**Ann Land and Bertha Henschel Memorial Fund**

**2025 GRANT GUIDELINES**

The City of Sacramento’s Ann Land and Bertha Henschel Memorial Fund Commission invites you to apply for grant monies from the Ann Land and Bertha Henschel Memorial Fund.

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| **Online Application Available:**  **Friday, August 23, 2024**  **Application Deadline:**  **Friday, September 27, 2024 at 4pm** | **Contact:**  Brian Vargas  Youth, Parks, & Community Enrichment  (916) 808-7547  BVargas@cityofsacramento.org |
| All applications shall be submitted via the online application process. Applicants must submit their application by the date of the Application Deadline to be considered for a grant award.  Once applications are received, ALBHMF staff will review for completeness and ensure all required documents are attached. Staff will provide notice to applicants to submit any missing documentation by *Friday, October 11, 2024*. Beyond submission of documents for completeness, no amendments to application content will be accepted. | |

**Purpose:** The purpose of the Ann Land and Bertha Henschel Memorial Fund is to assist the destitute men, women, and children of the City of Sacramento.

**History**: The Ann Land Memorial Fund was established in 1914 with a bequest of $200,000 to the City by former Mayor William Land as a memorial to his mother, Ann Land. In 1952, Bertha Henschel bequeathed $275,000 to the City to establish a fund in her name. Additional contributions to these funds have been made by Emma Hotfilter, Annie Zacariah, and Warren Reed. Each year, interest earnings on these bequests and contributions may be distributed to non-profit organizations. The Sacramento City Council appoints community members to the Ann Land and Bertha Henschel Memorial Fund Commission to review grant applications and award grants to qualified non-profit organizations.

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| Funds Available | For 2025, the Ann Land and Bertha Henschel Memorial Fund Commission has approximately **$180,000** in funds to distribute to organizations that provide “direct aid and assistance to the destitute men, women, and children of the City of Sacramento.” Funds are limited, and demand is high. On average, the Commission awards between 20 to 30 grants annually.  Last year’s average award was **$6,811**. The Commission anticipates an increase in applications this year, so the average award may be lower. The maximum grant request is $10,000. |
| **Eligibility** | Only non-profit 501(c)(3) organizations that have an office or facility within the City of Sacramento and serve destitute residents of the City are eligible to apply. |
| **Required Online Application Attachments** | * Verification of your organization’s not-for-profit status - letter from IRS confirming § 501(c)(3) status. * Verification that your organization (1) is registered and holds “Current” status with the Registry of Charitable Trusts maintained by the California Attorney General or (2) is not required to register. Your organization’s status can be verified using this link for the CA Office of Attorney General’s Registry: <https://rct.doj.ca.gov/Verification/Web/Search.aspx?facility=Y> . Please print a copy of your organization’s status and upload it as an attachment. * A copy of your organization’s current business license from the City of Sacramento or a letter from the City of Sacramento Finance Department verifying your organization’s exemption from the City’s business-operations tax. The Sacramento City Code requires that anyone conducting business within the City of Sacramento have a current business license on file with the City. The City issues nonprofit organizations a waiver letter in lieu of a business license. A waiver letter can be obtained at the Revenue Counter in New City Hall, First Floor, Room 1214. Indicate your organization’s non-profit status on the application form. There is no charge for nonprofit organizations. *As the Revenue Counter is currently closed to walk-in services due to COVID-19, please use this link to apply or renew online:* <https://www.cityofsacramento.org/Finance/Revenue/Business-Operation-Tax> * A copy of your organization’s most recent audit and any corrective actions or recommendations suggested by the auditor. If you do not have an annual audit, please explain why and provide a copy of your organization’s most-recent annual financial report/statements, **signed by your organization’s treasurer AND by the preparer (2 signatures required)**, whether a CPA or bookkeeper. * A budget showing the proposed expenses using ALBH funds. A grantee may not use funds to defray its administrative expenses, overhead, or unanticipated expenses; this includes salary or personnel costs. The budget should clearly explain the dollar amount requested for each categorized expense. Program activities outlined in the grant application narratives should be clearly linked to the budget request. |
| **Disqualification** | ***Read all instructions thoroughly and complete the application carefully. An application will be disqualified if it is incomplete or if it does not include all required materials.***  ***Applicant agencies are required to have one representative attend the Commission annual funding meeting. This year’s meeting will be held in person at 10am on Wednesday, November 6, 2024 at New City Hall Chambers on the 1st floor, 915 I Street. Failure to attend the meeting will result in disqualification even if an organization has been previously funded.***  ***Due to the number of grant requests, the commissioners will not be requesting a presentation from each applicant, but the grant applicants must have a representative present to answer any questions that might arise during discussion of their application.*** |
| **Date Funds Available** | Grant funds are expected to be available to successful applicants on or after January 1, 2025. The Ann Land and Bertha Henschel Memorial Fund Commission will make its allocations at its annual funding meeting on November 6, 2024. Written notification of the Commission’s decision will be emailed to all applicants on or about December 12, 2024. Successful applicants must enter into a funding agreement with the Commission as a condition for receiving funds. |
| Public Documents | All applications submitted to the City become public documents and are available to the public for review once included in the agenda packet for the Commission’s meeting on November 6. If you believe that all or part of your application should be kept confidential, please notify the Commission’s staff. |
| Authorized Uses | Grant funds may be used only to carry out activities that benefit, aid, and assist the destitute men, women, and children of the City. A grantee may not use the funds to defray its administrative expenses, overhead, or unanticipated expenses; this includes salary or personnel costs. Exceptions may be made at the discretion of the Commission. A grantee may only expend these funds during the term of the funding agreement. |
| Other Important Notes | Grants are awarded for a length of one year. Approval of a grant this year in no way implies that funding will be awarded in subsequent years.  Grant funds must be used for the purposes specified in the grant application. Grant funds are to support the basic human needs of the destitute men, women and children of the City.  ***Grantees are required to submit semi-annual reports to the Commission, and the failure to do so will disqualify a grantee from participating in the next funding cycle for which the grantee would otherwise be eligible.*** |
| For More Information | For more information, please contact Brian Vargas, Support Staff to the Ann Land and Bertha Henschel Memorial Fund Commission:  Email: [*BVargas@cityofsacramento.org*](mailto:BVargas@cityofsacramento.org)  Telephone: (916) 808-7547 |

#### 2025 Ann Land & Bertha Henschel Memorial Fund Online Grant Application

Contact Information

|  |  |
| --- | --- |
| 1. Organization Name: |  |
| 1. Address: |  |
| Mailing Address: |  |
| 1. Primary Grant Contact (Correspondence, Reporting) |  |
| Title: |  |
| Phone Number: |  |
| Email Address: |  |
| 1. Authorized Representative (Authorized to sign Grant Agreement) |  |
| Name: |  |
| Phone Number: |  |
| Email Address: |  |
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Program Proposal

1. Select the Sacramento City Council District(s) where services will be rendered. Please reference this link for Council District areas: <https://www.cityofsacramento.org/GIS/Map-Gallery>

Council District 1

Council District 2

Council District 3

Council District 4

Council District 5

Council District 6

Council District 7

Council District 8

1. Select your program service recipients.

Adult Men  Adult Women  Families  Children/Youth

1. What category of services will you provide using this funding?

Food/Nutrition  Shelter/Housing

Transportation  Social Services to Support Basic Human Needs

Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Describe how your program’s objectives align with the goals of the Commission (to assist the destitute men, women and children of the City of Sacramento)?
2. Describe how your program objectives align with the ALBH Annual Funding Priorities?
3. Describe your program intake and assessment process. How will you determine eligibility for the proposed services?
4. Describe any collaboration with other agencies for delivery of the proposed program services.
5. Briefly d
6. escribe the proposed program services.
7. How many clients will be served with ALBHMF funds? What is the percentage out of your total clients served? (clients served with ALBHMF funds ÷ total clients served by the proposed program)
8. Describe your program evaluation methods. What are the program’s goals and expected outcomes?
9. Describe your indicators and criteria for judging success. How will success be measured?

Sustainability

1. Why is this funding important to your program?
2. What is the organization’s plan for program sustainability beyond the grant project period?

Organizational Capacity

1. Please provide your mission statement.
2. What is your organization’s date of incorporation?
3. What other services and programs does your organization provide?
4. Please describe your organization’s experience and capacity to implement the proposed program.
5. Please describe your program staff’s experience and capacity to deliver effective services.

**ALBHMF GRANT EVALUATION MATRIX[[1]](#footnote-1)**

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| **Organization : Project/Program:** | | | | | **Commissioner Name:** | |
|  | **FACTORS** | **WEIGHTED DECISION-M AKING CRITERIA** | | | | **RATING** |
| **0 | 1 | 2 | 3** | **4 | 5 | 6** | **7 | 8 | 9** | |
| **1** | **Geographic area is accessible and appropriate for identified target population** | No clear connection between  target population and area | Moderate linkage between target population and area | Clear demonstrated links between target population and area | |  |
| **2** | **Fit with ALBHMF’s purpose** | No significant alignment | Moderate alignment | Strategic alignment | |  |
| **3** | **Alignment with ALBHMF Annual Funding Priorities** | Low priority, limited impact | Moderate priority alignment or impact | High priority and potential impact | |  |
| **4** | **Demonstrated assessment process to determine target population/eligibility** | **Minimal or no demonstrated assessment process** | **Assessment process is too vague OR stringent for appropriateness to target population** | **Appropriate assessment process described relative to target population** | |  |
| **5** | **Collaboration with other agencies for delivery of services** | **No identified partners or collaborative agreements** | **Potential partners or collaborators identified** | **Longstanding relationships with partners/collaborators** | |  |
| **6** | **Scope – number of clients that will be served with ALBHMF funds** | Minimal clients served relative to request for funds | Moderate scope of clients served relative to request for funds | Demonstrated maximum impact on clients served relative to funds | |  |
| **7** | **Evaluation: program objectives and outcomes have technical merit and are clear, appropriate, and measurable** | Vague or no clear program outcome measures OR measures are not linked to services provided | Appropriate outcomes linked to services provided | Appropriate, clear, and measurable outcome metrics link clearly to services provided | |  |
| **8** | **Sustainability – program is likely to be sustainable after the grant project period** | Program is not likely to operate beyond the grant project period/ no plan for sustainability | Program seems likely to operate beyond the grant project period/ plan describes some future needs/actions | Plan is highly likely to operate beyond the project period/ plan describes diverse future needs/actions | |  |
| **9** | **Organization’s experience and capacity** | No demonstrated experience in provision of services; significant investment of resources required to build program | Some history of experience in services; some investment of resources required to build/implement program | Demonstrated history of experience providing services; little or no investment required to build/implement program | |  |
| **10** | **Staff experience and capacity** | Staff inexperienced; inadequate credentials/training | Some/partial staff experience; related credentials/training | Demonstrated staff experience; related credentials/training | |  |
| **11** | **Organization’s financial capacity – program activities are reflected in the budget** | Budget line items do not reflect appropriate categorized expenses. Program activities are not linked to budget expenses. | Budget adequately reflects dollar amounts per categorized expense. Program activities are somewhat reflected in the budget expenses | Budget clearly reflects dollar amounts per categorized expense. Program activities clearly linked to budget expenses | |  |
|  | **Additional Notes:** | | | | | **TOTAL:**  **/99** |

1. The ALBHMF GRANT EVALUATION MATRIX is the tool used by ALBHMF Commissioners to review each grant application. [↑](#footnote-ref-1)