

Wythe County
CARES Non-profit
Assistance
Grant
GRANT APPLICATION

The **Non-profit Assistance Grant** has been made available by **Wythe County** through **Coronavirus Aid, Relief, and Economic Security (CARES) Act** funding to support non-profit organizations providing services to Wythe County communities. The grant program provides one time, emergency funding to eligible applicants demonstrating that their services to Wythe County communities have been impacted by COVID-19 or limited by government orders. Grant funds may not be used for the same purpose as previously received CARES Act funding (ex: if the organization has received PPP funds, they may not use this grant to cover payroll for the same time period)

Awards of \$500 - \$7,500 will be given based on the number of applicants, demonstrated community impact, and services provided. Because there are limited funds available, priority will be given to **food assistance programs, housing assistance programs, and emergency assistance**. *Applications are subject to verification. Application submission does not guarantee grant awards. Each application must be accompanied by all required documentation to be eligible for consideration. Complete applications will be considered after the December 18, 2020, deadline and grants will be awarded prior to January 1, 2021.*

Applications must be submitted by December 18, 2020, for consideration.

ELIGIBILITY CRITERIA Wythe County organizations meeting all the following eligibility criteria are encouraged to apply:

- Must be an existing non-profit organization, located and operating in Wythe County pre-COVID-19 (March 1, 2020).
- Must provide proof of non-profit status for 501(c)3, 501(c)4, 501(c)5, or 501(c)6 qualified organizations.
- Must demonstrate impacts due to COVID-19, (e.g., closure or suspended operation, interruption of services, depressed fundraising, layoffs, program impacts, increased demand for services)

ELIGIBLE GRANT USES Grant funds must be expended in compliance with state and federal law. Funds may be used to mitigate the negative financial and operational impacts caused by COVID-19, which may include:

- Operations (i.e., payroll, rent, mortgage, supplies, monthly expenses, insurance, etc.)
- Equipment and inventory purchases
- Programmatic financial support
- Deep cleaning services, PPE, protective barriers, etc.
- Other critical operating expenses

INELIGIBLE GRANT USES Grant funds may not be used for payment of town or county utility expenses (e.g., water and sewer bills)

REQUIRED DOCUMENTATION

- Completed Application
- Proof of nonprofit status
- Most recent federal tax returns (IRS Form 990)
- W9 Form
- Profit & Loss statement or supporting financial documents for 2019, or most recent audit
- Profit & Loss statement or supporting financial documents for 2020 to date

Organization Name: _____

Non-profit status: ☐ 501(c)3 ☐ 501(c)4 ☐ 501(c)5 ☐ 501(c)6

When was the organization established?: _____ **EIN:** _____

Applicant Name: _____ **Title:** _____

(applicant certifies they are authorized to apply for grant funding for this organization)

Address

Phone

City/State/Zip

Email

Organization Website: _____ **Facebook:** _____

Have you received any other COVID-19 funding? Source: _____ Amount: _____

Source: _____ Amount: _____

Organization employees as of January 1, 2020: _____

Organization employees as of December 1, 2020: _____

Please describe the work your organization does and the types of services provided to Wythe County Residents:

How has COVID impacted your organization?

Please describe how funds will be used along with a budget for those uses:

I have attached:

- ☐ Proof of non-profit status
- ☐ Most recent federal tax returns (IRS Form 990)
- ☐ W-9 Form
- ☐ Profit & Loss statement or supporting financial documents for 2019, or most recent audit
(statement spreadsheet available on madewythepride.org)
- ☐ Profit & Loss statement or supporting financial documents for 2020 to date

I certify that:

- ☐ The information I have provided is accurate
- ☐ The organization is in good standing with the Virginia State Corporation Commission
- ☐ I am authorized to apply for this grant on behalf of the organization

Upon approval this application becomes a binding contract between the entity listed below and Wythe County. I understand all applications and materials submitted will become public record and subject to the Freedom of Information Act (FOIA). Documents identified as proprietary (financial documents, for example) are exempt under FOIA.

☐ If awarded this grant, I agree to abide by the program guidelines and provisions of the grant agreement.

**AUTHORIZED
ORGANIZATION
REPRESENTATIVE**

Organization Name: _____

Signer's Printed Name: _____

Signature: _____ Date: _____

Additional applications can be found at www.madewythepride.org. Completed applications and attachments may be emailed to john.matthews@wytheida.org. Mail or drop off applications at 190 South 1st Street, Wytheville, VA 24382.

For any questions or program clarification, please contact our administrative partner:



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