COMMUNITY FOUNDATION
Capital Region Community Foundation

2027 SAMPLE MINI-GRANT APPLICATION

This is a sample application, please do not submit this form.
Please review our guidelines and access the online application here:
https://ourcommunity.org/nonprofit-support/grants-at-the-community-foundation

IS YOUR ORGANIZATION ELIGIBLE FOR A MINI-GRANT? Mini-grants are limited to local organizations whose annual operating budget is less than $200,000. Eligibility will be verified using the Federal Tax ID you provide in your application. Local chapters of a larger entity, or programs that are part of a larger church ministry may not be eligible unless the larger entity's budget is under the $200,000 threshold. ***Applicants must demonstrate a minimum of two consecutive years of successful program delivery aligned with the organization's mission.***

Mini-Grant requests may be for programming, operations or project support. However, event or festival sponsorships and other time-sensitive programs or projects are not eligible for a mini-grant.

The 2027 Mini-Grant application period is December 1, 2026 through February 1, 2027. Your grant request will be included in a catalog which is presented to Community Foundation fundholders and donors for funding consideration throughout the year. Requests may be funded at any time throughout the year based on the giving interests of the fundholder. **All current Mini-Grant requests will expire on December 31, 2027, whether they have received funding or not.**

Here are a couple of tips for a successful mini-grant application:

- Be concise about what the grant will fund and the impact it will have on those you serve.
- Remember that our donors will be receiving 35-40 mini-grant requests for their consideration. To stand out, you will need to be clear about how their funds will be used to benefit the community.

Here's what we will ask you when you complete a mini-grant application:

APPLICANT INFORMATION:

- Grant Contact Person: Name, Title, Email and Phone.
- Organization name, mailing address, website address, mission statement and annual operating budget
- Director/CEO of the Organization: name and title
- Federal Tax ID Number and the year the organization began providing services
- Are you a 501(c)3 tax exempt organization? Y/N If not a 501(c)3, what is your exemption status?
- If your organization is not a 501c3 non-profit, you will need another organization to act as your fiscal agent for this grant if awarded. Provide the fiscal organization name, contact phone and email.

Demographic data: ***For this section, Person of Color is defined as anyone who does not identify as white.***

- Number of paid employees (*full & part time*) _____ White_____ People of Color ___
- Which of the following best represents your CEO or Executive Director: White_____ Person of Color ___
- Number of board members: _____ White_____ People of Color ___
- Number of Board Members who make a financial gift to your organization annually _____
- Number of individuals typically served by your organization in one year in each of the following areas:
  - Clinton County ___ Eaton County ___ Ingham County ___ All other counties ___
- Does your organization collect racial demographic data on the people that directly benefit from your services?
- Please provide or estimate the number of ONLY tri-county individuals served in the past year: White___ POC___

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PROJECT INFORMATION

Which of the following categories does this grant fall under? The opportunities listed in our catalog are grouped by category, based on the list below.

- **Animals** (wildlife, animal welfare, etc.)
- **Arts & Culture** (all art forms, music, museums, history, etc. Festival/event sponsorships are not eligible.)
- **Basic Need Items** (non-food items such as personal care items or diapers)
- **Food** (supplies or support for pantries, community meals, etc.)
- **Education** (training or education for all topics such as life skills, technology, parenting, language, employment skills, entrepreneurship, etc.)
- **Environment** (nature centers, land preserves, environmental concerns, climate, recycling etc.)
- **Health** (general wellness, disease support, fitness/nutrition, etc.)
- **Housing & Shelter** (combatting homelessness, housing initiatives)
- **Mental Wellness** (counseling, life skills, trauma, crisis intervention, etc.)
- **Youth Development** (mentoring, tutoring, leadership skills, childcare, etc.)
- **Senior Citizens** (programs, activities, support, etc.)

Please describe your grant request. Please be very clear and focus specifically on what the funds would be used for and provide quantities whenever possible (for example the number of meals provided, the number of people served and for how long, etc.) (500 characters max).

Grant Budget: List all expenses included in this grant. Total should equal the amount you are requesting!

ATTACHMENTS

- Please upload your organization's logo for publication purposes.
- Provide your Current Operating Budget, listing all sources of projected income and expenses.
- Provide Revenue and Expense statements for the past two fiscal years, listing all sources and amounts of income and expenses. Acceptable documents are: Profit & Loss statement or a Statement of Financial Activity. Please do not provide your bank statement or a tax return. See our website for samples.

If you would like to discuss a grant idea, or if you have any questions, please contact us.

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