Fiscal Sponsorship Renewal Application

(Grantee) wishes to renew, terminate and/or add the projects listed below for fiscal sponsorship with SE Uplift Neighborhood Coalition.

We have reviewed the information provided in the Handbook and the attached application was approved by a vote of our board/leadership on (date): _______________________________

| List all projects being renewed, terminated or added for fiscal sponsorship | Status (Select one for each project) |
|---|---|---|
| 1 | Renew | Terminate | Add |
| 2 | Renew | Terminate | Add |
| 3 | Renew | Terminate | Add |
| 4 | Renew | Terminate | Add |
| 5 | Renew | Terminate | Add |
| 6 | Renew | Terminate | Add |

Completion Checklist
Use this list to make sure your application is complete.

For each project we are renewing, we have:
- □ Included the information about each project on the following Project Summary page
- □ Attached an Expense Worksheet showing anticipated expenses for each project
- □ Attached an Annual Report describing last year’s activities for each project

For the projects being terminated, we have:
- □ Attached an Annual Report describing last year’s activities for each project
- □ Attached a plan for any remaining funds held with SE Uplift for each project being terminated.

Note: Prior to your board’s vote, please confirm that your plan for using/transferring any remaining funds is acceptable by first checking in with SE Uplift staff.

For new projects, we have:
- □ Included information about each project on the following Project Summary page
- □ Attached an Expense Worksheet for each new project, showing anticipated expenses

Primary Contact Name: ___________________________ Email: ___________________________
PROJECT SUMMARY PAGE

Applicant Organization: ________________________________ Date: __________________

Instructions
Please list each project for which your organization would like to receive fiscal sponsorship in the coming year. Add lines for events/activities as needed or complete on a separate page.

Project/Event/Activity 1: ____________________________________________________________

Please describe the project. Tell us how this project will serve the mission of your organization.

Types of fundraising efforts (seeking in-kind donations like refreshments, soliciting financial donations from neighbors, applying for grants, etc.):

Date for event/project culmination and anticipated months of fundraising activity: ________________________________

Project coordinator: ____________________________________________ Phone: ________________________________ Email: ________________________________

Project/Event/Activity 2: ____________________________________________________________

Please describe the project. Tell us how this project will serve the mission of your organization.

Types of fundraising efforts (seeking in-kind donations like refreshments, soliciting financial donations from neighbors, applying for grants, etc.):

Date for event/project culmination and anticipated months of fundraising activity: ________________________________

Project coordinator: ____________________________________________ Phone: ________________________________ Email: ________________________________

Project/Event/Activity 3: ____________________________________________________________

Please describe the project. Tell us how this project will serve the mission of your organization.

Types of fundraising efforts (seeking in-kind donations like refreshments, soliciting financial donations from neighbors, applying for grants, etc.):

Date for event/project culmination and anticipated months of fundraising activity: ________________________________

Project coordinator: ____________________________________________ Phone: ________________________________ Email: ________________________________
Project/Event/Activity 4:  
Please describe the project. Tell us how this project will serve the mission of your organization.

Types of fundraising efforts (seeking in-kind donations like refreshments, soliciting financial donations from neighbors, applying for grants, etc.):

Date for event/project culmination and anticipated months of fundraising activity:  

Project coordinator:  
Phone:  
Email:  

Project/Event/Activity 5:  
Please describe the project. Tell us how this project will serve the mission of your organization.

Types of fundraising efforts (seeking in-kind donations like refreshments, soliciting financial donations from neighbors, applying for grants, etc.):

Date for event/project culmination and anticipated months of fundraising activity:  

Project coordinator:  
Phone:  
Email:  

Project/Event/Activity 6:  
Please describe the project. Tell us how this project will serve the mission of your organization.

Types of fundraising efforts (seeking in-kind donations like refreshments, soliciting financial donations from neighbors, applying for grants, etc.):

Date for event/project culmination and anticipated months of fundraising activity:  

Project coordinator:  
Phone:  
Email:  


Fiscal Sponsorship  
ANNUAL REPORT

Reflect on the previous year and answer the following questions for each project that your organization wishes to renew. If a question is not relevant to your project, please write in ‘n/a.’

### Project/Event/Activity:

1. **Successes:** Describe the project’s benefits (tangible and intangible) to the community. List any project milestones and/or main activities accomplished in the past year.

   

2. **Mission compatibility:** Describe how you think your project met SE Uplift’s mission of “empowering citizens and neighborhood associations to create communities that are livable, socially diverse, safe and vital.”

   

3. Did you use SE Uplift’s tax id to fundraise? How? (grant applications, donations, in-kind, other)

   

4. Did you raise funds without SE Uplift’s tax id? How much did you raise?

   

5. **Help us quantify some of the results of your efforts!**

   - Number of volunteers that participated with your project (Give your best estimate.)
   - Number of attendees at each event, meeting or other gathering (Give your best estimate. List each type of event/meeting/gathering separately. Examples below – modify to describe your project.)
   - # of attendees at ___ # of recurring planning/coordinating meetings that lasted ___ # hours on average
   - # of attendees at Event 1
   - # of attendees at Event 2, etc.

6. **Did your project build partnerships and/or relationships with other non-profit organizations, businesses, public agencies?**
   Think about who helped you fundraise, recruit volunteers, or get the word out about your project. Include names of businesses, agencies and other non-profit groups that you worked with below.

   

Attach at least one image from your project. It could be a picture of an event or meeting, flyer, postcard or something else. Be creative, and if you have more than one image, please share!
Fiscal Sponsorship
BUDGET WORKSHEET

This worksheet is meant to help project coordinators communicate a plan for how they will raise and spend money. Organization board members must review and approve this worksheet as part of the overall renewal process. Seeing a financial plan helps board members develop strategies to support the project and approve of the ways project funds may be spent. This worksheet also helps SE Uplift staff and board understand the scope of the project (e.g. volume of transactions, types of expenses).

Please complete a separate worksheet for each project your organization intends to add or renew. If you already have an existing project budget showing proposed income and expenses, make a note of that below, and attach it to the application in lieu of completing this worksheet.

Project/Event/Activity:

Proposed income for the coming year

1. How much money do you plan to fundraise, and from what sources (e.g. cash, check, online donations, grant)?

2. What kinds of in-kind donations do you expect to seek (e.g. donated food, venue, supplies)?

Project expenses to be spent out of the fiscal sponsorship account

<table>
<thead>
<tr>
<th>Broad Category</th>
<th>Item Description(s)</th>
<th>Estimated Cost/Dollar Amount</th>
<th>Seeking In-kind? Y/N</th>
</tr>
</thead>
<tbody>
<tr>
<td>Personnel</td>
<td>(contracting for services, stipends, etc.)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Supplies/Materials</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Outreach/Publicity</td>
<td>(flyers, signage, mailings, ads)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Event-related expenses</td>
<td>(food, renting tables/tents, cutlery)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Permitting/Fees</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Administration</td>
<td>(insurance, fiscal sponsorship fee)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total Amount