

**City of Muncie
American Rescue Plan: Nonprofit Fund
Grant Application for Nonprofit Programs**



Organization Information	
Organization Name:	Click or tap here to enter text.
Leadership Name & Title:	Click or tap here to enter text.
Telephone:	Click or tap here to enter text.
Email Address:	Click or tap here to enter text.
(If different than above) Application Contact Name & Title:	Click or tap here to enter text.
Telephone:	Click or tap here to enter text.
Email Address:	Click or tap here to enter text.
Nonprofit Address: MUST BE LOCATED WITHIN THE CITY LIMITS OF MUNCIE TO BE ELIGIBLE	Click or tap here to enter text.
Organization is Certified as a 501(c)(3) and in Good Standing:	<input type="checkbox"/> Yes <input type="checkbox"/> No Entity Identification Number: _____
Organization does not engage in discrimination based on age, race, sex, religion, national origin, disability, economic status, or sexual orientation.	<input type="checkbox"/> Yes <input type="checkbox"/> No
Brief Agency Description: [2500 characters maximum]:	Click or tap here to enter text.
Check Which COVID-19 Impact(s) Your Project/Program Address: PLEASE CHECK <u>ALL</u> THAT APPLY	<input type="checkbox"/> Food Assistance <input type="checkbox"/> Rent/Mortgage <input type="checkbox"/> Utility Assistance <input type="checkbox"/> Home Repairs <input type="checkbox"/> Weatherization <input type="checkbox"/> Internet Access <input type="checkbox"/> Job training <input type="checkbox"/> Services to address homelessness <input type="checkbox"/> Affordable Housing <input type="checkbox"/> Resource navigation assistance <input type="checkbox"/> Accessing childcare <input type="checkbox"/> Accessing early learning services <input type="checkbox"/> Addressing social/emotional/mental health needs of people <input type="checkbox"/> Enhanced services for child welfare involved families and foster youth <input type="checkbox"/> Violence Intervention Programs <input type="checkbox"/> Loss of revenue because of COVID-19 <input type="checkbox"/> Other (please explain): Click or tap here to enter text.

**City of Muncie
American Rescue Plan: Nonprofit Fund
Grant Application for Nonprofit Programs**



Project/Program Information	
Please briefly describe the needs that this funding would address. [3000 characters maximum]:	Click or tap here to enter text.
Please detail how many people you would directly assist, or how many would be affected with organizational funding. Please include demographics of those served. [3000 characters maximum]:	Click or tap here to enter text.
Please detail how this program/project addresses disparities in public health outcomes, negative impacts on households and individuals disproportionately impacted, or educational disparities. [3,000 characters maximum]:	Click or tap here to enter text.
Funding Request and Budget Information	
Amount of Funding Request:	Click or tap here to enter text.
If full funding is not awarded, how will you deliver this project/program?	Click or tap here to enter text.
For this project/program, who else have you sought funding from?	Click or tap here to enter text.
Please provide a simple budget for how funds would be used. (You may also attach the budget to this document).	Click or tap here to enter text.
Paycheck Protection Program Information	
Have you applied for a loan through the PPP? (Paycheck Protection Program)	<input type="checkbox"/> Yes If Yes, which round? <input type="checkbox"/> Round 1 <input type="checkbox"/> Round 2 <input type="checkbox"/> No
If yes, please provide the status.	<input type="checkbox"/> Approved <input type="checkbox"/> Round 1 <input type="checkbox"/> Round 2 Has your PPP been forgiven? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Declined <input type="checkbox"/> Round 1 <input type="checkbox"/> Round 2 If declined, why?
If approved, please provide total approved amount of loan(s).	Click or tap here to enter text.
If you did not apply for PPP, please advise why your organization did not apply.	Click or tap here to enter text.

City of Muncie
American Rescue Plan: Nonprofit Fund
Grant Application for Nonprofit Programs



In addition to answering these questions, applicants will be asked to upload:

- 501(C)3 IRS Determination Letter
- 2019 Profit and Loss Statement
- 2020 Profit and Loss Statement
- 2021 Budget compared to actual
- Most recent Balance Sheet (showing cash, cash reserves, accounts payable/receivable)

APPROVED