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**2022 Responsive Grantmaking Program**

**Grant Application (General Operating Support)**

For 2022, our funding priorities include the following geographies:

* MD, OH, DC, & NY:

The Foundation will only accept proposals from past grantees\* in Anne Arundel County and Baltimore City, MD; Cuyahoga County, OH; Washington, DC (proper); and New York City, NY.

* HI, FL, TX & VT:

The Foundation will accept proposals from new applicants and past grantees\* in the Big Island, HI; Greater Orlando, FL; Harris, Montgomery and Waller counties; TX; and Bennington and Rutland counties, VT.

*\*A past grantee is defined as an organization that has received funding from our Responsive Grantmaking program after January 2013.*

*Please Note: Current and past grantees are not eligible to apply until their grant term has officially ended (e.g. if awarded a grant Cycle 1 (Spring) 2021, an organization would not be eligible to apply until our Cycle 2 (Fall) 2022 application is available.)*

**Application Tips**

* To edit a draft or respond to a revision request select “Edit” at the top right.
* The portal does not auto-save. Be sure to save often by clicking the “Save and Continue” button at the bottom right.

**Other Guidance**

* Once in “Edit” mode, use the “Table of Contents” to quickly advance to a particular section.
* Click on a section's arrow to expand or collapse that section.
* You can print a copy of your own responses to this form. Select the “Save and Close” icon at the bottom right, then select the “Print” icon at the top right.
* Be sure to “Save and Close” if you would like to save your responses and resume your application later.
* When you have completed all the information required to process your application, click “Save and Close”. Note that this does not submit your application. (See the next step).
* If you have not yet submitted or withdrawn your application, you can continue editing it using the “Edit” button at the top right.
* Once you have “Saved and Closed”, you will be able to “Submit” or “Withdraw” using the right bottom buttons. Please review your answers carefully before submitting.
* If you need to make edits to a submitted application, please contact us.
* During our screening process, we may contact you if edits are necessary for clarification or if additional information is required. An email notification will be sent to the Primary Contact for the application.

**APPLICATION QUESTIONS**

**Project Name**: General Operating Support

**Amount Requested from 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.*

**Communities Served:**

* DC - Washington, DC (limited to DC proper)
* FL - Greater Orlando
* HI - Big Island
* MD - Anne Arundel County
* MD - Baltimore City
* NY - New York City
* OH - Cuyahoga County
* TX - Harris County
* TX - Montgomery County
* TX - Waller County
* VT - Bennington and Rutland Counties

**Grantmaking Topic Area**

* Health & Well-Being
* Educational Success
* Homelessness

**ORGANIZATION BACKGROUND AND PROPOSAL NARRATIVE**

Organization Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Location: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Primary Contact: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CEO or Executive Director of Organization: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Mission Statement**: What is your organization's mission statement?

**Governance**: Briefly describe how your organization is governed.

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

**Upload your organizational chart, if applicable.**

**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.*

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

% of Board: African-American/Black

% of Board: Native American/Alaska Native

% of Board: Asian/Asian American

% of Board: Arab-American/Middle Eastern/North African

% of Board: White/Caucasian

% of Board: Hispanic/Latin

% of Board: Native Hawaiian/Pacific Islander

% of Board: Categorized as "Other"

% of Board: Unknown/Decline to State

% of Senior Leadership: African-American/Black

% of Senior Leadership: Native American/Alaskan Native

% of Senior Leadership: Arab American/ Middle Eastern/ North African

% of Senior Leadership: Asian/ Asian-American

% of Senior Leadership: White/ Caucasian

% of Senior Leadership: Hispanic/ Latin

% of Senior Leadership: Native Hawaiian/ Pacific Islander

% of Senior Leadership: Categorized as "Other"

% of Senior Leadership: Unknown/ Decline to State

**Participant Voice:**

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

* Our constituents regularly provide input into design/ implementation of our programs and services
* Our constituents serve as staff
* Our constituents serve on advisory boards, councils, and/or committees
* Our constituents serve on the Board
* 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

**Community Alignment**

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

**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?

**Total number of clients served**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Enter the percentage of clients served in each category.**

% of Total Served: African-American/Black

% of Total Served: Asian or Asian-American

% of Total Served: White/Caucasian

% of Total Served: Hispanic/Latin

% of Total Served: Native American/Alaskan Native

% of Total Served: Native Hawaiian or Pacific Islander

% of Total Served: Categorized as "Other"

Clients Served Total: 0%

**Strategic Plan:**

*Upload a copy of your organization's current strategic or similar plan, if you have one available.*

**List 1 to 3 organizational priorities** from your current Strategic Plan (or similar plan) that you will undertake during the grant period to advance your mission.

Priorities



**Anticipated Results**:

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

**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.*

**Social Media**:

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

**ORGANIZATION BUDGET / FINANCIAL INFORMATION**

**Total 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).

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

**Fiscal Year:**

* 1/1 – 12/31
* 7/1 – 6/30
* 10/1 – 9/30
* Other

**Financial Position and Funding Stream Changes:**

*Briefly describe the organization’s financial position. Include any significant changes in funding streams.*

**Plans to Address Budget Changes:**

*What are your plans for addressing the above budget changes?*

**Optional:**

*Upload any additional information you feel necessary.*