



## 2017 GRANT REQUEST GUIDELINES

1. Grants from the Hine Memorial Fund are made at the recommendation of the Hine Sub-Committee, with the approval of the Distribution Committee of The Youngstown Foundation. The Committee meets in March, May, August and November and grants are traditionally awarded within eight weeks following each quarterly deadline. Requests must be received by 4:00 p.m. on:
  - Wednesday, January 11, 2017
  - Wednesday, April 12, 2017
  - Wednesday, July 12, 2017
  - Wednesday, October 4, 2017
2. The Hine Memorial Fund allocates program and capital support to non-profit 501(c)(3) agencies that assist children with medically diagnosed disabilities, ages twenty-one and below, who are residents of Youngstown and vicinity. Grants historically provide direct therapeutic services, information and referral, recreation, respite or support opportunities for parents and such children. For capital requests, priority will be given projects that incorporate principles of Universal Design. School and tutorial programs may be deferred until year end.
3. The Hine Fund Committee will review only one (1) proposal per year per agency. (Exceptions may be made for emergency and unusual circumstances approved by the Executive Director of The Youngstown Foundation.) Multi-year commitments will not be considered and recipients should not have an expectation of annual funding.
4. Requests to the Hine Memorial Fund should include: **(Online requests will not be accepted.)**
  - ✓ Cover letter including amount of request and agency contact information.
  - ✓ Agency history and mission, including outline of major services and programs provided.
  - ✓ Numbers of staff and volunteers involved with your agency.
  - ✓ Copy of your agency's most recent strategic plan.
  - ✓ Determination of need for program, addressing duplication, if applicable.
  - ✓ Agencies collaborating with you on this program and the nature of their contribution.
  - ✓ Project or program summary, including timeline, outcomes and actions for implementation.
  - ✓ Number of children by age group, disability and zip code who will benefit.
  - ✓ If therapy or other sessions are provided, quantify them; a "unit"; a unit equals an hour.
  - ✓ Amount of request; total cost/budget and copies of bids/estimates.
  - ✓ List of other funding sources including those confirmed or pending.
  - ✓ A roster of Board of Directors/Trustees and key staff/titles
  - ✓ Agencies must include a final report for their most recent grant.
  - ✓ Two (2) complete sets of the request. *(Limit print to one side of each page. Do not bind grants.)*
5. Submit one (1) copy of the applying organization's:
  - ✓ Current operating budget.
  - ✓ Most recent audited financial statement.
  - ✓ Letter from Internal Revenue Service confirming 501(c)(3) status.
  - ✓ IRS Form 990 for 2015\*

**\*Not necessary if previously submitted as part of Foundation's 2017 Support Fund Program.**

**Mail to: The Youngstown Foundation, P.O. Box 1162, Youngstown Ohio 44501**

**Deliver to: 100 Federal Plaza East, Suite 101, Downtown Youngstown 44503**

**For More Information Contact: Crissi Jenkins at 330-744-0320 or [crissi@youngstownfoundation.org](mailto:crissi@youngstownfoundation.org)**

*Approved by Distribution Committee on:*