

Criteria for Birthday and Thank Offering Grants

The Birthday and Thank Offering have a long tradition with Presbyterian Women (PW) Please note that the Birthday Offering has primarily funded capital improvement projects so can provide larger grants to 1–2 agencies a year whereas the Thank Offering has funded smaller new or expanded projects or small capital improvement projects to 25–30 projects a year.

To qualify, a program must

- have a clearly defined purpose that meets basic human needs. The purpose must be in accordance with mission goals and policies of the Presbyterian Church (USA);
- provide a form of aid that has been requested or identified to meet the needs of the people served
- be a creative project less than three years old or an existing project moving in a new direction

A proposal must

- describe how the project will improve the lives of people served and how they will be involved with the project
- indicate how the project will work with women, children, youth, young adults, persons of diverse races and/or ethnicities, and/or persons with disabilities, to enhance their quality of life;
- list all other sources of money being requested and/or already awarded for this project;
- describe how the program will continue after the grant (if received) is spent;
- explain how the project's progress will be reported and success measured;
- provide a written endorsement from a Presbyterian Women's group of a local church, PW of the Presbytery Coordinating Team, OR a PW of a Synod Coordinating Team. A letter from the Presbytery or Synod is desirable, but not necessary. **If outside U.S.A., a written endorsement from an indigenous church that is in relationship with the PC(USA) must be provided.** *Please allow at least six weeks to obtain an endorsement.*
- be signed by the writer of the proposal and another person responsible for this project (preferably, the board chairperson).
- Notify Cindy Goodman at cindy.goodman@pcusa.org if other funding for the project has been received since submission of the proposal. Notification must be received before August 1 for the Birthday Offering and before February 1 for the Thank Offering.

Grants awarded

- are a one-time grant. Although the project does not have to be completed in a single year, the project must be underway within three years of receiving the funds;
- may not be used for payment of current debt, creating or maintaining revolving loan funds, fund a permanent endowment, nor **to offset the ongoing operating budget;**

Grant recipients

- must return an interim report six months after receiving the first payment and all supporting documentation before the second payment will be made.
- must return one-year and two-year follow-up reports
- must notify Presbyterian Women of any change in the proposal, leadership or address by contacting the PW associate for special offerings, cindy.goodman@pcusa.org.
- **Priority will be given to applicants that have not been previously funded by the Creative Ministries Offering Committee**

Assembly instructions

Two (2) separate packets of material must be assembled. Each should include

- a completed application form
- completed Statement of Confirmation of Identity by Third Party (for international project)
- an endorsement letter must come from PW at some level for US projects and a church in relationship with the PC(USA) for international projects. (See previous page)
- budget for proposal submitted for funding (must be in U.S. currency)
- operating budget for your agency showing most current expenses and revenues to date
- latest audited financial statements for agency (Birthday Offering only)
- completed [W-9 form \(for domestic project\)](#) OR completed [W-8 \(for international project\)](#)— these forms are not included in the Word version of this application, but are available from www.irs.gov

Do not use any type of folders or binders while assembling the packets and do not attach the cover letter to the application.

Staple the top left corner of each packet and mail to:

Presbyterian Women

Attention: Cindy Goodman

100 Witherspoon St., Louisville, KY 40202-1396.

Grant	Application Postmark Deadline	Decision	First payment	Second payment
Birthday Offering	May 15	September of same year	October of following year	May two years after application
Thank Offering	September 15	March of following year	June of decision year	December of decision year

Applications that are clear, typed, completely filled out and accompanied with all relevant endorsement(s), documentation, budget(s), method of payment form, bank letterhead if requesting a wire transfer, and/or background information will be processed for grant consideration. **Incomplete grant applications (missing any information requested) will not be considered.**

Creative Ministries of Presbyterian Women

Application for Thank or Birthday Offering Grants

Thank Offering Deadline: Sept. 15

Request range: \$5,000–\$50,000

Birthday Offering Deadline: May 15

Request range: \$100,000–\$300,000

This is an application for a grant through the (*check one*)

Thank Offering

Birthday Offering

Total Cost of Project:

Amount Requested:

Given that the Thank and Birthday Offering are one-time grants, requests for funds predominantly for salaries will not be given high consideration, nor will applications from organizations previously awarded grants by PW's Creative Ministries. Forty percent of Thank Offering grants are allocated to health-related projects.

Organization Name:

Project Name:

Project Address:

Website:

Presbytery:

Synod:

Church or Council (if outside United States):

Start-up date* for project:

***Project must be underway within 12 months of receiving first payment.**

Part I—Project Information

1. Purpose of the project you are submitting for funding (50 words or less)

2. Please describe how you will achieve the goal or purpose stated above. (Project description)

3. Describe the population or issue served by this project. How many persons will be served? Is this a new program or an expansion of an existing program?

4. Specifically, how will this grant be used? (Please attach a budget for the grant request.) **If the budget is greater than the grant request, indicate which line item(s) will be funded through this grant from Presbyterian Women and which line items will be funded through other sources of funding.**

5. How will the project continue after this one-year grant?

6. How will you know whether your project has achieved its goal or purpose?

7. If funding is granted, would you be willing to host site visits or present your program as requested by local Presbyterian Women's organizations?

Part II—Project Funding

1. List other sources (and possible sources) for funding being requested for this project:

Confirmed Funding

<i>Source</i>	<i>Amount requested</i>	<i>Amount granted</i>	<i>Date of decision</i>
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Requested But Unconfirmed Funding

<i>Source</i>	<i>Amount requested</i>	<i>Date of decision</i>
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Other potential sources of funding being explored or considered

2. If your organization previously received grants through the Birthday or Thank Offering for another project, identify date(s) of funding and the amount of the award.

Date	Amount of Award	Name of Project	Birthday or Thank Offering
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Part III—Organizational Information

1. Organization's mission statement (50 words or less)

2. Please attach a copy of your annual organizational budget in U.S. dollars from the previous year, showing projected and actual expenses and income for the fiscal year.

3. Do you have an annual audit? yes no

Applicants for Birthday Offering must also attach a copy of last audited financial statement.

4. How would you best describe the project you are requesting funding in terms of a) population served and b) program.

Population served by this project (check all applicable boxes)

- | | | |
|-----------------------------------|--|--|
| <input type="checkbox"/> Infants | <input type="checkbox"/> Families | <input type="checkbox"/> Immigrants |
| <input type="checkbox"/> Children | <input type="checkbox"/> People with disabilities | <input type="checkbox"/> Trafficking survivors |
| <input type="checkbox"/> Youth | <input type="checkbox"/> Veterans | <input type="checkbox"/> People who are homeless |
| <input type="checkbox"/> Adults | <input type="checkbox"/> Racial ethnic minorities | <input type="checkbox"/> Overseas |
| <input type="checkbox"/> Seniors | <input type="checkbox"/> Domestic violence survivors | |

Focus of project (check the most applicable box)

- | | | |
|---|---|---|
| <input type="checkbox"/> Agricultural Development | <input type="checkbox"/> Shelter | <input type="checkbox"/> Hospitality |
| <input type="checkbox"/> Criminal Justice | <input type="checkbox"/> Affordable Housing | <input type="checkbox"/> Clean Water |
| <input type="checkbox"/> Education | <input type="checkbox"/> Legal Services | <input type="checkbox"/> Immigration services |
| <input type="checkbox"/> Economic Development | <input type="checkbox"/> Social Services | <input type="checkbox"/> Maternal and Child Nutrition |
| <input type="checkbox"/> Hunger or Food Programs | <input type="checkbox"/> Leadership Development | <input type="checkbox"/> Health |
| <input type="checkbox"/> Community Organizing | <input type="checkbox"/> Other (specify) | |

Method of Payment

If your project is funded, select the method of payment you prefer.

International projects: unless you have a sponsor in the United States, payments will be made via wire transfer.

Check

Payable to: _____

Mail check to : _____

Wire Transfer

Provide documentation from the bank on bank letterhead with the following information:

- Name of Bank
- Bank address (including country)
- Bank's ABA #
- Account Name
- Account Number
- Corresponding Bank and address (if applicable)
- Whether there are any limitations on acceptance of US Dollars

U.S. Projects: Tax Payer Identification Number (substitute W-9)

Furnishing your correct taxpayer identification number (TIN) and making appropriate certification on this form will prevent payments from being subject to backup withholding and possible \$50 penalty imposed by the IRS.

Name _____

Address _____

City _____ State ____ Zip Code _____

Tax status—check only one box.

Not for Profit 501(c)(3) Entity Name _____
Employer Identification Number _____

Church/Corporation Name _____
Employer Identification Number _____

Under the penalties of perjury, I certify that the information provided on this form is true, correct, and complete.

Signature _____ **Date** _____



Statement of Confirmation of Identity by Third Party

This form must be completed by **International Projects applying for a grant**. This statement—to be signed and notarized by a third party—attests that the payee’s name and address are correct and legitimate.

Payee’s Name _____

Payee’s Address _____
(Including Country)

I certify that the information provided on this form is true, correct, and complete.

Name _____
(please print)

Signature _____

Title

Date