



THE TRINITY TRUST

The **Trinity Trust** makes grants exclusively for the benefit of the citizens of Trinity County, California. The Trust is an affiliate of the **Humboldt Area Foundation**, who manages The Trinity Trust Endowment and administers Trinity Trust grants. Grant decisions are made by a committee of Trinity County residents who have shown long-term interest in community betterment.

COMMUNITY RESPONSE GRANT PROGRAM

The Trinity Trust's Community Response Grant Program is designed to respond to urgent, unexpected or one-time needs where a small investment can make a lasting difference to our community.

This grant program should not be viewed as an ongoing or yearly source of support. If your project requires future support, be sure you are developing sources of future funding. Repeat applications for the same project are seldom funded.

Deadlines:

- March 15, 2021
- October 15, 2021

Grant Guidelines

Grants will be made for projects that do **one** or more of the following:

Build ~ collaborative relationships and partnerships

Integrate ~ youth in ways that build their commitment to community and civic responsibility,

Engage ~ community members who will benefit in the planning,

Develop ~ community leadership,

Leverage ~ matching funding or resources for the organization

Increase ~ the long-term capacity of an organization to improve or expand their services.

How to Apply

1. Collate applications in the following order:
 - a. Grant Form
 - b. Project Narrative
 - c. Total Project Budget
 - d. A copy of the applicant organization's letter of tax exemption (*501(c)3 letter*).
 - e. Signed Agreement to Grant Terms.
2. Applications must be submitted and postmarked or emailed by the deadline to:
The Trinity Trust, c/o Humboldt Area Foundation, 363 Indianola Rd., Bayside, CA 95524
grants@hafoundation.org
3. For more information and to learn about other grant programs, visit Humboldt Area Foundation's website at www.hafoundation.org or call (707) 442-2993.

Eligibility Requirements

- Applicants must be nonprofit charitable or public benefit (*federal tax exempt*) organizations, public schools, government agencies, Indian tribal governments *or* have a qualified fiscal sponsor.
- Projects must benefit the communities within **Trinity County**, California. All organizations from outside this service area must demonstrate that they are working with a locally based group to develop and implement the proposed project.
- Grants cannot be made for expenses outside the service area such as travel expenses of schools or groups for trips out of the area, cultural groups going on tour, “good will” ambassadors, or scholarships and fellowships to other countries.
- Grants cannot be made for the deferred maintenance or annual operating costs of public institutions, churches, services of special tax districts, government or cemeteries.
- Grants cannot be made for religious activities or projects that exclusively benefit the members of sectarian or religious organizations.
- Grants cannot pay for expenses that have already been incurred.

Project Narrative

Please attach a narrative no longer than *one* page with very brief responses to the following.

- 1) Describe the project, timeline, and how it will make a lasting difference to our community.
- 2) All applicants *must* describe how the project meets *at least one* of the following criteria:
 - results from and be implemented by a collaboration,
 - integrates youth in a way that builds their commitment to community and civic responsibility,
 - includes the community members who will benefit in the planning,
 - develops and strengthens community leadership,
 - provides an opportunity to leverage other funding or resources for the organization,
 - *or*, increases the long-term capacity of an organization to improve or expand their services.

Total Project Budget

The project budget should show total project costs and costs covered by this request. Please describe exactly how grant funds will be spent. The following form is provided as an example. Use of the form is optional. You may attach your own project budget containing the same information (*one page max.*).

Anticipated Expenses and Revenue

Expense	Amount requested from Trinity Trust	In-kind donations	Other funding Sources		TOTAL BUDGET (add columns 1-3)
			Amount	Source	
<i>Example: equipment</i>	<i>\$750</i>		<i>\$250</i>	<i>local fundraiser</i>	<i>\$1,000</i>



THE TRINITY TRUST

Community Response Grant

Use this form to apply for a grant from *The Trinity Trust*. Projects must benefit the communities within Trinity County. A complete application consists of this form and all requested attachments.

Date of Application: _____

Amount Requested: _____

PROJECT INFORMATION

This grant would provide the following for the project:	Total Cost of Project:
<p>_____</p> <p>Contact Person: _____ Title: _____</p> <p>Organization: _____</p> <p>Mailing Address: _____</p> <p>City, State Zip: _____ Email: _____</p> <p>Phone: _____ Fax: _____</p>	

LEGAL APPLICANT INFORMATION

Legal Name of Tax Exempt Organization: _____	Tax ID #: _____
Executive Officer: _____	Title: _____
Mailing Address: _____	
City, State Zip: _____	County: _____
Phone: _____	Fax: _____
Email: _____	Website: _____

ATTACHMENTS - please submit the following with your application:

<ul style="list-style-type: none"> Project Narrative (1 page maximum) Letter of Tax Exemption (501(c)3 Letter) 	<ul style="list-style-type: none"> Program Budget (1 page maximum) Signed Agreement to Grant Terms
Please do not submit any additional pages • No need to place in binder or cover	
Mail or deliver to: The Trinity Trust, c/o Humboldt Area Foundation, 363 Indianola Rd., Bayside, CA 95524	
-or-	
Email: grants@hafoundation.org	

Please do not write below this line. For office use only.

Program Officer: _____	Review Date: _____	Fund ID: _____
Committee: _____	Action: _____	Profile #: _____
Amount: _____		Grant #: _____
		Batch #: _____
Program Area: <input type="checkbox"/> ANML <input type="checkbox"/> COMM <input type="checkbox"/> ARTS <input type="checkbox"/> ENV <input type="checkbox"/> HEAL <input type="checkbox"/> TA <input type="checkbox"/> YUTH		



AGREEMENT TO GRANT TERMS

By signing this application form, your organization agrees to the following terms and conditions:

1. You as the grantee, agree that you are a nonprofit charitable or public benefit (federal tax-exempt) organization, public school, government agency, Indian tribal government, or have a qualified fiscal sponsor.
2. This grant supports efforts described in your proposal, the content of which is true and correct to the best of your knowledge. Please contact your program manager/director if there are significant changes to your program staff, timeline, or tax-exempt status during the grant period.
3. Your organization understands and agrees that all grant funds will be applied to the project in accordance with the description and budget provided in your proposal and as set forth in the attached letter. Any significant change in the use of these funds will require prior approval by the Foundation/Trust. Requests for changes must be submitted in writing.
4. If funds are expended for purposes outside of what has been approved by the Foundation/Trust, the Foundation/Trust reserves the right to cancel the grant, hold any additional payments, and request the return of misspent funds.
5. The total amount of this grant or any payment thereof may be discontinued, modified, or withheld at any time, if in the judgement of Humboldt Area Foundation/The Trinity Trust, such as (i) is warranted because grant funds are not being used as required by this letter or (ii) is necessary to comply with the requirements of the law, regulations or rulings.
6. The grant will be used exclusively for charitable, religious, scientific, literary, or educational purposes. Your organization agrees that none of the funds will be used in a way that violates requirements of Internal Revenue Code Section 501(c)(3).
7. Your organization understands that the Foundation/Trust may require periodic financial and narrative reports describing and accounting for use of grant funds received from the Foundation and agrees to supply such information if requested. Proof of expenditure may be required.
8. For grants above \$20,000 and grants to individuals, funds will be distributed from Humboldt Area Foundation to the grantee on a reimbursement basis. The Foundation will advance one-half of total grant funds at the beginning of the grant period. The Foundation will advance the second half of grant funds upon receipt of satisfactory expenditure reports on the initial payment.
9. For multiple year grants, and grants over \$20,000, grant payments after the first year are contingent upon satisfactory progress having been made during the preceding period. Please submit your interim grant report to show grant progress in the first year.
10. You organization understands and agrees that a final narrative report and financial accounting will be submitted to the Foundation/Trust upon completion of the project, by the end of the grant period, or by the grant extension date. Failure to do so may affect your organization's eligibility to apply for HAF/Trinity Trust grants in the future.
11. Your organization retains full discretion and control over the selection of any sub-grantees or individuals to carry out the work set forth in your proposal. In doing so, your organization will act completely independently of Humboldt Area Foundation and the Trinity Trust.
12. This letter constitutes Humboldt Area Foundation and The Trinity Trust and your organization's entire agreement with respect to this grant, the terms of which may not be amended or modified, except in writing by both parties.

Please retain this agreement for your files.

Accepted on behalf of:

Organization Name _____

By (signature) _____

Title _____

Print Name _____

Date _____