

## Instructions

Thank you for your interest in this Sourcewell program. We want to make this process as easy and seamless as possible, so we have a few recommendations before you begin.

- Download a copy of the document and open it in Adobe Acrobat Reader. This is standard software on most machines; however, if you don't already have this installed on your computer, you can obtain it for free at <https://get.adobe.com/reader/>.

This is **very important** because if you don't use Adobe Reader, but instead complete the document using an internet browser (Internet Explorer, Firefox, Chrome, etc.), you won't be able to save your work, digitally sign the form, or submit electronically.

- Once you have opened the document in Acrobat Reader, immediately 'Save As' from the 'File' menu on the upper left-hand corner. Save often as you work through the document.
- Review your document to ensure everything has been completed. When ready, submit to the Sourcewell contact as indicated.

Please take your time and don't hesitate to reach out if you have questions or concerns. We look forward to working with you!

# Community Match Funds for Nonprofits

2021-2022

Community Match Funds aim to support a 501(c)(3) nonprofit’s vitality and response to community needs. We support ongoing programmatic work of a nonprofit and/or help start a new project or program. Priority will be given to nonprofits that support student and community success, address unmet mental health needs, and support initiatives that improve the quality of life which include:

- People in crisis
- Children and youth programs
- Education for children and adults
- Health promotion
- Environmental preservation and enhancement
- Promoting arts and culture

Funds are available on a first-come, first-served basis for nonprofits that provide programming in identified priority areas. A nonprofit organization may apply for one (1) Community Match Funds award up to \$2,500 per fiscal year (July 1 -June 30). Award recipients may pool their awards to fund joint projects.<sup>1</sup>

## Eligibility requirements

To be eligible for Sourcewell Community Match Funds:

- The applicant organization must:
  - Be a Sourcewell participating agency. Register at [sourcewell-mn.gov/register](https://sourcewell-mn.gov/register)
  - Be designated as a 501(c)(3) nonprofit entity required to file IRS Form 990
  - Provide services in our five-county service area which includes Cass, Crow Wing, Morrison, Todd, and Wadena county
  - Apply for no more than one (1) Community Match Funds award per fiscal year (July 1 – June 30)
  - Be willing and able to financially match the award amount (in-kind support does not constitute a financial match)
- The proposed project must:
  - Serve a public purpose as defined on the attached Public Purpose Checklist
  - Be completed in one year of the funds being awarded
  - Not involve:
    - Payment for capital expenses (land, building, equipment, software, etc.)
    - Operating expenses (rent, utilities, etc.)
    - Expenses incurred prior to receipt of the award or portions of the project that have already been completed
    - Loans or reimbursement to individuals, businesses, or for-profit entities
    - Fiscal hosts/agent applications
    - Political campaigns or activities
    - Religious activities
    - Expenses incurred with conference attendance (travel, conference fees, etc.)
    - Out-of-state travel costs

- Fundraising activities
  - Scholarships
  - Medical Research
  - Endowments
  - Animal care and/or programming
  - Organizational capacity building activities
  - Discriminatory or illegal activities
- A Community Match Funds application must:
    - Include all required information and attachments:
      - Proof of 501(c)(3) status and IRS Form 990
      - Proof of the organization's willingness and ability to match the amount awarded as referenced in the budget information section
      - A completed Public Purpose Checklist (see attached)
    - Request no more than \$2,500

## Funding process

**Step 1:** Sourcewell staff will review each application to ensure the criteria outlined above have been met. Applications that do not meet the criteria will not be eligible for Community Match Funds.

**Step 2:** Entities that pass the initial review process will be awarded funds on a first-come, first-served basis while funds remain available.

**Step 3:** Sourcewell staff will notify award recipients and provide further instructions.

## Contact information

Completed applications can be submitted by email to: [community@sourcewell-mn.gov](mailto:community@sourcewell-mn.gov) or by U.S. Mail to:

Sourcewell  
Community Solutions  
202 12<sup>th</sup> Street NE  
P.O. Box 219  
Staples, MN 56479

---

<sup>1</sup> Each organization must submit a separate application; comply with the organization, project, and application requirements; and notify Sourcewell of their intent to pool fund

# Community Match Funds Application

## 2021-2022

### Organization information

Entity name:

Physical address:

Mailing address:

Project point of contact name:

Email:

Telephone:

Authorized signer of legal agreement name:

Email:

### Project information

Please provide the following information specific to the proposed project:

1. Project title:
2. Amount of Match Funding requested:
3. Describe the project (2,500-character max).

4. It is the core purpose of Sourcewell to enrich the lives in our 5-county community. How does your application promote this core purpose?

5. Provide a proposed project timeline with action steps.

6. Please state whether you plan to pool your award to fund a joint project with another Community Match Funds applicant, and if so, provide the name and contact information for the other applicant.

### Budget information

Complete the table below to explain, **in detail**, the annual costs related to the project and the source of funds proposed to cover that cost, remember there is a **1:1 required match**. Insert additional lines to identify, **with specificity**, other costs related to the project. Sourcewell staff may contact you for additional information regarding your budget if more detail is required.

**Revenue Sources** (not including in-kind)

Entity	Amount
1. Sourcewell- CMF	\$
2.	
3.	
4.	
<b>Total</b>	<b>\$</b>

Expenditures/ Direct Costs	CMF Dollars	Other Sources
1.		
2.		
3.		
4.		
5.		
6.		
Total	\$	
<b>Total Project Budget</b>		<b>\$</b>

7. If Community Match Funds are approved, describe specifically how they will be used to support the project.

## Public Purpose Checklist

1. Will the proposed project promote public health, safety, general welfare, security, prosperity, or the contentment of a community as a body?

If No, **STOP**. Public expenditure is not authorized because the project will not further a public purpose.

If Yes, identify which of these purposes will be furthered by the project and how, and continue to Step 2.

2. Will the proposed project primarily benefit the public and not private individuals or entities?

If No, **STOP**. Public expenditure is not authorized for projects that primarily benefit private individuals or entities unless that benefit is only incidental to the project.

If Yes, identify the population that will benefit from the proposed project, and continue to Step 3.

3. If funds are received from Sourcewell, what program and/or services will your entity provide, please check below, and continue to Step 4:

- |   |  |
|---|--|
| <input type="checkbox"/> administrative services  | <input type="checkbox"/> vocational rehabilitation   |
| <input type="checkbox"/> curriculum development   | <input type="checkbox"/> health, diagnostic, and child development services and centers  |
| <input type="checkbox"/> data processing  | <input type="checkbox"/> leadership or direction in early childhood and family education   |
| <input type="checkbox"/> distance learning and other telecommunication services   | <input type="checkbox"/> community services  |
| <input type="checkbox"/> evaluation and research  | <input type="checkbox"/> shared time programs  |
| <input type="checkbox"/> staff development  | <input type="checkbox"/> fiscal services and risk management programs, including health insurance programs providing reinsurance or stop loss coverage |
| <input type="checkbox"/> media and technology centers   | <input type="checkbox"/> technology planning, training, and support services   |
| <input type="checkbox"/> publication and dissemination of materials   | <input type="checkbox"/> health and safety services  |
| <input type="checkbox"/> pupil personnel services   | <input type="checkbox"/> student academic challenges   |
| <input type="checkbox"/> planning   | <input type="checkbox"/> cooperative purchasing services   |
| <input type="checkbox"/> secondary, postsecondary, community, adult, and adult vocational education                             |  |
| <input type="checkbox"/> teaching and learning services, including services for students with special talents and special needs |  |
| <input type="checkbox"/> employee personnel services  |  |

If No, **STOP**. Funding cannot be awarded for projects that do not involve the programs and services outlined in the enabling statute.

4. Can the proposed project be implemented in a manner that ensures no conflicts of interest exist or any existing conflicts may be resolved?
- If No, **STOP**. Public expenditure is not authorized for any project that may involve conflicts of interest.
  - If Yes, identify any conflicts of interest that have been resolved and how, and continue to Step 5.
5. Will the proposed project serve the best interests of Sourcewell and its five-county service area?
- If No, **STOP**. Public expenditure not authorized when it may conflict with the best interests of the entities involved.
  - If Yes, describe how and continue to Step 6.
6. Is the proposed project permitted under the laws, rules, or policies that govern the applicant entity(ies) and Sourcewell?
- If No, **STOP**. Public expenditure is not authorized when it may conflict with the laws, rules, or policies that govern the entities involved.
  - If Yes, continue to Step 7.
7. Will Sourcewell and the collaborating entities be able to satisfy all terms, conditions, policies, procedures, and other requirements associated with the proposed project?
- If No, **STOP**. Public expenditure is not authorized for any project that will prevent the entities involved from complying with any associated requirements.
  - If Yes, continue to Step 8.
8. Will the proposed project be implemented in a manner that ensures no public funds will be used to purchase or make a gift, donation, prize, or payment for dues to participate in a private organization?
- If No, **STOP**. Public expenditure is not authorized for these activities.
  - If Yes, the proposed project serves a public purpose.



## Certification

I certify that the information contained in this application and in any related attachments is true and correct to the best of my knowledge and belief, and that I have the authority to apply for Community Match Funds in the amount requested.

Finally, I certify that no funds awarded as a result of this application will be used to pay costs incurred prior to receipt of the award, or loans or reimbursement to individuals or businesses; or to fund political, religious activities, discriminatory, or illegal activities. In addition, if I am signing this application on behalf of a nonprofit, I certify that no funds awarded as a result of this application will be used to pay capital expenses.

---

Signature

---

Printed Name

---

Title

---

Entity

---

Date