

## **COMMUNITY INVESTMENT APPLICATION GUIDELINES**

Below is a list of guidelines that the Budget Committee of Council will take into consideration when reviewing and recommending community investment funding. This guideline is not to be used as a guarantee to receive community investment funding.

	Ability of the agency to demonstrate a public purpose to the residents of Mount Pleasant
	o Public purpose is defined as the promotion of the public health, safety, morals, general
	welfare, security, prosperity, and contentment of all (or at least a substantial part
	thereof) to the residents
	Stability of the organization
	<ul> <li>Length of existence and number of years serving Mount Pleasant</li> </ul>
	<ul> <li>Financial condition (unrestricted financial reserves as compared to annual expenses</li> </ul>
	from last completed fiscal year)
	Reliance on government funding
	Effectiveness of the organization's spending
	<ul> <li>Percent of expenses spent directly on programs</li> </ul>
	<ul> <li>Measured by the SC Secretary of State</li> </ul>
	Services provided to the residents of Mount Pleasant
	Application is received by its appropriate deadline and is complete and accurate
	If returning applicant, a verifiable performance report is completed fully and accurately
	COMMUNITY INVESTMENT APPLICATION REQUIREMENTS
Below	is a list of requirements for approved community investment funding applications.
	A signed agreement as a pre-requisite to receiving funds that describes how the funds will be
	used and by when they will be spent
	Agreement that monies spent differently than described in the application or spent on political
	activities must be returned to the Town
	Agreement that any unspent funds must be returned to the Town within 30 days of the end of
	the program or the Town's fiscal year
	A request in writing, after July 1, 2019 and before June 30, 2020, to the Town's Budget Manager
	to receive the funds.



☐ A final report on the use of the funds must be submitted within 30 days of the end of the program or fiscal year

## COMMUNITY INVESTMENT APPLICATION CHECKLIST

Submit Application by February 1, 2019 deadline. No late applications will be con	sidered.
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- ☐ Complete Current Application
  - If returning to the Committee for funding, a completed Performance Report must be completed for previously funded events (last page of application).
- ☐ Attach a recent financial report
  - o Annual audit if revenues are \$1,000,000 or more, or
  - o IRS Form 990 if revenues are less than \$1,000,000, or
  - o Financial statement if revenues are less than \$1,000,000
  - o Demonstrate all entities providing funding to your organization
- ☐ Provide Proof of Exemption Status
  - Copy of Tax Exempt Determination Letter
  - Federal Employee Identification Number
- **□** W-9 (First time applicants only)
- ☐ If possible, email all items to swilber@tompsc.com or mail to:

Town of Mount Pleasant
Community Investment Application
Shawna Wilber, Budget Manager
100 Ann Edwards Lane
Mount Pleasant, SC 29464

Failure to provide completed forms on time may disqualify the applicant from receiving support. Your application will be discussed at a Town Council Committee meeting during the budget process. Applicants will be required to appear before the Committee to present their request. The meeting will be duly advertised once scheduled. Applicants will be notified in writing of Town Council's decision.

Staff will rank all applications with the following scales, for a total of 20 points, with rankings presented to the Committee.

Length of time	Percent spent directly on		Number of population		Required service in lieu		Reliance on government		
serving Town	programs		served		of Tow	<u>1</u>	funding		
> 10 years 1	0% - 50%	1	0 - 20,000	1	No	0	76% - 100%	1	
> 20 years 2	51% - 80%	2	20,001 - 40,000	2	Yes	4	51% - 75%	2	
> 30 years 3	81% - 90%	3	40,001 - 60,000	3			26% - 50%	3	
> 40 years 4	91% - 100%	4	> 60,000	4			0% - 25%	4	

## Town of Mount Pleasant Community Investment Application Fiscal Year 2019-2020

**DEADLINE:** February 1, 2019

MAIL TO: Town of Mount Pleasant, Community Investment Funding Application

100 Ann Edwards Lane Mount Pleasant, SC 29464; swilber@tompsc.com

Presentations to the Budget Committee of Council shall be no more than 5 minutes in length and should address the items listed below as well as the questions listed on page 2 of the application.

below	as well as the questions listed on page 2 of the application.	
1.	Name of Applicant Organization:	
2.	Mailing Address:Street or P. O. Box / City / State / Zip Code	
3.	Name of Project/Program:	
4.	Project Director:	
5.	Applicant Category: (Check the description that best describes your organization)  Government Agency  Eleemosynary  Private Business  Other	
6.	Please check which tax status applies to your organization:  Not-For-Profit as registered with the Secretary of State of South Carolina Date of Incorporation Charter #  Federal Exempt Under IRS Code 501(c) Date of IRS Tax Exempt Determination Letter (Attach copy of letter)	
7.	Federal Employee Identification Number (EIN)(Please provide proof of Exemption Status and Federal Employee Identification Number)	
8.	Year organization was founded: Year first started serving Town residents:	
9.	Amount of Request:	
10.	Have you received funds from the Town of Mount Pleasant previously?  Yes No  If yes, how much? What Years?	
submit the Tov	nts must complete this application in its entirety. Supplemental information shall be no more than 2 pages in length. Projected for consideration must demonstrate a relationship to or impact on the Mount Pleasant community and be consistent work of Mount Pleasant's Comprehensive Plan. Funding recipients must recognize the Town of Mount Pleasant as a sponsor motional materials.	ith
	tions will be reviewed annually at a Town Council Committee meeting during the budget process. Once a meeting date the detection will be advised of the date and time for a brief presentation.	is:
	ing this application, the applicant agrees to spend awarded monies as described in this application, not towards politi es, and will spend the monies by June 30, 2020. Otherwise, the applicant must return awarded monies to the Town.	cal
Project	Director (SIGNATURE)  Date	

Name o	Name of Applicant Organization:				
11.	Briefly describe your organization's mission, its goals, and its objectives.				
12.	Describe how your project/program will provide a public benefit to Mount Pleasant residents.				
	a. Ultimate goal/benefit to Town residents.				
	b. Number of residents served/impacted.				
	c. Other verifiable objectives.				
13.	Provide a detailed budget of expenditures and revenues. A recent financial report is required with this application.				
	a. What will it cost to execute this project/program and what amount is being requested? What is the minimum amount requested from the Town of Mount Pleasant?				
	i. List other sources of funding for this project/program, if applicable.				
	b. What percentage of your organization's operation is dependent on government funding?				
	c. What percent of expenses are spent directly on programs?				
14.	Is other Town support requested during the year? If so, describe requirements expected including personnel (i.e. Police, Public Services) and the estimated cost of such services.				
15.	Other comments for consideration.				

Name of Applicant Organization:					
If you are a returning applicant, please complete the Performance Report below.					
1.	How much funding did you request in previous years from the Town of Mount Pleasant?				
2.	How much did you spend?				
3.	Please list the ways funds were allocated or attach an expenditure/expense report to your application.				
	Amount received:				
	Expenditures/expenses:				
4.	Describe how your funding from the Town of Mount Pleasant was used for the benefit of the public.				
F	Dura side the accurate an of recidents county to the county and the county are in the formation.				
5.	Provide the number of residents served by your project/program.				