



HARDIN COUNTY COMMUNITY ENDOWMENT FOUNDATION

PO Box 473
Iowa Falls, IA 50126
endowhardincoiowa.org

Community, Arts & Culture Grant Application Overview

Mission Statement: *To promote charitable giving, to build permanent endowment funds for Hardin County, and to address a broad range of community issues through active leadership and grant making.*

Generally, We Will Not Fund:

- Existing debt
- Operating expenses, salaries or labor

Early Review: February 3, 2023

Application Deadline: February 24, 2023

Grants Approved: March 16, 2023

Affiliate Grant Application Contact Information:

Tam Elerding | Program Director
Phone: 641-373-1379 endowhardinco@gmail.com

Eligibility to Apply for Funding:

- 501(c)(3) tax-exempt, nonprofit organizations.
- 170(c)(1) component units of government organizations (*Fire Dept., Ambulance, Libraries, Parks, etc.*)
- Organizations providing services within Hardin County.
- If you are not a 501(c)(3) or a 170(c)(1), you must align yourself with a fiscal sponsor.
- The Final Report for all previous grants must be on file **prior** to submitting a new grant application.



Hardin County Community Endowment Foundation

Arts & Culture

“An Affiliate of the Community Foundation of Greater Des Moines”

Grant Application – Cover Page

Project Title:		Date:
Applicant:	Are you a ___ 501(c)(3) organization ___ 170(c)1 Gov't Agency Or ___ Need fiscal sponsor? Who? _____ Your Federal Tax ID# or Fiscal Sponsor's Tax ID#: _____ _____	
Address:		
City:	State:	ZIP Code:
Contact Person Responsible for the Project & their Title:		
Contact Phone:		Contact Email:
Project Budget: \$	Amount Requesting: \$	Project Start Date:
		Estimated Completion Date:
Type of Project: ___ Capital (building of or physical improvement of building) ___ Program		
Project Focus Area: ___ Arts/Culture/Humanities ___ Education ___ Environment/Animals ___ Health ___ Human Services ___ Public/Society Benefit		
Brief Description of Organization: (100 Character Limit)		
Brief Description of Project: (200 Character Limit)		
Signature:		Date:



Grant Application – Questions of Purpose

Describe the need or problem being addressed by this project: (400 Character Limit)

Explain how this project will benefit the citizens of this county: (400 Character Limit)

What area or population is being served? (400 Character Limit)

Explain your organization’s ability to carry out and ensure the success of this project: (400 Character Limit)

Describe the timeline of the project: (400 Character Limit)

Describe how you will measure the impact/results of your efforts: (400 Character Limit)

Have you previously received funding from Hardin County Community Endowment Foundation Name? Yes or No

**Email a PDF of application, budget form and fiscal sponsor form (if needed) by 5:00 pm February 24, 2023 to
Tam Elerding at endowhardinco@gmail.com
Please contact Tam Elerding at 641-373-1379 or above email if you need assistance.**

ESTIMATED BUDGET FOR 2023 HCCEF GRANT

INCOME SOURCES FOR SPECIFIC PROJECT FUNDED BY HCCEF

(include HCCEF grant money and 25% matching funds)

Sources	Amount
Hardin County Community Endowment Foundation Grant (amount requested)	
Individual contributions	
Fundraising events	
Membership income	
Government grants (identify by name):	
Corporation gifts/contributions (identify):	
Foundation grants (identify by name):	
In-kind (specify the type of contribution):	
(Note: In-kind general labor is \$15/hr. Professionals may use their customary rate charge.)	
Other (specify):	
Total Income	

EXPENSES FOR SPECIFIC PROJECT FUNDED BY HCCEF

Items	Amount
Materials	
Equipment	
Program materials	
Labor	
Training	
Other (specify):	
Total Expense	

NOTE: When completing the final evaluation budget for the grant you have received, attach the required proofs of purchase for all grant money awarded, as well as proofs of purchase showing how matching funds were spent. (Invoices w/ copies of cancelled checks, paid receipts, etc., qualify as proofs of purchase.)

