



INYO COUNTY COMMUNITY RESILIENCY GRANT Application

GENERAL INFORMATION

Name of Organization: _____

Address: _____

Contact Person Name and Title: _____

Contact Person E-mail: _____

Contact Person Phone: _____

Applicable Internal Revenue Code Section: _____

Does the Organization participate in the following activities? If so, this organization does not qualify for the Community Resiliency Grant.

- Exclusively engaged in lobbying
- Primarily engaged in distributing funds to other organizations or individuals
- Use grant funds for an inherently religious purpose (see [guidelines](#) for more information)
- Are any of the following:
 - An educational institution
 - A social, recreational, sports, or booster club
 - A private foundation



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WRITTEN NARRATIVE

- 1) Written Narrative: Please attach a separate document, in narrative format, containing the following elements:
 - a) A description of the organization including charitable purpose, mission, goals and history in Inyo County,
 - b) An explanation of how the organization has provided a significant community benefit in the past,
 - c) A description of how the organization has provided a significant community benefit during the COVID-19 pandemic,
 - d) Discuss the impacts your agency has experienced directly and indirectly related to COVID-19, and
 - e) Describe the intended use of the grant funds, if awarded.

SUMMARY FINANCIAL INFORMATION

- 1) Use the [Inyo County Community Resiliency Grant Summary of Financial Information*](#) Excel file to report the required financial information. Please note that financial statements are also required (see below).

** Clicking the link will download the Excel file from your web browser automatically*

ADDITIONAL DOCUMENTS REQUIRED

- 1) IRS Determination Letter showing the organization's nonprofit status
- 2) Most recent tax filing – Form 990
- 3) Financial statements for the period from 3/1/2019 – 12/31/2019
- 4) Financial statements for the period from 3/1/2020 – 12/31/2020
- 5) List, including source and amount, of all Federal, State and County COVID relief funding received. If a loan must be repaid, please note that on the list.

GRANT APPLICATION PROCESS AND TERMS

- 1) Grant application packets must be submitted via email (unless other arrangements are made) to businessinfo@inyocounty.us from **JAN. 14, 2021 – JAN. 29, 2021 AT 5:00 PM.**

businessinfo@inyocounty.us

Phone: 760.878.8457



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- 2) Complete applications will be reviewed for eligibility and applicants will receive a notice of award between Feb. 1st and Feb. 19th.
- 3) Submission of an application in no way obligates the County to award a grant **AND** the County reserves the right to reject any or all applications, wholly or in part, at any time, without penalty.
- 4) Awards will be scored by an evaluation panel based on criteria using the Inyo County Community Resiliency Grant Score Sheet. See [Inyo County Community Resiliency Grant Guidelines](#), page 3 for a sample score sheet.
- 5) If awarded, a binding contract between the entity named above and the County of Inyo must be entered into as a condition of receiving funding.
- 6) If awarded, funds may only be used as disclosed on this application. Other uses must be pre-approved by the County.
- 7) Organizations receiving funding are required to submit evidence that the grant funds have been spent in the manner and for the purposes stated in this application by May 28, 2021. Evidence provided must be to the satisfaction of the County.
- 8) The County reserves the right to audit the applicant's books and records for five years from the date the funds were distributed by the County and for compliance with the contract between the County and the applicant.
- 9) Grant funds will be issued as soon as practicable upon execution of the contract between the County and the applicant.
- 10) Applicants will be disqualified for providing false information.

Please direct any questions to businessinfo@inyocounty.us or call (760) 878-8457.

By my signature below, I have read and understand the INYO COUNTY COMMUNITY RESILIENCY GRANT PROGRAM, and I declare under penalty of perjury under the laws of the State of California that the information contained in this application is true and correct. I further make the following representations and acknowledge agreement to the following terms and conditions:

Applicant Signature: _____

Date: _____

businessinfo@inyocounty.us

Phone: 760.878.8457