

Organization Information

Please review your organization information below and update it if necessary.

If you are using a parent/national organization's tax ID number, please enter your LOCAL organization information.

Organization Official Name
(?)

CYBERGRANTS TEST ORGANIZATION

Organization Legal Name

Also Known As(AKA)/Doing Business As(dba) Name

Year Founded

Please enter the year in which your organization was founded.

*Executive Director/CEO/President First Name

*Executive Director/CEO/President Last Name

*Executive Director/CEO/President Email Address

*Executive Director/CEO/President Phone

Mailing Address

Please provide the address where information about **this grant proposal** should be mailed.

PO Address

Post Office Address

City

State

Zip

Country or Jurisdiction

Telephone

Fax

E-mail Address

Please enter the main E-mail Address for your organization.

Website Address

Facebook Page

Twitter Handle

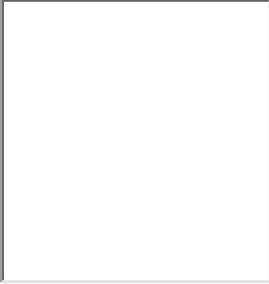
Instagram

***List of Current Board Members (2022)**

Please enter each board member individually and then click the add button. Please only provide names as titles or affiliations are NOT needed.

***List of Current Organization Executive Staff (2022)**

Please enter each executive staff member individually and then click the add button. Please only provide names as titles or affiliations are NOT needed.



*Is anyone on your Board of Directors employed at Bank of America?
(?)

Please identify the race/ethnicity of your Executive Director/CEO[†]

Please provide the ethnicity of your organization's board of directors[†]
Please indicate the percentage of each ethnic group represented by your organization's board of directors.

NOTE: The total percentage must equal 100%.

- % Asian
- % Black
- % Hispanic or Latino
- % Native American Indian, Indigenous peoples, or Alaska Native
- % Native Hawaiian or Other Pacific Islander (NHOPI)
- % White
- % Multiracial (individuals that identify as two or more races)

Please provide the ethnicity of your organization's executive staff[†]
Please indicate the percentage of each ethnic group represented by your organization's executive staff.

NOTE: The total percentage must equal 100%.

- % Asian
- % Black
- % Hispanic or Latino
- % Native American Indian, Indigenous peoples, or Alaska Native
- % Native Hawaiian or Other Pacific Islander (NHOPI)
- % White
- % Multiracial (individuals that identify as two or more races)

*Federal Official Determination

(?)

Are any of your organization's founders or board members, principals or executive officers federal officials including, but not limited to, members of Congress, Congressional staff or Executive Branch officials?

Please list them, including their position as a federal officer.

(2000 character maximum)

*Organization Type

Please identify the **Type** of organization you are:

NOTE: Your Organization Type should capture who you are as an organization, **NOT** the focus of this grant proposal.

Please describe your organization as you selected "Other" for Organization Type.

Mission Statement

Please provide your organization's mission statement as approved by the organization's board of directors.

(1998 character(s) remaining)

*Are you affiliated with or a member of any national organizations or networks listed below? Please select all that apply. Hold down the CTRL key to select multiple items.

Not Applicable	<input type="checkbox"/>
American Indian College Fund	<input type="checkbox"/>
American Red Cross	<input type="checkbox"/>
Black Economic Alliance	<input type="checkbox"/>
Boys and Girls Club	<input type="checkbox"/>

*Number of Individuals Served Annually

Please include the number of unduplicated individuals served by your agency on an annual basis.

*Number of Households Served Annually

(?)

Please include the number of unduplicated households served by your agency on an annual basis. If not tracked, please enter 0.

*Is your organization a Department of Housing and Urban Development (HUD) approved housing counseling agency?

*Is your organization a certified Community Development Financial Institution (CDFI)?

†Bank of America is committed to the support and advancement of equality in the communities we serve and this extends to the organizations we fund.

The questions below will help us ensure everyone is treated fairly. The information you provide is anonymous, for demographic purposes only and is not used in selection. Bank of America considers organizations without regard to race, religious creed, religion, ex, sexual orientation, genetic information, gender, gender identity, gender expression, age, national origin, ancestry, citizenship, protected veteran or disability status or any factor prohibited by law and as such affirms in policy and practice to support and promote the concept of equal opportunity.

Organization Budget Detail

*Top Five Sources of Funding for your Organization

Please list your top five contributors and dollar amounts received last year for your organization overall, including governmental and other funders. Please also reflect any multi-year funding.

(1000 character maximum)

*Are there any specific or special circumstances that have impacted your budget? (e.g. loss of government funding, in-kind expenses/donations, matching funds, etc.)

Any financial notes not described in the audit documentation should be further explained here.

Please describe those circumstances:

(1000 character maximum)

Organization Budget Attachments

***Organization Operating Budget**

Please upload a file containing your organization's **current** total operating budget.

PLEASE NOTE: This file must be provided in a PDF format.

Project/Program Budget

If this grant proposal is for a specific project/program, please upload a file containing your **current** program/project budget.

PLEASE NOTE: This file must be provided in a PDF format.

***Financial Statements**

(?)

Please upload financial statements for the previous two years. If available, please include audited documents.

***Is your Organization's Total Operating Budget \geq \$250,000.00?**

Please attach a copy of your organization's most recent audit.

Payment Distribution Details

Providing the payment details for your organization does not in any way guarantee that you will receive funding from the Bank of America Charitable Foundation. As part of the ACH verification process a zero value deposit is made into the nonprofit's bank account in order to verify the account information provided and correct any inaccuracies early in the process. This deposit is reflected in the nonprofit's account as ACH-Bank of America CashGrant" with a zero dollar value. This step is necessary regardless of potential approval or rejection of a grant application.

Your financial institution may deduct a nominal processing fee from funds deposited via ACH (typically less than \$1). Please provide or review the banking information below to ensure all information is accurate.

Please Note: If you click edit, you will be required to complete all fields again.

Financial Institution

Financial Institution City

Financial Institution State

Financial Institution Zip/Postal Code

Financial Institution Country or Jurisdiction

Bank Account Type

Account Number

PLEASE INCLUDE THE FULL ACCOUNT NUMBER, INCLUDING ALL LEADING ZEROES

ACH Bank Routing Number/Transit Number

PLEASE INCLUDE THE FULL ROUTING NUMBER, INCLUDING ALL LEADING ZEROES

Organization ACH Contact Name

Organization ACH Contact Email Address

ACH Deposit Authorization Agreement

I Authorize ACH Deposits.

Payment Distribution Continued

Financial Institution documentation is required to ensure funds make it into the appropriate account. If the banking information has changed or has not yet been provided, please complete and/or update and upload financial institution documentation (bank letter, a copy of a voided check or deposit slip)

confirming account information, legal entity name and address. The banking information input in the previous section must match the banking information in the document upload.

*To assist with ensuring dollars make it into the appropriate account, please upload financial institution documentation (bank letter, a copy of a voided check or deposit slip) confirming account information, legal entity name and address. This information is required for verification purposes and must match the banking information input in the previous section.

(?)

Grant Proposal

The information you provide in this section should pertain to your **specific grant proposal**. If you are requesting general operating support, this information should pertain to your overall organization.

*Request Amount

Please enter the amount of funding you are requesting for **this grant proposal**.

*Project Budget

If your request is for a specific program or project, please provide your overall project budget. If your request is for general operating support, please enter the total of your annual operating budget.

*Project Title

(?)

Please provide a short title to describe the overall scope of this grant proposal.

*Top Five Sources of Funding

Please list the top five contributors and dollar amounts received last year for **the program/project for which you are requesting funding**.

NOTE: If you are requesting general operating support, your response to this question should reflect the same information you were asked to provide as part of the Organization Budget Detail section.

(500 character maximum)

***Grant Usage**

Please provide the percentage of the grant amount that will be used toward operating, program and/or capital support. Please note, capital support refers to funds supporting the acquisition or renovation of real estate, technology and other major furniture, fixtures or equipment. These fields must total 100%.

% Capital Support

% Operating Support

% Program Support

***Detailed Grant Description**

Please use this space to fully describe how your organization will use this grant, including:

For Capital Support please describe:

- The capital expenditure - the equipment, property, furniture being purchased
- How the capital purchase helps your organization support your mission or programs

For Operating Support please describe:

- The mission, programs and services of your organization
- The issue or need your organization is addressing (please include supporting research/statistics that demonstrate this issue/need)
- How this grant will help your organization address this issue or need

For Program Support please describe:

- The program or project for which you are seeking funding
- The issue or need your organization is addressing (please include supporting research/statistics that demonstrate this issue/need)
- How this grant will help your organization address this issue or need
- The timeline for this project or program, including a start date and end date, if applicable

For a combination of support (any mix of capital, operating and/or program support) please describe:

- All of the above, and include specific details that clarify what dollar amount, or percentage of funds requested, will be used for capital support, operating support and/or program support

(2000 character maximum)

Additional Information

Please use this space to provide information about your organization overall or for any additional supporting details you would like to share.

(5000 character maximum)

*Geographic Use of Funds

(?)

Select a category below to identify the specific geography(ies) that best describe **where the service will physically take place.**

- DO NOT include geographies where services do not actually take place (e.g. for training taking place at a specific college site, do not list counties where students reside)
- ONLY include information specific to this grant's purpose rather than your organization's overall service area or target markets.
- Be as precise as possible when completing this section. **DO NOT use terms such as "area", "region", "northern", and any other descriptors that do not contain the full name of counties and states impacted,** where applicable.

Details provided should be consistent with information found on your organization's website. If the geographic areas provided are outside of your normal service area, please explain.

Based on the descriptions in the Tool Tip noted above (?), please choose from one of the following selections:

Geographic Documentation

(?)

If necessary, add documentation to support the location(s) described in the Geographic Use of Funds section above.

***Partnerships/Collaborations**

Will the requested grant funding from Bank of America **specifically** support the organization's participation in a public/private partnership?

Will your organization serve as the lead or center-post agency for the collaboration?

Please describe the specific collaboration(s) your organization is currently engaged in as part of the purpose of **this grant proposal**.



(2000 character maximum)

Better Money Habits®

Bank of America is committed to improving financial literacy and financial habits. We have created a financial habits resource tool: Better Money Habits® is a free financial education platform that provides a simple, accessible way to connect people to the tools, resources and education they need to take control of their finances. Also included are scripted presentations - all of which can be found at www.bettermoneyhabits.com/community.

Would your organization be interested in having Bank of America employee volunteers (Better Money Habits Volunteer Champions) help deliver financial habits education to your staff and/or the individuals and families you serve?

(?)

Better Money Habits Contact Information

Please provide name, phone number and email address for an individual we can contact around coordinating volunteer efforts.

***Additional Volunteer Needs**

Does your organization need volunteers?

Please describe the types of volunteer opportunities available.

This description should include general volunteer needs, virtual volunteer opportunities and/or skills-based opportunities related to your grant request. Provide the following:

- Brief description of volunteer activity
- Skill(s) needed, if any
- Number of volunteers needed
- Timeframe for the opportunity (date/time/location, if applicable)

(2000 character maximum)

Include the name and email address of an individual we can follow up with to coordinate potential volunteer opportunities:

Please enter "N/A" if no contact exists

***Personal Success Stories**

(?)

Do you have a current client or recent program graduate (within last 12 months) willing to talk with us about their personal experience with your organization and how the programs and services received from your organization have personally impacted them for the better?

Please summarize their story here, including client background, demonstrated need, and role of your organization/program in eventual success.

Also, please share with us who at your organization we can reach out to in order to arrange the interview and/or potential client approval to share their story more broadly tied to this grant?

(2000 character maximum)

*Would your organization be willing to promote this grant via any type of communications including social media?

Anticipated Grant Impact

Bank of America strives to reflect the full diversity of the communities we serve. We support nonprofit organizations that are welcoming and inclusive. Towards that end, collecting data is an important first step to inclusion.

The information you provide in this section should pertain to your **specific grant proposal**. If you are requesting general operating support, this information should pertain to your overall organization.

*Age Group(s) Served

Please indicate the percentage of each age group served by this **specific program** or **your organization** (if applying for general operating support).

NOTE: The total percentage must equal 100%.

<input type="text"/>	%	0-5
<input type="text"/>	%	6-11
<input type="text"/>	%	12-15
<input type="text"/>	%	16-24
<input type="text"/>	%	25-49
<input type="text"/>	%	50-64
<input type="text"/>	%	65+
<input type="text"/>	%	Not Tracked

*Gender(s) Served

(?)

Please indicate the percentage of each gender served by this **specific program** or **your organization** (if applying for general operating support).

NOTE: The total percentage must equal 100%.

- % Female
- % Male
- % Non-Binary/Gender Fluid/Gender Queer
- % Not Tracked by Organization

***Ethnicity Served**

(?)

Please indicate the percentage of each ethnic group served by this **specific program** or **your organization** (if applying for general operating support).

NOTE: The total percentage must equal 100%.

- % Asian
- % Black
- % Hispanic/Latino
- % Native American Indian, Indigenous peoples, or Alaska Native
- % Native Hawaiian or Other Pacific Islander (NHOPI)
- % White
- % Multiracial (Individuals that identify as two or more races)
- % Not Tracked

Please feel free to provide any additional info you want us to know about who you serve:

(4000 character maximum)

***Will the majority (51% and above) of this grant primarily serve active military and their families, veterans and/or retired military personnel?**

*Will the majority (51% and above) of this grant primarily serve lesbian, gay, bisexual, transgender, queer, or gender fluid individuals (LGBTQ+)?

*Will the majority (51% and above) of this grant primarily serve persons with visible or non-visible disabilities?

(?)

*Will the majority (51% and above) of this grant primarily serve persons impacted by the criminal justice system?

This category includes returning citizens and system impacted individuals, individuals on parole and probation.

*Will the majority (51% and above) of this grant primarily serve court involved individuals?

This category includes foster youth and other individuals still under the direct supervision and guardianship of the court outside of the criminal justice system.

*Will the majority (51% and above) of this grant primarily serve victims and survivors of domestic violence?

*Will the majority (51% and above) of this grant primarily serve victims and survivors of human trafficking?

*Will the majority (51% and above) of this grant primarily serve refugees or individuals and families seeking asylum or resettlement?

Please describe the types of services provided

(?)

(32500 character maximum)

*Will the majority (51% and above) of this grant primarily serve immigrant individuals and families seeking citizenship?

Metric questions based on funding priority/grant subcategory chosen:

*Focus of Grant Proposal

Please select the **Primary Focus** of this grant proposal.

NOTE: This category should reflect the specific focus of this grant proposal, **NOT** what type of organization you are.

Economic Mobility: Community Development Funding Priorities

- **Affordable Housing:**
The current environment has underscored the importance of safe, decent housing for an individual’s overall well-being, including health, educational success and future employment opportunities. Yet for many, access to affordable housing has become further out of reach while others struggle with the possibility of eviction, foreclosure and homelessness. That’s why we support the work of organizations working to preserve, and increase access to a mix of affordable housing options as well as other essential assistance.
- **Neighborhood Revitalization:**
Vibrant communities are places where individuals can thrive and succeed and have the opportunity to live and work with safe, decent housing, transportation to jobs, strong business corridors and thriving arts and culture districts. We support local and regional revitalization efforts, taking a holistic approach to building inclusive communities, creating economic opportunity and livable neighborhoods.
- **Small Business Success:**
Small businesses play an important role in the overall health of our nation’s economy. In response to the challenges small business owners face in today’s environment, we’re supporting nonprofits assisting entrepreneurs, especially minority and indigenous owned, as they address their short-term needs and strengthen their overall recovery.

Affordable Housing Examples:

- Housing development for vulnerable populations through the construction or preservation of affordable single, multi-family, transitional and supportive housing.
- Minority homeownership programs.
- Pathways to stable housing or homeownership through financial habits and stability efforts such as homebuyer education, budgeting, savings, and credit counseling including eviction and foreclosure prevention.
- Sustainable development efforts creating healthy living environments through energy efficiency upgrades, retrofits, solar and other green building efforts.

Please provide the following regarding your organization’s overall housing opportunities activities:

Will your organization utilize the majority of the grant proceeds (51% or greater) to support the construction/preservation of affordable, transitional, supportive housing units?

Total number of housing units to be constructed/preserved:

Please provide the annual anticipated:

Percentage of new or preserved affordable transitional, supportive housing units built to green standards.

Please provide the annual anticipated:

Will your organization utilize the majority of the grant proceeds (51% or greater) to support the growth of minority homeownership?

Total number of minority homeowners served.

Please provide the annual anticipated:

Will your organization utilize the majority of the grant proceeds (51% or greater) to support the delivery of foreclosure prevention and loss mitigation counseling?

Total number of individuals receiving foreclosure prevention and loss mitigation counseling.

Please provide the annual anticipated:

Will your organization utilize the majority of the grant proceeds (51% or greater) to support the delivery of eviction prevention counseling services?

Total number of individuals receiving eviction prevention counseling services.

Please provide the annual anticipated:

Will your organization utilize the majority of the grant proceeds (51% or greater) to support the delivery of pre-purchase housing counseling and other financial stability programs? (e.g.

budgeting, savings, credit, credit repair)

Is the opportunity supported by this grant proposal connected to acquisition and rehab of affordable housing units?

Percentage of rehabbed affordable housing units that include an energy efficiency retrofit:
Please provide the annual anticipated:

Sustainable Development/Green Space

(?)

Is the opportunity funded by **this grant proposal** connected to green development?

Please list green standard(s) and describe the overall green development:

(?)

(1000 character maximum)

Neighborhood Revitalization Examples:

- Revitalization, preservation, and stabilization initiatives that engage community stakeholders in building livable communities.
- Transit-oriented development efforts that connect individuals to jobs, services, schools, and economic opportunity.
- Community arts and cultural institutions that provide economic opportunity and contribute to the vitality and livability of communities.
- Resiliency of communities supporting short and long term plans to prepare, withstand and recover from extreme weather events and the long-term impacts of climate change.
- Environmental efforts through the preservation, creation or restoration of open space, parks and community gardens.
- Supporting organizations/initiatives that bring energy efficiency and renewable energy advances to LMI/BIPOC communities.

Please describe the anticipated economic impact of this revitalization effort or the overall economic impact to the community of your organization (i.e. Arts, Culture):

(?)



(1000 character maximum)

Will this grant proposal create and or retain jobs for the community?

Number of jobs retained or created:
Please provide the annual anticipated:

Sustainable Development/Green Space

(?)

Is the opportunity funded by **this grant proposal** connected to green development?

Please list green standard(s) and describe the overall green development:

(?)



(1000 character maximum)

Will this grant proposal support the creation of a community resilience plan?

Please describe the community resilience plan:



(1000 character maximum)

Small Business Success Examples:

- Technical assistance supporting business planning (short and long term).
- Operational capacity of CDFIs delivering essential growth capital to entrepreneurs.
- Supporting organizations assisting minority-owned small businesses.
- Creating business incubators and accelerators that provide mentorships, resources, and networks entrepreneurs need to launch, fund and grow their businesses.

- Economic development efforts that promote small business growth and healthy commercial corridors (e.g. Mainstreet).

Please provide the following regarding your organization's overall small business activities:

Will the majority of the grant proceeds (51% or more) support the technical assistance delivery to small business clients?

Number of small businesses and microenterprises receiving technical assistance:
Please provide the annual anticipated:

Additionally, please provide the annual anticipated minority owned small businesses receiving technical assistance:

Economic Mobility: Workforce Development Funding Priorities

- **Alternative pathways for meaningful employment for adults:**
Job preparedness, training, skill building, college or vocational certification, career counseling, placement, job retention, and entrepreneurship opportunities.
- **Barriers to employment:**
Organizations that help people needing additional assistance to overcome extraordinary barriers to employment (i.e. case management for individuals with disabilities, the formerly incarcerated, ESL training and education and foster care youth).
- **National service:**
National service opportunities for people to make a positive impact on their communities while developing professional skills.
- **Youth employment:**
High-school completion programs, skills-training (hard and soft skills), first-time employment, internship, apprenticeship, and mentoring, especially for youth and young adults who are not in school or working.

Alternative Pathways for Adults Examples:

- Job preparedness, training, skill building, college or vocational certification, career counseling, placement, job retention, and entrepreneurship opportunities.

Number of individuals trained, upskilled and/or reskilled for jobs:

Please provide the anticipated number of individuals associated with **this grant proposal:**

Number of individuals placed in internships or apprenticeships:

Please provide the anticipated number of individuals associated with **this grant proposal:**

Number of individuals placed/hired in jobs:

Please provide the anticipated number of individuals associated with **this grant proposal:**

Number of individuals retained in a job for over one year after the completion of the program:
Please provide the anticipated number of individuals associated with **this grant proposal**:

Is your organization hiring or placing individuals in virtual employment opportunities with **this grant funding**?

Mentoring / Coaching

(?)

Are there Mentoring or Coaching opportunities associated with **this grant proposal**?

Connecting to Community Colleges

Is your organization a community, technical or vocational college?

Is your organization connecting students to community colleges, technical or vocational schools?

Preparing for Green Jobs

Is the opportunity funded by **this grant proposal** focused on green job training or placement?

Please provide a description of the green job training or placement:

(1000 character maximum)

Barriers to Employment Examples:

- Organizations that help people needing additional assistance to overcome extraordinary barriers to employment (i.e. case management for individuals with disabilities, the formerly incarcerated, ESL training and education and foster care youth).

Please describe the specific barriers you are addressing with **this grant proposal**:

Examples can include transitioning veterans, impacts of the criminal justice system, citizenship status, visible and nonvisible disabilities, homelessness, and youth aging out of the foster care system.

(1000 character maximum)

What interventions or additional supports do you provide tied to job placement and retention for those hardest to employ:

Examples can include employment tied to training and wraparound support services and transitional employment in workforce social enterprises.

(1000 character maximum)

Number of individuals trained, upskilled and/or reskilled for jobs:

Please provide the anticipated number of individuals associated with **this grant proposal**:

Number of individuals placed/hired in jobs:

Please provide the anticipated number of individuals associated with **this grant proposal**:

Number of individuals retained in a job for over one year after the completion of the program:

Please provide the anticipated number of individuals associated with **this grant proposal**:

Is your organization hiring or placing individuals in virtual employment opportunities with **this grant funding**?

National Service Examples:

- National service opportunities for people to make a positive impact on their communities while developing professional skills.

Number of corps members associated with **this grant proposal** placed in service:

After the completion of their service year, what percentage of your corp members attend the following:

College

Post-graduation education

Full time employment

Do you offer ongoing support to alumni?

Please describe any ongoing support you offer:

(1000 character maximum)

Total number of individuals served by your corps members

Please provide the annual anticipated:

Youth Employment Examples:

- High school completion programs, skills-training (hard and soft skills), first-time employment, internship, apprenticeship, and mentoring, especially for youth and young adults who are not in school or working.

Is **this grant proposal** focused on high school access or graduation, and/or post-secondary access or graduation?

Number of students who will graduate with a degree, credential or certification:

Please provide the anticipated number of individuals associated with **this grant proposal**:

Will **this grant proposal** connect young people to jobs, internships, apprenticeships or social enterprise jobs?

Number of young people placed in jobs, internships, apprenticeships or social enterprise jobs upon program completion:

Please provide the anticipated number of individuals associated with **this grant proposal**:

What is the average cost per young person placed in a job, internship, apprenticeship or social enterprise job through this grant funding?

Is your organization hiring or placing individuals in virtual employment opportunities with **this grant funding**?

Mentoring / Coaching

(?)

Are there Mentoring or Coaching opportunities associated with **this grant proposal**?

Connecting to Community Colleges

Is your organization a community, technical or vocational college?

Is your organization connecting students to community colleges, technical or vocational schools?

Preparing for Green Jobs

Is the opportunity funded by **this grant proposal** focused on green job training or placement?

Economic Mobility: **Basic Needs Funding Priorities**

- **Family stabilization:**
Access to crisis prevention programs and wrap services including help with immediate and safe shelter, free or subsidized benefits like internet access, utilities, childcare, transportation, financial assistance and recovery.
- **Access to food and healthcare:**
Services that improve health outcomes with an emphasis on community-based healthcare, food access, mental health counseling, substance use disorder treatment and rehabilitation.
- **Services for the homeless:**
Programs that prevent or end homelessness, such as emergency shelter, rapid-rehousing, rental and utility assistance and permanent supportive housing.

Family Stabilization Examples:

- Access to crisis prevention programs and wrap services including help with immediate and safe shelter, free or subsidized benefits like internet access, utilities, childcare, transportation, financial assistance and recovery.

Is the **primary** purpose of your grant request focused on one of the following?

Access to Food and Healthcare Examples:

- Services that improve health outcomes with an emphasis on community-based healthcare, mental health counseling, substance use disorder treatment and rehabilitation.
- Services that focus on hunger relief and access to nutritious food.

Will you address community health needs and healthcare access as part of **this grant proposal?**

Is the **primary** purpose of your grant request focused on one of the following health related services?

Will you provide hunger relief as part of **this grant proposal?**

Please select the category that best aligns to your hunger relief services:

Please provide the total annual anticipated:

Number of meals:

Please provide the total number of established distribution agencies used:
(?)

SNAP
(?)

Does your organization help people enroll in SNAP?

Number of applications accepted for SNAP benefits enrollment:
Please enter 0 if this does not apply to your organization.

Services for the Homeless Examples:

- Programs that prevent or end homelessness, such as emergency shelter, rapid-rehousing, rental and utility assistance and permanent supportive housing.

Will your organization provide the following services as part of **this grant proposal:**

Temporary shelter

Please describe the types of temporary shelter services being provided:

(1000 character maximum)

Transitional housing

Please describe the types of transitional housing services being provided:

(1000 character maximum)

Permanent supportive housing

Please describe the types of permanent supportive housing services being provided:

(1000 character maximum)

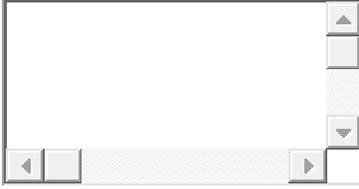
Homeless prevention services

Please describe the types of homeless prevention services being provided:

(1000 character maximum)

Do you serve individuals currently living on the street with basic needs, i.e. wrap services, mental health, healthcare, food access, and/or substance abuse counseling?

Please describe the services you provide.



(1000 character maximum)

Questions asked of ALL funding priorities:

*Does your organization provide multiple wrap and support services?

(?)

Examples can include workforce development, financial education, public benefits application assistance, mental health and other wellness programs.



*Does your organization operate a social enterprise?



*Will **this grant proposal** support work within a Qualified Opportunity Zone (QOZ)?

(?)

A current listing of the Opportunity Zones can be found at: [Opportunity Zones Resources](#)



Please describe the efforts supported by this funding within the Qualified Opportunity Zone:



(1000 character maximum)

*While we understand that your organization's impact may align with more than one of the 17 UN Sustainable Development Goals, please select the **primary** goal supported by this **specific grant proposal**. If the primary purpose of the specific grant request does not align with one of the stated goals, please select 'none of the above'.

Access more information on the [UN sustainable goals](#).

***Evaluating and Measuring Impact**

Please describe how your organization tracks success based on the metrics you measure.



(2000 character maximum)

Economic Demographic Information

To ensure the effectiveness of our grant making, we are interested in knowing the impact of this grant on your clients and the economic profile of those you serve. Please provide information that is specific to clients that will be served by this request.

***Low- to Moderate-Income**

(?)

Will this grant proposal impact a predominantly low- to moderate-income population?

Focus on Low- to Moderate-Income

Due to your focus on low- to moderate-income populations, we would like to gather some additional information regarding the economic demographics of the individuals and families that will be served by **this grant proposal**.

NOTE: At the end of this section, you will have the opportunity to upload any relevant documentation to support your responses to these questions.

Defining Low- to Moderate-Income

1. Please state how your organization defines low- to moderate-income.

(?)

Examples include:

- As a percentage of Area Median Income (Please indicate which specific percentage you use: i.e. 50%, 80%, 120%, or other)
- As a percentage of the Federal Poverty Level (Please indicate which specific percentage you use: i.e. 100%, 150%, 200%, or other)

- Clients who earn less than \$XX,000 annually
- Eligibility for governmental benefits such as Free/Reduced Price Lunch, Medicaid, Temporary Assistance for Needy Families, Food Stamps, etc.
- Homelessness or Foster Care
- Other (Please provide detailed explanation)

(2000 character maximum)

2. Based on your definition, please provide the specific percentage of low- to moderate-income individuals and families that will be served by this grant proposal.

(?)

Verifying Low- to Moderate-Income

(?)

Please describe how your organization verifies that an individual or family qualifies as low- to moderate-income.

(2000 character maximum)

Additional Documentation

Please upload any supporting documentation your organization uses to verify low- to moderate-income.

Examples include:

- Client statistics reports
- Scholarship aid forms
- Revitalization plans
- Site listings and addresses

Small Business

Will these grant funds be used primarily to support small businesses?

Defining Small Business

Please describe how your organization defines small business, including specific criteria for size eligibility based on revenue, net income, number of employees, etc.

Note: Companies that meet the size eligibility standards of the Small Business Administration's Development Company (SBDC) or the Small Business Investment Company (SBIC) programs are considered "small" for LMI purposes.

(1000 character maximum)

Small Business Impact

Please provide the following aspects of small businesses that will be served by **this grant proposal**.

Average Gross Annual Revenue of Small Businesses Served:

Average Number of Employees for Small Businesses Served:

Jobs and Other Benefits or Services:

Do the small businesses served by **this grant proposal** provide permanent jobs to low- to moderate-income **individuals or communities**?

Please use this space to describe the activities/responsibilities of the jobs created and the average wages earned.

(1000 character maximum)

Do the small businesses served by this grant proposal provide other benefits or services to low- to moderate-income individuals or communities?

Please use this space to describe the benefits or services:

(2000 character maximum)

Community Revitalization/Stabilization

Will these grant funds be used to revitalize or stabilize a low- to moderate-income community?

Examples:

- Rehabilitation of blighted neighborhoods
- Projects that are specifically mentioned in a state or local revitalization plan
- Restoration of a building that will help a distressed community by attracting new, or retaining existing, businesses or residents

Please provide specific street boundaries or census tracts for the area(s) that will be impacted by **this grant proposal**.

(1000 character maximum)

Will the program/project described in **this grant proposal** attract or retain the following in low- to moderate-income communities?

Jobs
Residents
Not Applicable

Is the program/project described in this grant proposal part of a City, State or Federal redevelopment plan?

Please cite the specific plan below.



(1000 character maximum)

Contact Information

Bank of America uses email to communicate with Bank of America Charitable Foundation applicants throughout the year regarding grant opportunities as well as grant status. Please ensure that the information provided here reflects the most current Executive Director, GrantSeeker, and Primary Contact in your organization. Please delete those that are no longer with your organization or are not primary contacts. Additionally, take a moment to verify with your email service provider that bankofamerica.com addresses are not included in your unsolicited bulk email filtering software.

Contact Salutation

Please select the correct salutation.

*First Name

*Last Name

*Address

*City

*State

*Zip

*Telephone (include extension)

Please include extension information in this field to assist in our communication efforts.

Fax

*E-mail Address

*Job Title

*Contact Type

Select that which best describes this contact's affiliation to the organization and/or this request for funding.

Save and Proceed

Grant Agreement

GRANT AGREEMENT

Now that you have completed your application, we propose that you accept the following conditions to any grant. By accepting these terms, you confirm certain information about your organization and your acceptance of requirements regarding payment of any donation. This process provides us with critical assurances before we can review your grant and does not create any agreement on behalf of the Bank of America Charitable Foundation to approve your grant application or to provide any donation to your organization. The acceptance of these conditions creates a legally binding agreement that your organization will adhere to these terms. **Your agreement to these terms does not guarantee that your grant application will be approved by the Bank of America Charitable Foundation (the "Foundation").**

U.S. TAX STATUS:

Your organization represents, covenants and warrants that it has received its Section 501(C)(3) status from the Internal Revenue Service (the "IRS"), and is treated by the IRS as an organization that is not a private foundation as described in Sections 509(a)(1), (2) or (3) of the Internal Revenue Code (the "Code") and that there is no issue presently pending before any office of the IRS that could result in any proposed changes to your tax-exempt status. Should your organization's status as a 501(c)(3) be revoked or modified during the term of any grant, your organization shall notify the Foundation promptly and return any unspent grant funds to the Foundation as of the date of such change.

USE OF FUNDS:

- A. The grants, and income earned thereon, may be expended only for charitable, religious, scientific, literary or educational purposes. If a grant is made to your organization pursuant to this grant application, the donation is made only for the purpose(s) included in your application, and it is understood that these grant funds will be used only for such purpose(s), substantially in accordance with the application submitted by your organization and that your organization maintains authority over the use of the grant.
- B. Your organization hereby agrees, represents and warrants that grant funds will not be used for any political campaign or to influence the outcome of any election, to carry on propaganda, to lobby or otherwise attempt to influence legislation or to conduct any activities described in Sections 4945(d) and (e) of the United States Internal Revenue Code and the Treasury Regulations thereunder. Information regarding the types of activities prohibited under Section 4945 of the United State Internal Revenue Code and other impermissible activities should be directed to your organization's tax or legal advisor.
- C. No portion of any grant funds shall be applied to satisfy any person's obligation to contribute to your organization.

- D. No portion of the grant funds may be applied to satisfy any payments for loans from Bank of America or any subsidiary or affiliate thereof.

NO TANGIBLE BENEFIT TO THE FOUNDATION:

Your organization will not provide items of tangible value to the Foundation in return for any donation to your organization.

NON-DISCRIMINATION:

Your organization represents, covenants and warrants that it does not discriminate against any individual or entity on the basis of race, religion, color, sex, sexual orientation, gender identity, age, national origin, ancestry, citizenship, veteran, disability status, or espouses hate.

ANTI-TERRORIST COMPLIANCE:

Your organization represents, covenant and warrants that it is in compliance with all statutes, executive orders, and regulations restricting or prohibiting U.S. persons from engaging in transactions and dealings with countries, entities, or individuals subject to economic sanctions administered by the U.S. Department of the Treasury's Office of Foreign Assets Control. Your organization is aware that a list of countries subject to such sanctions, a list of Specially Designated Nationals and Blocked Persons subject to such sanctions, and overviews and guidelines for each such sanction program can be found at: <http://www.treasury.gov/about/organizational-structure/offices/Pages/Office-of-Foreign-Assets-Control.aspx>. If your organization becomes noncompliant at any time subsequent to completing this certification, it will notify the Bank of America Charitable Foundation immediately.

INDEMNITY:

Your organization agrees to indemnify, defend and hold harmless Bank of America, The Foundation and their subsidiaries, affiliates, successors, permitted assigns, officers, directors, agents, and employees from and against any and all third party claims, demands, actions or causes of action, liabilities, expenses (including reasonable attorney's fees) and costs arising from the defense thereof ("Claims") arising out of or in any way connected with:

- A. Your organization's breach of this Agreement, or any covenants, representations, warranties herein.
- B. The acts or omissions of your organization, its employees, or contractors in connection with this Agreement, or any events, programs or activities conducted in connection with this agreement.
- C. Any infringement of the intellectual property rights of a third party by your organization
- D. Your organization's failure to provide complete and accurate information when applying for a grant.

RIGHT TO DISCONTINUE FUNDING:

The Foundation reserves the right, in its sole discretion, to discontinue funding and to demand the return of the grant amount, or any portion thereof, and any income earned thereon, if the funds are not used in accordance with the Use of Funds section above. Additional installments of a multi-year grant will be paid only after the reporting requirements and all other grant terms are met.

EVALUATING OPERATIONS:

The Foundation may monitor and conduct an evaluation of operations under any grant, which may include a visit from Foundation personnel to observe and evaluate your operations and review financial and other records and materials connected with your organization. The Foundation may

propose a written report on the outcome of any grant to your organization which you agree that your organization will complete in the format proposed by the Foundation.

FOUNDATION PUBLICATIONS:

By submitting your request for a grant, you agree that the Foundation and its affiliates will have the right to include information about your organization, any grant made to your organization, and any other related information provided by your organization, in its advertising and marketing materials, public reports, and press announcements and releases in all forms of media throughout the world without compensation or consent.

RECOGNITION:

For grants where there is the possibility of recognition opportunities, your organization will work with a Bank of America representative regarding the parameters of any recognition. Your organization shall obtain the prior written approval of the Foundation prior to any use of the Bank of America name or trademarks and such approvals do not give your organization any right, title or interest in the Bank of America name or trademarks.

DUE AUTHORITY:

The person completing these sections affirms that they are representing the applicant organization and has the authority to accept these conditions on behalf of the organization and bind it to these obligations and statements.

***ACKNOWLEDGEMENT OF TERMS AND CONDITIONS**

***PLEASE ENTER YOUR NAME (Not the name of the organization)**

***ARE YOU AN OFFICER OF THE ORGANIZATION?**

PLEASE PROVIDE THE CONTACT INFORMATION OF AN OFFICER OF THE ORGANIZATION FAMILIAR WITH THIS APPLICATION.

***OFFICER NAME**

***OFFICER TITLE**

***OFFICER ADDRESS**

*OFFICER EMAIL ADDRESS

*OFFICER TELEPHONE NUMBER

If you are unwilling to agree to the terms outlined above, the Bank of America Charitable Foundation will not be able to fund your request.

Save and Proceed