

**JEWISH FEDERATION OF HUNTSVILLE AND NORTH ALABAMA, INC.
(JFHNA)
GROUP GRANT GUIDELINES AND APPLICATION**

I. About JFHNA

The JFHNA is a private organization whose purpose is to enhance Jewish life in Huntsville and North Alabama and to support Jews in Israel and throughout the world. The JFHNA works to generate the financial resources necessary to develop, provide, and support programs and services to accomplish these goals. JFHNA also works to further the welfare of the Jewish community by planning for the philanthropic and educational advancement of the Jewish community and by coordinating and fostering cooperation among Jewish organizations directed toward that end.

Completion of a JFHNA Grant Application and signatures thereon signify agreement for compliance with the requirements stated herein.

II. Qualification Criteria for JFHNA Grant

It is desirable but not required that organizations requesting a grant be recognized under section 501(c)(3) of the Internal Revenue Code and contributions to them be deductible by donors under section 170(c)(2) of the Internal Revenue Code. In addition, it is desirable the requesting group meet one or more of the following criteria:

1. Be an organization whose purpose is to enhance Jewish life and continuity in the North Alabama area.
2. Be an organization who works to further the welfare of the Jewish community; to plan for the philanthropic, social, cultural, and educational advancement of the Jewish community.
3. Be an organization who works to further the welfare of the relationship of the local Jewish community with other elements of the North Alabama Community.

Typically, JFHNA does not fund: (a) tax supported institutions, (b) cultural/civic organizations/businesses.

III. Grant Application Procedures

Requests for grants must be submitted on the JFHNA Grant Application Form and must be signed by an authorized official of the requesting agency. In some cases the space on the form is limited; therefore, attachments may be used for questions requiring additional space. But please be as brief as possible in the replies. If necessary, it is permissible to attach other such information (brochures, letters, photos, etc.). **Questions may be addressed to the JFHNA Grant Committee Chairperson, Joe Paddock, at (256) 880-6920 or via email to jpaddoc2@att.net .**

IV. Where to email or mail the Completed Grant Application Form

It is desired that the requesting group complete the grant application and return it to JFHNA not later than **1 May to allow proper consideration by the board for the upcoming JFHNA fiscal year:**

Applications may be emailed to: jpaddoc2@att.net (a reply email will be sent acknowledging receipt of the application) or, applications may be mailed to:

JFHNA
PO. Box 12491
Huntsville, AL 35815

V. Visit from Representative of JFHNA

In some cases, additional information or clarifications may be needed. In these cases, the requesting group would receive a request from a JFHNA representative for an interview. The interviewer will attempt to determine in more detail the nature of the group's need, as well as, to verify information in the grant application. The interview, coupled with the information provided in the grant application, helps members of the JFHNA Board of Directors gain a better understanding concerning the needs of each of the group.

VI. Compliance Rules for Agencies Receiving JFHNA Grants

The grant money must be expended only for the stated purposes, and at the stated location. JFHNA grants are not intended for "general funds." No JFHNA grant money may be shared with or sent to an agency's national headquarters or branch offices without explicit, written approval of the JFHNA Board of Directors. No deviation or modification of the compliancy rules listed herein are allowed without advance, prior written approval by the JFHNA Board of Directors.

JFHNA
GRANT APPLICATION

PLEASE, TYPE OR PRINT IN INK!

Date _____

Group Name _____

Address _____

Telephone _____
Fax Phone _____

Name, Address & Phone Number of:
Board President or Chairperson

Group Director

(NOTE: Attachments may be used for questions requiring additional space.)

A. Is your agency managed/operated or controlled by one of the following: (A political movement, a government agency or entity, a for-profit business)?

YES _____ **NO** _____
(If YES, explain)

B. Are the benefits of your organization in any way based upon an individual's affiliation with any of the following: (A political movement, a government agency or entity, a for-profit business)?

YES _____ **NO** _____
(If YES, explain)

C. Are you an organization described in section 501(c)(3) of the Internal Revenue code and are contributions to your organization deductible by donors under section 170(c)(2) of the Internal Revenue code?

YES _____ **NO** _____
(If No, explain conditions under which contributions are deductible.)

D. Briefly describe the purpose(s) and major programs(s) of your group. (If necessary, literature, brochures, etc., may be attached.)

E. How much are you requesting and for what do you intend to use JFHNA Grant Money and is this request part of a larger request from other organizations?

F. If JFHNA makes a grant to your organization, what is the time schedule for expenditure of these funds?

G. If the grant will be used outside the Huntsville/North Alabama community, what locations and client group will be served by the program(s) involved in this grant request?

I. Are the same or similar services offered by any other agencies to this region/location and/or client group? List them.

K. Please list the names, addresses, and telephone numbers of three individuals outside your organization who are knowledgeable of your program(s) should we need to contact them for background information (this information is optional):

1. _____	2. _____	3. _____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

L. Please attach the following information on the financial status of your agency/organization:

1. Latest balance sheet, listing all assets and liabilities.
2. Budget for the Current Fiscal Year. Please identify any income sources that are not firm commitments.
3. Budget projection for Future Years, if available.

Certify that all information on this application is true and accurate and agree to comply with all requirements of this application and related letters.

Signature of the Group Director

Date

Signature of a second Group officer

Date

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