

NHCE QA Testing

2023.09 Responsive Grant

ID: R-202309-00605
Program Lead:

Amount Requested:

Request Status

Draft	With Applicant	Review	Active	Closed
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The New Hanover Community Endowment is welcoming applications for its 2023 responsive grant cycle. Grants will support the immediate needs of nonprofits and public entities to strengthen their organizations and allow them to better serve the community. Responsive grants can be used to build organizational capacity.

Application Period

Grants will be accepted from September 1, 2023 through September 22, 2023. Grant applications must be submitted through the Grantee Portal in Fluxx.

Eligibility Criteria

- Be organized as: a tax-exempt 501(c)(3) nonprofit organization, a public/governmental entity, or a nonprofit group with fiscal sponsorship from a tax-exempt 501(c)(3) organization.
- Demonstrate alignment with one or more of the Endowment's strategic pillars: Education, Health and Social Equity, Community Safety, and Community Development, and with the Endowment's strategic plan.
- Provided audited financial statements for the most recent fiscal year or two years of operating budgets for your organization.
- Provide a verified Internal Revenue Service (IRS) Form 990 for the most recent fiscal year. This may be a 990-N, 990-EZ, or 990.
- Have a mailing address and provide services in New Hanover County.

Grant Amounts and Terms

- Responsive Opportunities may not exceed \$250,000 or 50% of the applying organization's operating budget for the most recently completed fiscal year.
- All grants are one year and non-renewable.

Questions

Please see the Grantee Resources tab for FAQs and other resources available for grantees.

Status

Draft

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Organization Information
Grant Information
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Grant Terms Information

▼ Organization Information

Organization Name: NHCE QA Testing

Primary Contact Name:

Primary Signatory:

▼ Grant Information

Please verify that you understand and agree to the following statement:

This grant is a one-year grant and will not be renewable.* Yes

What is the mission of your organization?*

What are the organizational values that guide your work and choices?*

What are your organization's goals?*

With which of the Endowment's four strategic pillars does your proposed work align? If multiple, please indicate.* Community Development, Community Safety, Education, Social and Health Equity

How does the proposed work align with the above-selected pillar(s)?*

What is the need or opportunity your organization seeks to address?*

Who or what will be the primary beneficiaries if successful?*

Why does the need or opportunity need to be addressed at this time?*

What will be the indicators of success? *

What is the timeline of your proposal? Why is the timeline realistic? *

What other funders are supporting this work or have been requested to fund this work? *

What amount of funding are you requesting? Grants may not exceed \$250,000 or 50% of the organization's operating budget. (Please round to the nearest whole number and enter requested amount without commas.)* \$0.00

How will the funds be used? Please provide an itemized list of anticipated expenses and the budgeted amount. (Please round to the nearest whole number and enter budgeted amounts without commas. You may enter 0 or leave row blank if you do not project spending in an expense category.)

Compensation: Salary, wages, fringe, payroll taxes, etc.*	\$0.00
Office Expenses: Supplies, telephones, printing, shipping, etc.*	\$0.00
Occupancy: Mortgage/rent; property insurance; utilities etc.*	\$0.00
Advertising and Marketing: Print and electronic media, signage, etc.*	\$0.00
Travel: Mileage, lodging, etc.*	\$0.00
Meetings and Events: Facility rental; catering; etc.*	\$0.00
Fees for services: Legal, accounting, or contractor.*	\$0.00
Capital Expenditures: property; vehicles; equipment; computers; etc.*	\$0.00
Other 1 (specify category):	
Other 1 (specify amount):	\$0.00
Other 2 (specify category):	
Other 2 (specify amount):	\$0.00

▼ Timelines/Milestones

Milestone 1 (specify):

Projected Date:

Milestone 2 (specify):

Projected Date:

Milestone 3 (specify):

Projected Date:

Milestone 4 (specify):

Projected Date:

Milestone 5 (specify):

Projected Date:

Milestone 6 (specify):

Projected Date:

Milestone 7 (specify):

Projected Date:

Milestone 8 (specify):

Projected Date:

Milestone 9 (specify):

Projected Date:

Milestone 10 (specify):

Projected Date:

Are you submitting an application in partnership with a fiscal sponsor?* Yes

Fiscal Org info

Fiscal Org Name*

Fiscal Org Address*

Fiscal Org City*

Fiscal Org Postal Code*

Fiscal Org Email*

Fiscal Org Phone*

Please enter your organization's Employer Identification Number.*

DOCUMENTS FROM ORG



Fluxx Grantee Portal Logging In.mp4



Other Document | Additional Supporting Application Doc

Added by EO Grantee Test 2002 at 10:01 AM on August 31, 2023



New Hanover Community Endowment Grant Agreement Template -- Fluxx.pdf



Annual Report

Added by EO Grantee Test 2002 at 1:10 PM on August 29, 2023

Please upload your organization's Form 990 for the most recent fiscal year.*

UPLOAD HERE

Please upload your organization's audited financial statements from the most recent fiscal year. If your organization does not have audited financials, then upload operating budgets for the two most recent fiscal years.*

UPLOAD HERE

Please upload a list of your board members.*

UPLOAD HERE

▼ Grant Terms Information

Start Date:

End Date:

▼ Documents

REQUEST DOCUMENTS