

Wells Fargo Open for Business Grant Program

THIS SAMPLE APPLICATION IS A RESOURCE ONLY.

The Open for Business Grant Program <u>cannot</u> accept paper applications. All applications must be submitted online.

To apply, first complete the Eligibility Screener available on the <u>Houston Equity</u>

<u>Fund Website</u> starting May 15, 2023. Only eligible applicants will be provided a

link via email to access the online application portal.

The online application portal opens May 15, 2023 at 5:00AM and closes May 31, 2023 11:59PM.

How many of your board members identify as Black/African American, Hispanic/Latino, Asian/Asian America, Pacific Islander, Native Hawaiian, Middle Eastern/North African, American Indian or Alaskan Native? *

	4
•	

Save Changes





(/sp/ofb-r2-np-en)

Round 2 - Nonprofit Application -

Save Draft

Mark Complete

Close

Please complete all required fields.

You can save as a draft and return later to complete by clicking "Save Draft" at the bottom of the page.

When you are ready to submit this step, please click the blue "Save" button at the bottom of the page.

Section 1 - Nonprofit Overview 1. Nonprofit Name * Example Nonprofit Organization's Legal Name (as shown on IRS Determination Letter) * Example Nonprofit Legal As shown on the IRS determination letter. 2. What is your organization's NTEE Code? * O) Youth Development This code can be found on your IRS letter of determination. You can also look up your NTEE code here: https://501c3lookup.org/ (https://501c3lookup.org/)

Nonprofit Lifecycle - https://socialimpactarchitects.com/wp-content/uploads/2022/06/Nonprofit-Lifecycle.pdf Ideation Start-up Growth Maturity 4. How many years has your nonprofit been in operation? * More than 10 years 5. What year was your nonprofit organization established? * 2008 Please provide the year as seen on your IRS determination letter. 6. How many paid employees does your nonprofit currently have? Full-Time Employees * 1 Part-Time Employees * 1 Part-Time Employees typically work MORE THAN 35 hours a week. 1099 Contractors * 1 1099 Contractors are individuals who support your organization's work in an ongoing way. 7. How many employees receive health insurance through the nonprofit? * 0 8. How often does your organization utilize volunteers for programming? * © Daily Weekly Monthly Events Only	3. Where is your organization in the nonprofit lifecycle? *	
Oldeation Start-up Growth Maturity 4. How many years has your nonprofit been in operation? * More than 10 years 5. What year was your nonprofit organization established? * 2008 Please provide the year as seen on your IRS determination letter. 6. How many paid employees does your nonprofit currently have? Full-Time Employees * 1 Full-Time Employees typically work MORE THAN 35 hours a week. Part Time Employees * 1 Part-Time Employees typically work LESS THAN 35 hours a week. 1099 Contractors * 1 1099 Contractors are individuals who support your organization's work in an ongoing way. 7. How many employees receive health insurance through the nonprofit? * 0 8. How often does your organization utilize volunteers for programming? * © Daily Weekly Monthly	Nonprofit Lifecycle -	

Section 2 - Nonprofit Narrative

1. What is your nonprofit's mission and/or v	vision statement? *
Mission/vision	
	Word Count: 1 / 75
2. Briefly describe your organization's histo	ery and achievements to date. *
History/achievements	
•	
	Word Count: 1 / 300
	Word Count. 17 300
3. How do you mobilize others around your	mission? *
Mobilize others	
WODINZE OTHERS	
	Word Count: 2 / 15 0
4. In your own words, please tell us about to organization serves. *	ne community or populations that your
Populations served	
	\M\ard Ca\ 0.120
	Word Count: 2 / 300

5. Do any of the following descriptors fit the population your organization serves?

Select up to 5 target populations your organization primarily serves. *

✓ Low-moderate income households

	foreign-born individuals
☐ Individuals wh	nose first language is not English
☐ K-12 students	s and/or youth
☐ First generation	on college students
☐ Adult Education	on
☐ Older adults (65 years and older)
☐ People with d	isabilities
☐ LGBTQ+ indiv	viduals
☐ Military familie	es and/or veterans
□ None of the a	bove
Section	3 - Financials & Grant Request
can request betw purchase of eligi	s section refer to how grant funds will be utilized. For Round 2, applicants veen \$5,000 and \$65,000 in funding. Funding must be spent on the ible tangible assets, see Guidelines or FAQ documents. Grant award made on a case-by-case basis.
1. What was the	e nonprofit's annual revenue in 2022? *
\$ 1,000	
	formation on: Form 990 (box G - Gross Receipts); Form 990-EZ (line L - Gross n 990-N, see the FAQ document for guidance.
2. Does your no	onprofit currently own any tangible business assets? *
facilities, machinery	s asset are items owned by the nonprofit, including (but not limited to): land, buildings, y, equipment, inventory, or technology (e.g.: computers, Quickbooks, software, etc.)
Yes	
YesNo	
○ No	
○ No	rganization secure the tangible assets referenced above? *
○ No	
O No How did your o	
O No How did your o	
O No How did your o	

O-25%
26-50%
○ 51% or higher
4. How many unique types of tangible assets are you hoping to buy/upgrade with grant funds? *
○ One
○ Two
Three
○ Four
○ Five
Asset Request 1:
Quote/Price Documentation *
+ Select a file
Type of Tangible Asset *
Other
If other type of tangible asset, please describe *
Item Description *
Describe the tangible asset using a short word or phrase. For example: Laptop
Briefly describe how this tangible asset relates to your future plans or current operations. *
Quantity *
Quantity *
Buy New or Upgrade *
○ Buy New
○ Upgrade
Asset 1 Total Cost *

\$	
Asset Request 2	::
Quote/Price Dod	eumentation *
♣ Select a file	•
Type of Tangible	Asset *
tem Descriptior) *
Describe the tangibl	e asset using a short word or phrase. For example: Laptop
Briefly describe operations. *	how this tangible asset relates to your future plans or current
Quantity *	
	rade *
Buy New or Upg	rade *
Buy New or Upg ○ Buy New	rade *
Buy New or Upg Buy New Upgrade	
Buy New or Upg ○ Buy New ○ Upgrade	
Buy New or Upg Buy New Upgrade Asset 2 Total Co	est *
Buy New or Upg Buy New Upgrade Asset 2 Total Co \$ Asset Request 3	est *
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Buy New or Upg Buy New Upgrade Asset 2 Total Co \$ Asset Request 3 Quote/Price Doo + Select a file	est * cumentation *

6 months		ly describe how this tangible asset relates to your future plans or current ations. *
Buy New Upgrade Asset 3 Total Cost * Total Grant Request 5. What is a realistic timeline for your organization to acquire the tangible assets you are requesting for this project? * 3 months 6 months 9 months 1 year More than 1 year Section 4 - Impact Alignment & Metrics 1. Through the utilization of this tangible asset, please select how your nonprofit may make a positive impact in the next 12 months. Please check all that apply. * Offer a new program Expand an existing program Serve more individuals Better serve existing individuals Keep my current employees	Quar	ntity *
Asset 3 Total Cost * \$ Total Grant Request \$ 0 5. What is a realistic timeline for your organization to acquire the tangible assets you are requesting for this project? * 3 months 6 months 9 months 1 year More than 1 year Section 4 - Impact Alignment & Metrics 1. Through the utilization of this tangible asset, please select how your nonprofit may make a positive impact in the next 12 months. Please check all that apply. * Offer a new program Expand an existing program Serve more individuals Better serve existing individuals Keep my current employees	Buy	New or Upgrade *
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☐ Better serve existing individuals ☐ Keep my current employees	1. Th may ☑ Of □ E>	rough the utilization of this tangible asset, please select how your nonprofit make a positive impact in the next 12 months. Please check all that apply. * fer a new program spand an existing program
☐ Keep my current employees	□ Se	erve more individuals
		-
	□ Ke	eep my current employees

☐ Decrease expenses	
□ Other	
2. Please describe the anticipated impact of the asset to your nonprofit and the broader community. Please reference the benefits identified above in your response.	nse.
Impact on community	
Word Count: 3	<i>/</i> /3 / 300
3. Which of the Houston Equity Fund pillars does your organization best align wi	th?
Refer to the application Guidelines. Social & Racial Justice	
✓ Social & Racial Justice ✓ Economic Development	
✓ Youth Education & Empowerment	
✓ Community Building	
□ None of these	
Please describe how your organization positively impacts the Social & Racial Justillar you selected. Share specific examples of how your business impacts this perfect the Please number each example separately. *	
Social/Racial Justice	
	/

Please describe how your organization positively impacts the Economic Development pillar you selected. Share specific examples of how your business impacts this pillar. Please number each example separately. *

Economic Development	
	Word Count: 2 / 300 (min: 10
Please describe how your organization po Empowerment pillar you selected. Share s mpacts this pillar. Please number each ex	specific examples of how your business
Education & Empowerment	
	Word Count: 3 / 300 (min: 10
Nagas dagariba bayı yayır arganization ne	ositively impacts the Community Building
riease describe now your ordanization bu	Jailively illibacia life Collilliullity Dullulliu
oillar you selected. Share specific example	es of how your business impacts this pilla
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Please number each example separately. The Community Building 4. How many individuals did your organization tracks impact a multiply the number of households served.	es of how your business impacts this pilla * Word Count: 2 / 300 (min: 10 ation serve across all programming in at the family or household level, please
Please number each example separately. The Community Building 4. How many individuals did your organization tracks impact a multiply the number of households served.	es of how your business impacts this pilla * Word Count: 2 / 300 (min: 10 ation serve across all programming in at the family or household level, please
Please number each example separately. The Community Building 4. How many individuals did your organization tracks impact a multiply the number of households served whole number. *	es of how your business impacts this pilla * Word Count: 2 / 300 (min: 10 ation serve across all programming in at the family or household level, please d in 2022 by 2.6 and round to the nearest
Please number each example separately. The Community Building 4. How many individuals did your organization tracks impact a multiply the number of households served whole number. * 200 5. How many employees do you anticipate.	es of how your business impacts this pilla * Word Count: 2 / 300 (min: 10 ation serve across all programming in at the family or household level, please d in 2022 by 2.6 and round to the nearest
Please number each example separately. The Community Building 4. How many individuals did your organization tracks impact a multiply the number of households served whole number.	es of how your business impacts this pilla * Word Count: 2 / 300 (min: 10 ation serve across all programming in at the family or household level, please d in 2022 by 2.6 and round to the nearest
Please number each example separately. The Community Building 4. How many individuals did your organization tracks impact a multiply the number of households served whole number. * 200 5. How many employees do you anticipate full-time: *	Word Count: 2 / 300 (min: 10 ation serve across all programming in at the family or household level, please d in 2022 by 2.6 and round to the nearest e having by June 1, 2024?

Part-Time Employees typically work LESS THAN 35 hours a week.

1099 Contractors: *

1

1099 contractors are individuals who support your organization's work in an ongoing way.

6. What is your estimate for annual revenue by the end of 2023? *

\$ 2,000

Supplemental Proposal (Optional)

In Round 2, the Houston Equity Fund has allocated \$500,000 to award approximately 6 grants, ranging from \$75,000 - \$100,000, to qualifying, high-scoring applicants. Finalists will be selected through a rigorous process and may be invited to participate in an interview prior to being awarded.

To be considered for this limited opportunity, applicants MUST:

- Have plans to invest in a capital-intensive asset, such as facility construction or renovations, land, machinery, or equipment, which will facilitate the business' growth and greater community impact.
- Be willing to participate in an interview process, upon request. Interpreters will be available in Spanish, Chinese, Vietnamese, and American Sign Language.
- Opt-in to be considered for a larger award. Clicking "yes" to the below question will prompt you to:
 - Upload a supplemental budget request. Click HERE
 (https://houstonequityfund.org/r2_supplemental-proposal-updates_5-2-23_approved_external/) for instructions.
 - Complete two supplemental questions
 - Upload most recent Annual Audited Financial Statement or most recent Annual Financial Statements (if audited financials not available)
 - Upload any ONE of the following three documents currently available for your nonprofit:
 - 1. Current Strategic Plan
 - 2. Most Recent Annual Report
 - 3. Copy of grant proposal submitted to another funder

If you apply for this limited funding opportunity and are not selected, you will still be considered for a grant award between \$5,000 - \$65,000.

-	o opt-in to be considered for a larg 00 by submitting a supplemental a	
Yes		
○ No		
investment for you plan to accomplish organization; 3) r	sh with the assets; 2) three to five	the following details: 1) goals you year strategic vision for the ices that will utilize the assets; and
Catalytic investme	nt	
		Word Count: 2 / 750
help others. * Your why		
		Word Count: 2 / 750
3. Supplemental	Budget Request *	
Combine the budget	request and quotes into one PDF documer	nt.
+ Select a file		•
4. Annual Audited unavailable) *	d Financials or Latest Annual Fina	ancial Statements (if audit
♣ Select a file		9
5. Current Strates	gic Plan; or Recent Annual Report proposal *	t; or a copy of a previously
_		
♣ Select a file		•

Section 5 - Supporting Documents Upload

1. IRS Determination Letter to provide 501c3 status (if using a fiscal sponsor to receive these funds, upload fiscal sponsor's IRS determination letter) * Ø + Select a file 2. Two 990s for the most recent years available (990-N and 990-EZ allowable) * Ø + Select a file 3. Two 990s for the most recent years available (990-N and 990-EZ allowable) * + Select a file 0 4. 2022 Operating Budget * Ø + Select a file 5. List of Board of Directors * Ø + Select a file 6. Name and Biography of President/CEO/Executive Director *

Section 6 - Closing Agreements - Sign & Submit

Ø

By entering your name below means you have read, understand, agree to & certify the following:

+ Select a file

- The information provided in this application is an **accurate**, **honest**, **and true** reflection of the work of my 501c3 organization.
- I understand that my application will be **DECLINED** if the following Grant Program Rules and Conditions are violated, including but not limited to: a) submitting more than one application; b) contacting the Houston Equity Fund Board of Directors or program staff to solicit support; c) sharing application content or information with

another applicant; d) requesting ineligible assets; e) submitting incorrect or inaccurate supporting documents.

- If awarded, I understand Grantees will be asked to affirm that they have not been convicted or named as a defendant in any criminal or civil matter involving fraud, theft, embezzlement, perjury or misrepresentation. If such a conviction or charge has occurred against the Grantee and/or an applicable lawsuit has been filed against the Grantee, the grantee must fully advise the Houston Equity Fund of the facts and circumstances surrounding such conviction, charge, and/or lawsuit to determine whether applicant remains eligible to receive the grant.
- If awarded, I understand that I will be asked to **submit two reports** (at a minimum) for financial and programmatic reporting to the Houston Equity Fund and Greater Houston Community Foundation, as a condition of receiving grant funding through this program. A midterm report is due 6 months after grants funds are awarded and a final report is due 12 months after grants are awarded. This includes submitting **documentation to verify funding was used for the intended purpose** of the grant (e.g., receipts, invoices, purchase orders, etc.). I agree to comply with all reporting requirements (programmatic or financial) in a timely manner.
- I understand that grant funds will only be used for the purposes allowed by the IRS
 and other government agencies relating to grants from 501c3 nonprofits. Without
 exception, no funds will be used for lobbying purposes or to aid in the election of a
 public official.
- I understand the grant program reserves the right to determine other nonprofit types that may be ineligible upon the application review process.
- I understand that Houston Equity Fund and Greater Houston Community Foundation reserve the right to cancel any pending payment and/or request repayment of grant funding in full if funding is not utilized for the purpose described in this grant application or reporting requirements are not fulfilled.
- I understand that Houston Equity Fund and Greater Houston Community Foundation may randomly select grant recipients to schedule a time to meet in person at their place of business to assess the impact of grant funds.

Please review and verify all information before submitting your application. You are unable to edit your application after

submission. Unfortunately, due to the volume of applications submitted, we cannot offer assistance to update an application.

gital Signature *		

Save Draft

Mark Complete

Close



(http://www.wizehive.com/)