

NOTE: This document contains a summary of the questions asked in the Longwood Foundation grant application for Fall 2024 (due September 1st). Please note that the application MUST be completed electronically using the grants management system. This document is only provided for the convenience of prospective applicants to help plan their submissions. Late applications or those outside of the electronic grants management system will not be accepted. This application is subject to change and is only indicative of Fall 2024 requirements.

# Longwood Grant - Fall 2024

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*Longwood | Welfare | Crestlea*

## *Introduction*

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Thank you for your interest in applying to the Longwood Foundation. Applications for Fall 2024 are due on September 1st. Our mission is to be a catalyst to strengthen nonprofit organizations throughout the state of Delaware, in addition to the area of Kennett Square, Pennsylvania within a four-mile radius around Longwood Gardens. Before submitting an application, please visit Guidestar to either create a profile or review your current profile (updating as necessary). When preparing this proposal, please visit our website: <https://longwoodfoundation.org>. On this site you will find guidelines, what to know about the Longwood Foundation's grantmaking, FAQs, information on our grant life cycle, and the opportunity to sign up for Information Sessions and Pre-Meetings.

## *Executive Summary - Organization & Grant Request*

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### **Executive Summary - Organization & Grant Request\***

Please include an Executive Summary of no more than 10,000 characters (approximately 1.5 pages). In preparing information for the Longwood Trustees, staff prepare an Executive Summary of each request. This field will serve as the foundation for that document. In this section you should address the following information:

- Organization
  - Organization name and founding year
  - Organization mission
  - Brief (2-3 sentence) organization overview
- Grant Proposal Project or Program
  - Problem statement (what challenge or issue are you working to address?)
  - How do you plan to address this problem (your project overview)? What will grow, strengthen, or improve as a result of this grant?
  - How much are you requesting and what is the total cost/budget of your project?
  - Have you already raised funds for the project? How much and from whom?
  - How will you financially sustain the project when the Longwood grant runs out?
  - How will you measure success (outcomes)?

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## Current Request Information

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Please select the most appropriate Program Area for your PROJECT below. Note that the guidance text shown here does not encompass project types the Foundation accepts proposals for. Rather, it is intended to provide guidance for those initiatives that may be difficult to otherwise categorize.

- Arts and Culture - performing arts, cultural awareness, historical activities, humanities, fine arts, and museums
- Civic and Economic & Workforce Development - libraries, animal shelters, and community and economic development
- Education - early learning centers, preschools, K12 schools, colleges, educator professional development providers, education advocacy
- Environment - natural resources, state parks, and land and water initiatives
- Health and Hospitals - hospitals and medical centers
- Housing - housing and development
- Social Services - before/after school student support organizations, shelter and residential care, special population support, community centers, senior living facilities

### Program Area\*

#### Choices

Arts and Culture

Civic and Economic & Workforce Development

Education

Environment

Health and Hospitals

Housing

Social Services

Longwood Gardens

### Project Name\*

Name of project

*Character Limit: 40*

### Problem Statement\*

What is the challenge or problem you are trying to address through this work? If possible, please provide data, research, or information on how you know this problem exists and what the impact of the problem is.

*Character Limit: 10000*

### Request Amount (Whole dollars, no cents please. Round up if necessary,)\*

Please note the following concerning your request amount:

- **Pre-Meetings are required for requests \$500,000 and above.** Please use the link: <https://forms.monday.com/forms/0d09be5e7e582ba8a55cbbb5689dab85?r=use1> to sign up if you have not already. Requests will be handled in the order in which they are received.
- **Please note that the last day of Pre-Meetings for the Fall grant cycle is Friday, August 16th**, in order to allow prospective applicants sufficient time to incorporate any guidance provided in the meeting. **Organizations are encouraged to submit a request well in advance of this date as in past cycles all time slots have filled quickly.**
- Requests for \$500,000 and above that did not have a Pre-Meeting prior to submitting an application will not be accepted.
- Trustees generally do not fund more than half of a project/operating budget to ensure that others in the community see value in it as well. When applying for operating support, this can be thought of as taking half of your planned operating growth in the next two years (compared to your current fiscal year).

*Character Limit: 20*

### **Total Project Budget (Whole dollars, no cents please. Round up if necessary,)\***

If requesting general operating funds, this is the total operating budget over the period of the grant.

*Character Limit: 20*

### **Project Description\***

Include a narrative of your project/program. Who will be served? What impact will this have on the community? What will grow, strengthen, and/or improve as a result of this work? How?

*Character Limit: 10000*

### **Additional Project Details (if needed)**

Use this field to type in or upload additional project details.

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### **Additional Project Details (if needed)**

*File Size Limit: 10 MB*

### **Overview of the Cash Flow Projection**

The cash flow projection (sometimes referred to as a cash flow forecast) is a forward-looking tool that helps us to understand and pressure test your ambition, project plan, and pace of growth against your existing scale and sources of income. This document asks you to predict the revenues and expenses over the length of the grant (typically two years). Note that this differs from the historical cash flow statement that would be included in your financial statements. A cash flow projection serves as a functional reality check for you and for us. We ask that you make some thoughtful and informed assumptions about what will materialize over the grant period, and explicitly articulate those assumptions in the document. These assumptions are the explanation as to how you landed at the revenue and expense projections.

We do not expect you to have a crystal ball. We recognize these will not play out exactly as articulated. However, we have found that organizations who have their arms around this tool and who lean into using it are best positioned to weather the uncertainty of nonprofit fundraising as well as set realistic and ambitious goals and operational plans for growth. Given that we are looking to understand how you will sustain this new level of operations and impact after our grant, your cash flow will illustrate how our grant serves as a bridge from your existing state of operations towards your planned future state.

Cash allows you to pay your employees and vendors, and we ask for the granularity of a monthly or quarterly look because it allows us to understand the cash inflow and outflow need that play out over the course of a grant. This document is the glue between your project plan, proposed outcomes/measures of success, and historical financials – and serves as a road map for you to measure your financial progress against your plan if a grant is made.

### **Two-Year Projected Cash Flow for the Project\***

If requesting funding for a specific project or program (as opposed to general operating support), we ask that you please provide a two-year cash flow projection specific to this project/program. Please identify the assumptions you use and note either in the footnotes of the spreadsheet or in the field below. This cash flow should show a future monthly or quarterly two-year projection of the project/program financials. You may use your own format or reference the StrongNonprofits.org toolkit. Please note if using their template, it will need to be modified for two years.

When creating the cash flow, you should assume your request will be funded by Longwood and this line item should be explicitly called out in the cash flow projection. Remember to explain the assumptions used and note these. If a cash flow is not applicable to your specific project or program, please explain why in the field below.

Note -- a two-year cash flow projection for the organization will be addressed later in the application.

If this document was built in Excel, please provide the Excel version (as opposed to PDF).

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### **Projected Cash Flow Assumptions**

If you did not name assumptions made inside of the two-year cash flow document (or spreadsheet) above, please note them here.

*Character Limit: 1000*

### **Source(s) of Remaining Cost of Project/Program**

Provide list of funds promised and funds in hand.

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## Fundraising Plans\*

If Longwood request amount and funds in hand are not sufficient to complete the project (or to fund your operations), where will you obtain the remaining funds required?

*Character Limit: 5000*

## Sustainability Plans

If the request is for operating or program funding, how will you replace Longwood's funding at the end of the grant period to sustain the operations or program? We recognize that there is rarely a perfect answer to this question, but we would like to understand your plans to replace our funds when they run out.

*Character Limit: 5000*

## What are your contingency plans, should your request not be awarded?\*

Please address what your organization would do, should your request not be fulfilled.

*Character Limit: 5000*

## *Proposed Measures of Success (Outcomes)*

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### Proposed Measures of Success (Outcomes) for the Project\*

How will you measure the success of this project? Proposed outcomes should be translated into 2-4 bullet points (metrics) that describe (ideally, quantitatively) what will grow, strengthen, and/or improve because of this work. If possible, include your current performance (baseline) on the same metrics. Another way to think about these is to consider what your Board is holding the leaders of your organization accountable for in the next 18-24 months as a result of this grant.

We look to you to define what success looks like through our grant, and quantitatively how you'll know you've achieved it. We do not want you to create or propose outcomes for us that are not important for your nonprofit. These should speak to and resonate with how you think about success. For this reason, many nonprofits are strongly positioned to provide these when they can lift them directly out of their strategic plan.

Be thoughtful when you're drafting these. While we want to see and understand your ambition, we will ultimately be holding you accountable to them. One of our founder's values - and thus our values - is to be responsible and accountable. Through our grantmaking, your performance on these outcomes is one way we think about whether a grant is successful.

Note that should your organization receive a grant, the Longwood Foundation will likely ask that you not return with another request until the time frame for the outcomes of this grant has elapsed.

To that end, if you receive a grant and would like to return to Longwood with another request

in two years, you may wish to choose an outcome timeline ending no later than June 30, 2026.

Please see **What to Know About Outcomes at The Longwood Foundation** for further information: <https://longwoodfoundation.org/wp-content/uploads/2024/01/Longwood-Foundation-Outcomes-Things-to-Know.pdf>

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## Organization Information

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### Organization Type\*

#### Choices

501(c)(3) Public Charity

501(c)(3) Private Foundation

Fiscally Sponsored Organization

None of the Above

### Tax-Exempt Status\*

Please provide evidence of your tax-exempt status if your organization does not file an annual Form 990 with the IRS. *(If you do file an annual Form 990, enter "not applicable".)*

*Character Limit: 250*

### Do you have a fiscal sponsor?

To be eligible for a grant, your organization must have tax-exempt status with the IRS. If you do not, you must answer YES and input your fiscal sponsor's Tax ID and associated information.

**Answer NO if your organization has its own tax-exempt status.**

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*Definition: A fiscal sponsorship is an arrangement in which a tax-exempt organization (the "fiscal sponsor") offers its legal and tax-exempt status to another group for a project or an activity related to the mission of the nonprofit organization. If your organization will be utilizing a fiscal sponsor arrangement, we require that the fiscal sponsor be a 501(c)(3) public charity.*

#### Choices

Yes

No

### Background\*

Provide a background of your organization. Include date founded, services you provide, and demographics you serve.

*Character Limit: 4000*

### Mission Statement\*

*Character Limit: 1000*

## Organization Website

*Character Limit: 2000*

### Name of Executive Director\*

If the organization does not have an Executive Director (or leader), please include the name of the Board Chair.

*Character Limit: 100*

### In what year did the Executive Director join the organization?\*

If the organization does not have an Executive Director (or leader), please include the information on the Board Chair.

*Character Limit: 4*

### In what year did the Executive Director assume this role?\*

If the organization does not have an Executive Director (or leader), please include the information on the Board Chair.

*Character Limit: 4*

### Past Experience of Executive Director

Please share a brief summary of the Executive Director's (or leader's) career experience and highlights/accomplishments. If easier, you may upload a resume instead.

*Character Limit: 2000 | File Size Limit: 2 MB*

### Board of Directors\*

Type in or upload your current Board of Director information (List of names and their corresponding positions/titles on the board).

*Character Limit: 2000 | File Size Limit: 2 MB*

### Information Session Attendance\*

The Information Session was refreshed ahead of the Fall 2023 grant cycle to provide greater clarity on Longwood's grantmaking and evaluation process. Even if you attended an Information Session prior to Summer 2023, you may find value in participating. Please note that participation neither improves nor harms an organization's likelihood of receiving funding. If interested, please visit our website to register: <https://longwoodfoundation.org/grant-information-sessions/>

Has any representative (leader and/or Board Chair) from your organization attended a Longwood Foundation Grant Information Session? These sessions, while not mandatory, are offered every six months and overview the application/evaluation processes used by the Foundation.

### Choices

No

Yes

### Disclosure (optional, if desired and/or necessary)

Is there anything your organization would like to disclose at this time? For example, has there been any recent senior leadership changes or an unusual financial situation that we should be aware of?

*Character Limit: 5000*

### Strategic Plan\*

Does your organization have a current strategic plan?

#### Choices

Yes

No

## Strategic Plan

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In what year was your organization's strategic plan created?

*Character Limit: 4*

### Strategic Plan Upload

If you would like to share a copy of your most recent strategic plan (or plan summary), you may do so here.

*File Size Limit: 10 MB*

## Fiscal Sponsor Information

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Fiscal Sponsor Name

*Character Limit: 200*

Fiscal Sponsor Tax ID

(format xx-xxxxxxx)

*Character Limit: 250*

Mailing Address

*Character Limit: 250*

City

*Character Limit: 250*

State

*Character Limit: 250*



## Postal Code

*Character Limit: 250*

## Fiscal Sponsorship Agreement

Please upload or describe the fiscal sponsorship contract between the organization and the fiscal sponsor.

*Character Limit: 2000 | File Size Limit: 3 MB*

## Financial Information

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### Instructions for Providing Financial Information

In addition to your most recently completed independent audit report, please provide interim current year Statements of Financial Position (Balance Sheet) and Statements of Activities (Profit & Loss Statement) that also contain the same prior year period numbers for comparison purposes.

We expect that organizations whose revenue last year was above \$5 million will have audited financials. We would prefer that smaller organizations do as well. If no independent audit is available, please explain why and provide the most recent year-end Statements of Financial Position (Balance Sheet) and Statements of Activities (Profit & Loss Statements) that also contain prior year-end numbers for comparison purposes. The same statements, with comparable prior year numbers, are required for the interim period since your most recent year-end.

*During our meeting to discuss your application, we are likely to have questions about your financials. If the Executive Director is not familiar with the organization's financials, please ensure that your financial expert joins the meeting.*

### Latest Financial Audit\*

If a financial audit is not available, please provide the end-of-fiscal-year P&L Statements for the previous two years.

*File Size Limit: 10 MB*

### If no independent audit is available, please explain why.

*Character Limit: 5000*

### Statement of Financial Position (period ending December 31, 2023)\*

*File Size Limit: 1 MB*

### Statement of Activities/Profit & Loss Statements (period ending December 31, 2023)\*

*File Size Limit: 2 MB*

## Overview of the Cash Flow Projection

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## Two-Year Projected Cash Flow for the Organization

Please provide a two-year projected (forward-looking) cash flow for the organization (presented either quarterly or monthly). We recognize there is a great deal of uncertainty, so we know it won't be perfect. Please keep track of the assumptions you use and note either in the footnotes of the spreadsheet or in the field below. You may use your own format or reference the <https://www.wallacefoundation.org/knowledge-center/resources-for-financial-management/pages/default.aspx> StrongNonprofits.org toolkit. Please note if using their template, it will need to be modified for two years.

If your prior year revenues were above \$20 million, you do not need to complete a two-year cash flow for the organization.

If this document was built in Excel, please provide the Excel version (as opposed to PDF).

*File Size Limit: 2 MB*

## Projected Cash Flow Assumptions

If you did not name assumptions made inside of the two-year cash flow above, please note them here.

*Character Limit: 5000*

### **Organization's Annual Budget\***

*Character Limit: 20*

### **Fiscal Year\***

Provide FY start and end months, e.g. Jan to Dec or July to June.

*Character Limit: 25*

### **Most Recent Tax Year Total Revenue\***

*Character Limit: 20*

### **Most Recent Tax Year Total Expenses\***

*Character Limit: 20*

### **Most Recent Tax Year Liabilities\***

*Character Limit: 20*

### **Most Recent Tax Year Total Assets\***

*Character Limit: 20*

### **Net Assets End of Year**

*Character Limit: 20*

## *Applicant Meeting Location Preference*

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As part of our application process, we schedule site visits with all applicants to discuss their proposals. Our preference is to have an in-person meeting at your site, or in-person at our offices should you not have a site. However, if you prefer to connect remotely instead, we also offer Zoom meetings.

Should you choose an in-person visit, you will be prompted to provide the location name and address. Again, our preference is to come to you. However, if you do not have a site available, we will meet you at our offices in Wilmington instead.

### **Organization Name\***

*Character Limit: 75*

### **Your First and Last Name\***

*Character Limit: 75*

### **Your Email Address\***

*Character Limit: 254*

### Best Telephone Number to Reach You\*

*A cell phone number is preferred. This number will be used only for scheduling purposes and will not be shared outside of the Foundation.*

*Character Limit: 12*

### How would you prefer to meet to discuss your organization's grant application?\*

Please select from the options below. Note, if you select "In Person - At my organization's site or office," you will be prompted to provide a location name and address on the next screen.

#### Choices

In Person - At my organization's site or office

In Person -At the Longwood Foundation office (Wilmington, DE)

Remotely via Zoom

### *In Person - At your organization's site or office*

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#### Name of your site or office\*

*Character Limit: 250*

#### Street address for your preferred location\*

Provide the street address for your organization's site or office

*Character Limit: 75*

#### City and State for your preferred location\*

Provide the city and state where your site or office is located

*Character Limit: 75*

#### Zip Code for your site or office\*

Provide the zip code for your site or office

*Character Limit: 5*

### Special Instructions

If there are any special instructions that would be helpful for our team to know about your organization's site or office, please provide them. This may include details such as where to park upon arrival, which entrance to use, etc. This information will be shared with our team member visiting your site. If there are no special instructions, please skip this question.

*Character Limit: 250*