IRVINE CHRISTIAN FOUNDATION

GRANT GUIDELINES AND APPLICATION PROCEDURE

**Grant Basics:**

The foundation is organized for all charitable, religious, and educational purposes for the making of distributions to organizations that qualify as exempt organizations under Section 501(c)(3) of the Internal Revenue Code. As such, the Foundation neither lends nor grants money to individuals. More particularly, the Foundation was created to support Christian based ministries in Navarro County, Texas that serve the spiritual, educational, and physical needs of people helping them to know the love of Christ and live a dedicated Christian life to accomplish our Lord’s Great Commandment and The Great Commission to win souls for Christ.

**How to Apply:**

Complete the Grant Application Form and return it to:

 Irvine Christian Foundation

 P.O. Box 366

 Corsicana, TX 75151-0366

**When to Apply:**

The Grant Committee meets on a semi-annual basis. Applications will be accepted from March 1st – April 15th for grants awarded in June, and September 1st – November 15th for grants awarded in December. Applicants will be notified whether grant request is approved at that time. Each organization is limited to one application within a twelve-month period.

IRVINE CHRISTIAN FOUNDATION

GRANT APPLICATION

Use the form. All information must be provided. Incomplete requests cannot be considered.

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Legal Name of Organization: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Type of Organization: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Incorporation/Formation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City/State/Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name and Title of Contact Person: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Tax ID Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Attach copy of IRS Determination Letter of 501(c)(3) organization)

Telephone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Fax Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Website Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Has organization ever received a grant from the Irvine Christian Foundation? Y N

Amount of Request: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Total Project Cost: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Provide the following information on no more than two separate sheets of paper. Use 10 or 12 typeface.

1. A brief history of the organization, reasons for its formation, its charitable purpose, and description of existing services. Include current programs and accomplishments, number of staff, volunteers, and current population served (e.g. number served per year, geographic location, socio-economic status, gender, and age.)
2. As a major goal of the Foundation is Christ’s Great Commandment and to win souls for Christ, please give a brief explanation of how your organization is accomplishing this.
3. Provide a description and need for the proposed program or project for which the funds are requested.
4. A list of all entities asked to give financial support for the proposed project (include their response date and dollar amount.)
5. Provide a statement of faith form from your organization and provide answers to the following questions:
	1. Does your organization believe the Bible to be the only inspired and true word of God without error? [ ]  Yes [ ]  No
	2. Does your organization believe in only one God who exists in three persons: Father, Son, and Holy Spirit? [ ]  Yes [ ]  No
	3. Does your organization believe that Jesus Christ is God, born of a virgin, was crucified, died, buried, and resurrected and now sits on the right hand of God? [ ]  Yes [ ]  No
	4. Does your organization believe God’s design for sexual intimacy is to be expressed only within the context of marriage and that God instituted marriage between one man and one woman and is exclusively the union of one man and one woman? [ ] Yes [ ]  No
	5. Does your organization believe that God created all human beings in His image and therefore believe that human life is sacred from its beginning at conception to its natural end and therefore every unborn has a guaranteed right to life which cannot be taken? [ ]  Yes [ ]  No
6. Charitable organizations, including churches, are not permitted by IRS rules to provide unfair benefits to their insiders, engage substantially in lobbying activities, intervene in political campaigns, or serve any non-charitable private interests. In addition, if the organization should dissolve, all funds must be granted to another church or public charity.

Does the organization comply with these IRS rules?

[ ]  Yes [ ]  No

7 IRS rules require that your organizing document state your religious purpose. Does your organizing document meet this requirement?

[ ] Yes [ ] No

1. IRS rules require that if your organization is dissolved in the future, your assets must be distributed for charitable purposes, such as religious or educational purposes. This requirement is satisfied if your organizing document contains this provision.

 8a. Does your organizing document specify that your organization’s assets must be distributed for charitable purposes upon dissolution?

[ ]  Yes [ ]  No

 *If yes, skip to question #9. Otherwise, please answer 8b immediately below.*

8b. The above requirement is also satisfied if your organization was incorporated in Arkansas, California, Louisiana, Massachusetts, Minnesota, Missouri, Ohio, or Oklahoma. Is your organization a corporation formed in one of the listed states?

[ ]  Yes [ ]  No

9 Does the organization offer formal membership?

[ ]  Yes [ ]  No

10 Approximately how many active members are currently enrolled in the church?

11 Does the organization conduct regularly scheduled worship services or religious meetings?

[ ]  Yes [ ]  No

12 What is the average attendance at the worship services?

13 Is there an established place of worship?

 Yes, the address is

 No. State where the services are held and how the site is selected:

14 In addition to worship services, what other religious services are conducted, such as baptisms, bar mitzvahs, funerals? Attach a schedule of worship and other religious services (for example, a weekly bulletin announcing key events).

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15 The organization’s written creed or statement of faith is: (choose all that apply)

[ ]  New Testament [ ]  Old Testament

 [ ]  Qur’an [ ]  Other:  \_\_\_\_\_\_\_\_\_

 [ ]  The organization does not have a written creed or statement of faith.

16 The organization’s formal code of doctrine and discipline for its members is:

 (Choose all that apply)

 [ ]  Catechism [ ]  Talmudic Law/Halacha

 [ ]  Hadith/Sunnah [ ] Other: \_\_\_\_\_\_\_\_\_

17 Does the organization produce or distribute literature of its own, such as pamphlets, newsletters, or brochures, teaching or outlining important religious concepts or events? Attach a sample.

[ ]  Yes [ ]  No

18 Does the organization have a school for the religious instruction of the young?

[ ]  Yes [ ]  No

19 Does the organization have a school for the preparation of deacons, ministers, rabbis, or pastors?

[ ]  Yes [ ]  No

20 Were the current deacons, ministers, rabbis, or pastors formally ordained after completing a prescribed course of study?

[ ]  Yes [ ]  No

21 Are the current deacons, ministers, rabbis, or pastors members of an organization of ordained ministers?

[ ]  Yes [ ]  No

22 The organization’s distinct supervisory structure for its operation is:

 [ ]  Board of Directors [ ]  Board of Trustees

 [ ]  Deacon Board [ ]  Other: \_\_\_\_\_\_\_\_\_

 [ ]  The organization does not have a distinct supervisory structure.

 The undersigned represents that he or she has the authority to sign this application on behalf of the above organization and that Irvine Christian Foundation will be notified if any of the organizational or operational information contained herein changes or if the organization is officially recognized by the IRS as tax-exempt.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Printed Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_