

THE SAVANNAH  
**COMMUNITY**  
FOUNDATION, INC.

Telephone & Facsimile  
(912) 921-7700

2225 Norwood Avenue, Suite B  
Savannah, Georgia 31406  
[www.savfoundation.org](http://www.savfoundation.org)

[grants@savfoundation.org](mailto:grants@savfoundation.org)

## IMMEDIATE NEEDS FUND

### GRANT CRITERIA

#### **GRANTS FROM THIS FUND MAY BE MADE ONLY FOR "IMMEDIATE NEEDS."**

"IMMEDIATE NEEDS" INCLUDE EMERGENCY NEEDS, AS WELL AS OTHER UNANTICIPATED EXPENSES. **"IMMEDIATE NEEDS" DO NOT INCLUDE START-UP EXPENSES, GENERAL OVERHEAD, CAPITAL EXPENDITURES, CAPITAL CAMPAIGNS, ROUTINE RECURRING EXPENSES OR NORMAL PROGRAM EXPENSES.** GRANTS WILL NOT EXCEED \$5,000 PER GRANT (TYPICAL AMOUNTS ARE LESS THAN \$1,500.00), AND NO ORGANIZATION WILL BE GRANTED MORE THAN \$5,000.00 TOTAL WITHIN ANY TWELVE (12) MONTH PERIOD.

ALL ORGANIZATIONS' PRIMARY LOCATION MUST SERVE BRYAN, CHATHAM AND/OR EFFINGHAM COUNTIES IN GEORGIA. OTHER LOCATIONS ARE NOT ELIGIBLE.

Grant requests should be submitted via email (**preferably**) or fax (912) 921-7700 using the information in our letterhead above. Please submit all information as **ONE PDF document.**

1. Exact legal name of the requesting organization: \_\_\_\_\_

2. Name of the organization's contact person for this grant request: \_\_\_\_\_

3. Requesting organization's mailing address: \_\_\_\_\_

4. Organization's phone number and email address: \_\_\_\_\_

5. Organization's Tax Identification Number: \_\_\_\_\_

6. Is the requesting organization classified by the Internal Revenue Service as a Section 170(b)(1)(a) organization or Section 501(c)(3) "public charity" that is not a Section 509(a)(3) "supporting organization" or "private foundation"?

\_\_\_\_\_ Yes \_\_\_\_\_ No

7. Organization's mission: \_\_\_\_\_

8. Organization's fiscal year beginning and end: \_\_\_\_\_

9. Organization's total budgeted revenues and expenses for the current fiscal year: \_\_\_\_\_

10. Organization's top three (3) sources of revenue and amount from each source:

11. Please list the dates, amounts and brief description of all other grants received by your organization from **ANY FUND** of The Foundation within the thirty-six (36) months preceding the date of this application. Use additional pages if necessary.

A. Date \_\_\_\_\_ Fund \_\_\_\_\_ Amount \_\_\_\_\_

Description \_\_\_\_\_

B. Date \_\_\_\_\_ Fund \_\_\_\_\_ Amount \_\_\_\_\_

Description \_\_\_\_\_

C. Date \_\_\_\_\_ Fund \_\_\_\_\_ Amount \_\_\_\_\_

Description \_\_\_\_\_

12. Please attached a list of your current officers and directors.

13. Is the grant requested (a) for a budgeted item? \_\_\_\_\_ Yes \_\_\_\_\_ No

(b) for a capital expenditure? \_\_\_\_\_ Yes \_\_\_\_\_ No

(c) for a capital campaign? \_\_\_\_\_ Yes \_\_\_\_\_ No

(d) for an ongoing project expense? \_\_\_\_\_ Yes \_\_\_\_\_ No

14. Are additional materials attached/enclosed?

\_\_\_\_\_ Yes \_\_\_\_\_ No

15. **Exact dollar amount requested** \_\_\_\_\_. If the full amount is not awarded, are other funds available to cover the shortfall? \_\_\_\_\_ Yes \_\_\_\_\_ No

16. Is this grant request time sensitive (i.e., requires a response in less than 30 days)?

\_\_\_\_\_ Yes \_\_\_\_\_ No

17. Brief statement of grant request:

18. Narrative statement of grant request (attach additional pages if necessary):

19. Why is this request for an "immediate need" as defined in the criteria listed above?

20. Signature: \_\_\_\_\_ Print name \_\_\_\_\_

Title \_\_\_\_\_

21. Date of submission \_\_\_\_\_, 20\_\_\_\_