining their strategies. For this reason, we are NOT requiring submission of a strategic plan. As an optional upload, you may include a copy of your organization's response to COVID-19 or your current strategic plan.

Optional Upload (Strategic Plan)

Upload a copy of your organization's current strategic or similar plan.

File Size Limit: 2 MB

Optional Upload (COVID-19 Response)

Upload a copy of your organization's response to COVID-19. Please combine multiple files into one PDF.

File Size Limit: 2 MB

Organizational Priorities*

List 1 to 3 organizational priorities that you will undertake during the grant period to advance your mission.

Character Limit: 10000

Anticipated Results*

Describe the anticipated results for families from addressing the priorities listed above.

Character Limit: 10000

Progress*

Indicate how you will track and confirm progress. What information will be collected and how will it be collected? Examples: survey, interview, observation, record or document review.

Character Limit: 10000

Social Media

If available, please share your handles on Facebook, Instagram, Twitter, etc.

Character Limit: 1000

Organization Budget/Financial Information

Total Operating Budget*

Character Limit: 20

Operating Budget*

Upload current Operating Budget and name your organization's top key funders (note amounts committed, pending, and/or anticipated for your current fiscal year).

Character Limit: 10000 | File Size Limit: 2 MB

Financial Statements*

Upload your Statement of Financial position (Balance Sheet) and Statement of Activities (Income Statement).

File Size Limit: 3 MB

Fiscal Year*

Choices

1/1 - 12/31

7/1 - 6/30

10/1 - 9/30

Other, please specify below

If selected other, please specify:

Character Limit: 50

Financial Position and Funding Stream Changes*

Briefly describe the organization's financial position. Include any significant changes in funding streams (anticipated or within the past year due to COVID-19).

Character Limit: 10000

Funding Stream Changes*

Check all that apply.

Choices

Reallocated funding from existing projects to focus on COVID-19

Experienced decrease in earned revenue (fee for service, contracts)

Experienced decrease in contributed revenue (Foundation grants, individual contributions)

Tapped into reserves

Cancelled fundraiser event(s)

Experienced increased expenses related to COVID-19 (ex. new technology, PPE, cleaning supplies)

Other (please specify below)

If you answered other, please specify below.

Character Limit: 500

Plans to Address Budget Changes*

What are your plans for addressing the above budget changes?

Character Limit: 10000