**Richard and Susan Smith Family Foundation**

**Small Capital Grants Program Application Questions**

**Contact Information**

**First Name of Grant Writer**

**Last Name of Grant Writer**

**Title of Grant Writer**

**Email of Grant Writer**

**Phone Number of Grant Writer**

**Phone Extension**

**First Name of Executive Director/CEO**

**Last Name of Executive Director/CEO**

**Title (if not Executive Director)**

**Email of Executive Director/CEO**

**Phone Number of Executive Director/CEO**

**Phone Extension**

**Organization Address 1**

**Address 2**

**City**

**State**

**Zip Code**

**Is the mailing address different?**

**Organization Overview**

**Legal Name (if different than Organization Name)**

**Does the organization have a fiscal sponsor?**

[If yes, please enter their name and IRS Tax ID (EIN) number]

**Is your organization a government agency?**

[Select one: No, Yes]

**Issue Area**

[Select one: Cultural Vitality, Economic Mobility, Education, Health, Human Services, Youth Development, Other]

**Organization Website**

**Annual Operating Budget (for current year)**

**Year Founded**

**Number of People Served Annually**

**Geographic Areas Served**

(Please select all that apply: Greater Boston, Brockton, Chelsea, Fall River, Lawrence, Lowell, Lynn, New Bedford, Other)

**Please provide a list of cities, towns, and/or neighborhoods served that are not captured above.**

**Organizational Mission Statement (100 words max.)**

**Please provide a description of your organization, including its goals, programs, outcomes, population served, etc. (1,000 words max.)**

(Concise responses appreciated (500 words or less) but use as much space as needed. TIP: click and drag the bottom right corner of the text box to show more lines at once.)

**Has your organization received any grants from the Richard and Susan Smith Family Foundation in the past?**

[Select one: No, Yes]

**Project Description**

**Season/Year**

[auto populates with spring or fall and year]

**Project Type**

[Select one: Facility Improvements, Furniture/Equipment, Technology, Vehicle, Other]

(If your request includes line items of varying project types, please select the project type which represents the largest portion of the budget.)

**If you selected “Other,” please explain why.**

**Amount Requested**

**Is the total project budget greater than this amount?**

[Select one: No, Yes]

**[If yes] Please note that the Foundation expects that, if awarded, a Small Capital Grant will cover the complete cost of a proposed project. These grants are not intended to fund portions of larger capital projects. Please explain why the total cost of the project you are proposing exceeds the grant amount which you are requesting.**

**Number of People Served by Project Annually**

**Please provide a 1-2 sentence summary of your capital request. (75 words max.)**

**Please provide a detailed description of your small capital project, explaining how it meets an important need, how it relates to your agency's mission, how it will enable the agency to increase its reach and/or depth of impact, who will carry out the project, and how the asset will be managed and supported in the future. (1,000 words max.)**

(Concise responses appreciated (500 words or less) but use as much space as needed. TIP: click and drag the bottom right corner of the text box to show more lines at once.)

**Using the Upload button, please provide a line item budget detailing how you propose to spend the funds requested for the project. Please note, you do not need to submit an organizational budget/financial statement at this stage of the process.**

(Please be sure to review the list of ineligible items on our [website](https://rssff.org/community-giving/#small-capital-grants) and if you have questions, contact Foundation staff.)

**If you would like to upload photos or other relevant additional materials, please do so here. (optional)**

**Is there any other information not captured elsewhere regarding your organization, project, community served, or anything else that you believe will help in our evaluation of your request? (optional) (300 words max.)**

**The maximum request amount for the Small Capital Grants program is currently $50,000. If the ceiling were raised to $100,000 for capital needs, how would that change your project request? (optional) (300 words max.)**

**Please share any other general reflections about your external context, broad trends in your community or field, key challenges, exciting opportunities, etc. (optional) (300 words max.)**

**Please share any specific feedback on how we could improve the application experience (related to Foundation staff, website information, online application portal, etc.). (optional) (300 words max.)**