

VINTON COMMUNITY FOUNDATION

**P.O. BOX 112
VINTON, IA 52349**

**LOCAL OPTION SALES TAX (LOST)
GRANT APPLICATION
Non-Profit Organization Application**

Please complete this form and return to: VINTON COMMUNITY FOUNDATION
P.O. BOX 112
VINTON, IA 52349

DATE OF APPLICATION _____

NAME OF ORGANIZATION _____

ADDRESS _____

CONTACT NAME AND PHONE NUMBER _____

AMOUNT REQUESTING (LIMIT OF \$2,000 PER ORGANIZATION): _____

LOCAL OPTION SALES TAX REVENUE (LOST) NON-PROFIT REQUIREMENTS:

MUST PROVIDE A COPY OF DETERMINATION LETTER (VERIFICATION AND 501 (C) (3) TAX-EXEMPT STATUS) AND A COPY OF ARTICLES OF INCORPORATION

PURPOSE OF ORGANIZATION: _____

REASON OF REQUEST (BE SPECIFIC – LIST ALL ITEMS AND ESTIMATED COST): _____

NUMBER OF VINTON RESIDENTS SERVED: _____

REPORTS REQUIRED – PLEASE PROVIDE A BREAKDOWN OF HOW THE PREVIOUS YEARS FUNDING WAS SPENT (BE SPECIFIC – LIST ALL ITEMS AND ACTUAL COST) CANNOT BE USED FOR OTHER PURPOSES THAN WHAT WAS REQUESTED: _____

DOES YOUR ORGANIZATION ALREADY RECEIVED FUNDING FROM THE CITY OF VINTON? YES NO

FUNDING SOURCES AND AMOUNTS (Please list other funding sources and amounts besides this application):

Source	Amount	Source	Amount
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Contact Signature: _____ Date Signed: _____

PLEASE DIRECT ANY QUESTIONS TO **FSB&T-VINTON 319-472-2373**
DARLYS HULME, PRESIDENT
JESSICA HELMS, TRUST ASSISTANT

APPLICATION DEADLINE 5:00 PM - APRIL 30, 2021
PLEASE MAKE 8 COPIES OF GRANT REQUEST

RANKING CRITERIA: The applications will be ranked according to the following:

- a. Based in Vinton and serve Vinton residents
 - b. Number of residents served
 - c. Availability and amount of other sources of revenue
 - d. Purpose of organization: provide human and/or cultural services that are essential or enriching to the health and well-being of the citizens of Vinton.
 - e. Whether the organization receives funding already from the City of Vinton (while this will not exclude an organization, it will lower its ranking of priority).
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NON-ALLOWABLE USES: Funds provided through the LOST to non-profits cannot be spent on:

- a. Food & Drink
 - b. Trips
 - c. Gambling
 - d. Normal operational expenditures of the Non-profit
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FUNDING LIMIT: Each organization may request up to \$2,000.00

REPORTS REQUIRED: A final report from the non-profit receiving the money, including a breakdown of how the money was spent. The report will be filed with the Vinton Community Foundation which will file a copy of the report with the City of Vinton. Please file this report with the Vinton Community Foundation, 401 B Avenue, Vinton, IA 52349 as soon as possible or before December 31st 2021.

**LOCAL OPTION SALES TAX (LOST)
Non-Profit Organization Final Report
For Grant Funds Distributed In 2021**

Please complete this form and return to: VINTON COMMUNITY FOUNDATION
P.O. BOX 112
VINTON, IA 52349

DATE OF REPORT _____

NAME OF ORGANIZATION _____

ADDRESS _____

CONTACT NAME AND PHONE NUMBER _____

AMOUNT RECEIVED FROM LOST FUND: _____

NUMBER OF VINTON RESIDENTS SERVED: _____

REPORTS REQUIRED – PLEASE PROVIDE A BREAKDOWN OF HOW THE FUNDING WAS SPENT (BE SPECIFIC – LIST ALL ITEMS AND ACTUAL COST) CANNOT BE USED FOR PURPOSES OTHER THAN WHAT WAS REQUESTED: _____

Non-allowable Uses: The money provided through the LOST to non-profits cannot be spend on:

1. Food and drink
2. Trips
3. Gambling
4. Normal operational expenditures of the Non-profit

FUNDING SOURCES AND AMOUNTS (Please list other funding sources received and amounts besides this application):

Source	Amount	Source	Amount
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Contact Signature: _____ **Date Signed:** _____

If more room required attach extra sheets.