

## RE/MAX Community Chest Grant Application 501(c)(3) & Public Agencies



#### Who Can Apply?

**Nonprofit Organizations** – Any active 501(c)(3) nonprofit organization with a project in need of funding that directly benefits the community is eligible to apply. (Organization must be listed as active on the IRS exempt organization verification site, <a href="https://apps.irs.gov/app/eos.">https://apps.irs.gov/app/eos.</a>)

501(c)(8) and 501(c)(19) nonprofit organizations can apply using the 501(c)(8)/501(c)(19) grant application.

**Public Agencies** – Public agencies such as schools, libraries, parks, fire and police departments with an unfunded project that directly benefits the Stanwood-Camano community may apply.

#### **Grant Parameters**

Grants are available for both projects and operating funds. Projects must meet the following criteria to be considered:

- They must directly benefit the Stanwood-Camano community (defined by the boundaries of the Stanwood-Camano School District).
- They must be realistic and attainable.
- They must have experienced project staff and/or volunteers in place who can successfully implement the project.

The maximum grant amount is \$2,000.

Operating fund grants are only available to nonprofit organizations physically located within the boundaries of the Stanwood-Camano School District. Operating fund grants are most likely to be awarded to start-up ventures rather than established nonprofit organizations.

All applications will be reviewed by a selection committee, which will, at its sole discretion, select projects to fund.

#### **Application Deadline & Submission Instructions**

Completed applications should be submitted to SCAF no later than January 31. They can be e-mailed, mailed, or dropped off.

By e-mail: director@s-caf.org

By mail: Stanwood-Camano Area Foundation

P.O. Box 1209

Stanwood, WA 98292

In person: Stanwood-Camano Area Foundation

26911 98<sup>th</sup> Dr NW, Ste A Stanwood, WA 98292

If you have questions, call or email Natalie Hagglund, 360-629-6878 or director@s-caf.org.



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### **Organization Information**

Organization Name:	Date:
Mailing Address:	
	Title:
Telephone:	Email:
Website:	
Type of Organization: $\Box$ 501(c)(3) $\Box$ Published Formula Published Formula Submit of Source (C)(3) organizations must submit of Source (C)(3) organizations (C)(4) organization	ic Agency a copy of their IRS status approval letter if not previously submitted.
Year Incorporated: EIN	
Annual Operating Budget:	
<b>Project Information</b>	
Requesting funds for:   One-time project	☐ Ongoing/recurring project ☐ Operating Funds
Project Name:	
Total Project Cost:	Grant Amount Requested:
Narrative (do not exceed allotted space)	
Organization's Mission Statement	

One paragraph description of project



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### Specific needs being met by this project

Primary demographic served by this project	
Total geographic area served by this project	
Key staff and volunteers responsible for implementing project	
Project Budget	
Signature	
Signature:	Date:
Title:	