



Leroy & Claris Strand Foundation Application

Information and Instructions

Vision: To enhance the quality of life in Communities surrounding the Highwood Mountains.

Mission: To provide financial contributions to social services, emergency services, youth and other organizations to the Communities surrounding the Highwood Mountains.

Outreach Area: The Communities of Raynesford, Fort Benton, Stanford, Geysers, Belt, Geraldine, and Highwood. Not included would be Denton, Coffee Creek, Windham, Hobson, Utica, and Great Falls.

Grant Eligibility: Grants from the Strand Foundation are limited to tax-exempt or organizations with existing projects that meet not-for-profit status as defined under Section 501(c)(3) of the U.S. Internal Revenue Code and who are registered and in good standing with the Montana Secretary of State.

The following are **NOT** eligible for Strand funding: grants to individuals, courtesy advertising, testimonial dinners, automatic renewal of grants, reimbursement of funds already expended on a project, grants to political organizations, organizations whose primary purpose is to influence legislation, to participate in or intervene in any political campaigns on behalf of any, or against any, candidate for public office, grants to religious organizations, requests that are discriminatory, illegal or harmful, or which pose an unacceptable conflict of interest to the community.

Application Deadlines: Strand Foundation Board of Directors meet Bi-Annually to consider grant requests. Grant application deadlines for these meetings are **May 1st** and **November 1st** of each year.

Call Strand Foundation at 406.799.2379 or email executivedirector@strandfoundation.com with any questions about eligibility or the application process.

Please complete the following grant application check list, grant application and required supplements in their entirety and return to The Strand Foundation, PO Box 528, Stanford, MT 59479. EMAILED APPLICATIONS WILL NOT BE ACCEPTED. (Grant applications must be mailed and postmarked by the deadlines noted above.)

Incomplete applications will not be considered



GRANT APPLICATION CHECKLIST:

YOUR GRANT REQUEST WILL NOT BE ACCEPTED WITHOUT THE FOLLOWING INFORMATION:
(Please initial on each line to indicate that each component has been completed and is included in your grant application package.)

APPLICATION IS FOR REQUESTS FOR \$5,000 & UNDER

_____ **GRANT APPLICATION CHECKLIST:** Include this completed checklist with your application.

_____ **GRANT LOCATION:** Are you located within the geographical area of Fort Benton, Stanford, Geraldine, Highwood, Belt, Raynesford, Geysers?

_____ **GRANT APPLICATION:** This must be signed by an authorized agent of the applicant organization.

_____ **PROOF OF ELIGIBILITY FOR THE STRAND FOUNDATION – please check ONE box below.**

- If your organization is a government entity: Provide a governmental information letter verifying tax-exempt status and/or the TIN on page 1 of the grant application.
- If your organization has 501(C) status from the IRS: provide an exemption letter from the IRS indicating the type of 501(C) status your organization possesses and provides EIN on page 1 of the grant application.
- **ALL GRANTEES NEED TO BE REGISTERED WITH THE STATE OF MONTANA AND IN GOOD STANDING.**

_____ **SOURCES OF INCOME FOR PROJECT/ORGANIZATION (ATTACHMENT):** PLEASE ATTACH THE SECURED AND ANTICIPATED SOURCES OF INCOME; i.e. your organization’s matching funds, other grant funds, donors, etc.

MAIL COMPLETED GRANT CHECKLIST, APPLICATION & REQUIRED SUPPLEMENTAL MATERIALS TO: STRAND FOUNDATION, PO BOX 528, STANFORD, MT 59479



GRANT APPLICATION

Please circle one: **Fort Benton** **Belt** **Stanford** **Geyser**
 Raynesford **Highwood** **Geraldine** **Other:**

Date of Request:

Organization:

Organization EIN or TIN:

Contact Person:

Street Address:

Mailing Address:

City: **State:** **Zip:**

Phone: **Email:**

Organization Website (if applicable):

Have you received funds from the Strand Foundation before? Yes or No

Total Project/Application Cost:

Project or Program name:

Amount requested for project/organization:

*****INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED. PLEASE MAKE SURE TO FILL OUT ALL INFORMATION*****



Briefly describe proposed project, including need, purpose and goals of your project and how it will benefit the people involved: (response is limited to space provided)

Describe how you will implement the project, including specific activities and timelines: (response is limited to space provided)



Identify sources of financial support for ongoing operating costs and maintenance for this project. Please be as specific as possible; identify other funders if applicable:

Will this project be ongoing or one time only?

Can this project proceed if the Strand Foundation cannot fully fund this request?

Yes or no

THE INFORMATION PROVIDED TO THE STRAND FOUNDATION HEREIN IS TRUE AND ACCURATE.



I CERTIFY THAT ANY FUNDS _____ (ORGANIZATION)
RECEIVES WILL **NOT** BE USED FOR ANY POLITICAL PURPOSE.

PRINT AUTHORIZED AGENT'S NAME _____

TITLE _____

*AUTHORIZED SIGNATURE _____ DATE _____

*YOU MUST HAVE AUTHORIZATION FROM YOUR ORGANIZATION TO SUBMIT THIS GRANT
REQUEST AND TO SIGN ON ITS BEHALF



REQUIRED SUPPLEMENTAL MATERIALS:

YOUR APPLICATION WILL NOT BE ACCEPTED WITHOUT THE FOLLOWING INFORMATION:

PROOF OF ELIGIBILITY FOR THE STRAND FOUNDATION GRANT

- **IF YOUR ORGANIZATION IS A GOVERNMENT ENTITY:** *Provide your Taxpayer Identification number (TIN) on Page 3 of this application and/or a governmental information letter verifying tax-exempt status AND a copy of the most recent FORM 990 (if one exists).*

OR

- **IF YOUR ORGANIZATION HAS 501(C) STATUS FROM INTERNAL REVENUE SERVICE:** Provide an exemption letter from IRS indicating the type of 501(c) status your organization possesses and provide Employer Identification Number (EIN) on Page 3 of this application.

ATTACHMENTS

- **ATTACH SOURCES OF INCOME FOR PROJECT.** (Include secured and anticipated sources of income; i.e. your organization's matching funds, other grant funds, donors, etc.) Your sources of income should match total project cost on Page 3.

MAIL Completed application & attachments to:

Strand Foundation

PO Box 528

Stanford, MT 59479