

# Owensboro Rotary Club Foundation, Inc.



## Community Benefit Contribution Policy and Application Form

*The Owensboro Rotary Club Foundation, Inc. Board of Trustees meets twice a year, once in the spring and once in the fall, for the purpose of considering community benefit allocations. Applications must be received in the prescribed form on or before March 31 to be considered at the spring meeting and on or before September 30 to be considered at the fall meeting.*

## **Community Benefit Contribution Policy**

Rotary cares through working to feed the hungry; by helping to lift people out of poverty, by providing every adult with basic reading and mathematical skills; by protecting innocent children from abuse and neglect; by undertaking projects for our community that will make Owensboro a better place in which to work and live.

### **Guidelines**

1. The Owensboro Rotary Club Foundation, Inc. will consider making financial contributions to eligible community organizations primarily in four areas:

- Health and Human Services
- Civic Programs
- Education
- Culture and the Arts

Programs sponsored by Rotary will be given first priority. Involvement by Rotary members will also be considered.

2. Groups eligible for support may include:

- 501 ( c ) (3) not-for-profits
- Other civic organizations
- Some public funded organizations

3. Services supplied by requesting organizations would be available to citizens within the Owensboro area or supported by Rotary.

4. Support generally will cover a one-year commitment.

5. Applications shall demonstrate a commitment to provide services regardless of race, religion, sex, age, disability, or national origin.

6. Rotary does not contribute to political organizations, no political fund-raising events, or individual political campaigns.

### **How To Apply For Community Benefit Contribution**

Through our annual budget process, Owensboro Rotary will establish a community benefit fund for eligible applicants that reflects our financial ability. We will make every effort to allocate these funds in the fairest possible way. You may submit a request to the President of the Board of Directors by using the community benefit application forms.

Please submit your request to:

**Board of Directors  
Owensboro Rotary Club Foundation, Inc.  
P.O. Box 1824  
Owensboro, KY 42302-1824**



**Owensboro Rotary Club Foundation, Inc.  
270.926.2922**

## Application for Community Benefit Contribution

**INSTRUCTIONS:** Complete each section of this application with special attention to completeness and accuracy. You may attach additional exhibits as needed. Please enclose a copy of last year's financial statement (if applicable) and your current budget.

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### Application Identification

Organization \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

City, State, Zip Code \_\_\_\_\_

Contact Person \_\_\_\_\_

(title)

(phone)

**Briefly describe your organization and its mission** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### Financial Status/Funding

Is your organization 501 ( c ) (3) non-profit? \_\_\_\_ Yes \_\_\_\_ No (please check appropriate answer)

- Please enclose a copy of your IRS Letter of Determination.

Briefly describe the amount and source of funding for your annual budget. \_\_\_\_\_

\_\_\_\_\_

**Funding Request** What is the amount of your request? \_\_\_\_\_

Specifically describe the project for which you are requesting funds. \_\_\_\_\_

\_\_\_\_\_

How will the funds be used? Staff, direct service, equipment? \_\_\_\_\_

\_\_\_\_\_

What geographic area will this project benefit? \_\_\_\_\_

Identify who will benefit from the project and estimate how many people would benefit. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

When do you propose to start and finish your project? \_\_\_\_\_

How will you evaluate the effectiveness of the project? \_\_\_\_\_

\_\_\_\_\_

How will the Rotary contribution be acknowledged? \_\_\_\_\_

**Signature and Date** Signature \_\_\_\_\_ Date \_\_\_\_\_

Typed Name/Title \_\_\_\_\_