

2025-26 Community Grants

Community Foundation of South Puget Sound

Before you begin: Instructions and Notes

Instructions

Please be prepared to submit the following required information to support your application:

- A current list of Board Members - a minimum of three (3) board members is required.
- Budget Documentation (you will need to provide a copy of one of the following):
 - Actual Budget
 - Year-End Budget
 - IRS Form 990
 - Profit & Loss Statement
- If you are applying under a fiscal sponsor, you will be asked to share the contact information of your fiscal sponsor and upload your sponsorship agreement.
 - This is the only information that you will need to provide about your fiscal sponsor. Please answer all questions in the application as it pertains to your organization (not for your fiscal sponsor).

Notes for using the online grants platform:

- Character limits include spaces and punctuation.
- To work on your application in a language other than English, please use the "Select Language" drop down button in the top left corner to activate Google Translate (it takes a few minutes to reload page).
- While there is an autosave feature, double check for a "Save" button at the bottom of the page before closing your browser.
- The size of text boxes may be adjusted by dragging the lower right corner.
- Required fields are indicated with an asterisk *.
- To create a PDF version of your completed application that you can save and/or print, click the "Application Packet" button at the top of the page.
- Click on the "Questions List" button in the upper right hand corner to view the application instructions and questions in PDF form.
- Double check formatting and character count after copying/pasting from Word, as there are software differences that can cause an error in how your application appears on the grants platform.

If you have any questions, accessibility issues, or need help with language translation, please contact Tami Mason Lathrop (tami@thecommunityfoundation.com or 564-999-4835) for assistance.

Organization Profile

Organization Name*

What is the name of your organization?

(If applicable, do NOT put the name of your fiscal sponsor here.)

Character Limit: 100

Mission Statement*

What is your organization's mission statement?

Character Limit: 1000

Organizational Focus Area*

Choose the selection that most closely represents your organization's mission.

Choices

Arts and culture

Community and civic engagement

Economic opportunity

Education and youth
Environment and animal welfare
Health and wellness
Housing and human services

Secondary Organizational Focus Area(s)

Choose any additional focus areas that align with your organization.

Choices

Arts and culture
Community and civic engagement
Economic opportunity
Education and youth
Environment and animal welfare
Health and wellness
Housing and human services

Primary Service Area*

The Community Foundation supports activities that benefit the residents of Lewis, Mason, and/or Thurston Counties. Indicate the primary county your organization serves.

Choices

Lewis
Mason
Thurston

Secondary Service Area(s)*

Indicate any additional counties your organization serves. Select N/A if the proposal will only serve the primary county selected above.

Choices

Lewis
Mason
Thurston
Other
N/A

Other

If you selected "other" please describe additional areas of service.

Character Limit: 250

Population(s) Served*

Does your organization have a special emphasis or focus on a specific population?

Please select up to five primary populations that your organization serves.

The purpose of this question is to help us better understand who our nonprofit partners serve, in part to identify patterns, needs, and gaps in our grantmaking. If your primary focus includes more than one population, you may select more than one category. It is fine to choose "General population" if you serve all or nearly all populations and do not have a special emphasis or focus on any specific population(s).

Choices

Black, Indigenous, and/or other People of Color (BIPOC)
Children/Youth (0 - 18)
Formerly or actively incarcerated people
General population
Low-income
People experiencing homelessness or houselessness
People living with disabilities
People struggling with substance abuse or dependency
People who identify as LGBTQ+
Refugees, immigrants, migrant workers, and/or undocumented persons
Rural residents
Seniors
Survivors of domestic and/or sexual violence and/or child abuse
Veterans
Other

Additional Populations Served (Optional)

We realize the above population list is not comprehensive. If you selected "Other" in response to the question above, please share more details or list additional populations your organization **primarily** focuses on that were not included above.

Character Limit: 1000

Current Board Members*

Please upload or type in the list of your organization's current board members and their affiliations.

Note: Your organization must have at least three board members to be eligible for a Community Grant.

Character Limit: 1500 / File Size Limit: 1 MB

Staff & Board Representation*

Tell us how your staff and Board reflect the communities that you serve. In what ways do their lived experiences, backgrounds, or perspectives help your organization stay connected and responsive?

Character Limit: 3000

Nondiscrimination Policy*

Does your organization have a nondiscrimination policy that aligns with the Community Foundation's nondiscrimination requirement?

Community Foundation Nondiscrimination Policy

The Community Foundation of South Puget Sound does not discriminate on the basis of race, ethnicity, religion, gender, gender identity or expression, sexual orientation, disabilities, age, status as a veteran, national origin, or any other protected classes. Applicants for the Community Grants program must hold similar standards in the provision of services.

Choices

Yes

No

Grant Narrative Questions

Organization Overview*

Please explain your organization's work and impact in community as if it was to someone who has never heard of you before. Think of this as an elevator pitch.

The purpose of this question is to give our grant reviewers a basic understanding of what your organization does, especially those who are not familiar with your work.

Character Limit: 2000

Organizational Impact*

Impact: please share how your organization contributes to positive community impacts and how you measure that impact to ensure the outcomes you hope to achieve.

This can include, yet is not limited to: annual or seasonal activities/events/programs, one or multi-day events, outreach, celebrations or festivals, skill development or training events for the community, community gathering activities or events, community meetings, service projects, staff support and more.

Character Limit: 2000

Current Challenges, Opportunities, & Learning*

1. What are you seeing in your work right now—any recent trends, emerging challenges, or shifts in community needs?
2. What opportunities, learnings, or sources of hope are shaping your work as you look ahead?

Character Limit: 3000

Collaboration & Partnerships*

Please **list and describe two examples** of partnerships with other organizations in supporting the community(ies) you serve. This can include and is not limited to: nonprofits, government, schools, businesses, and more.

NOTE: If your organization has not yet been able to collaborate or partner with another entity, please share what types of organizations, programs, or specific examples of community partners you would like to work with? And please share why your organization would like to partner with these entities.

Character Limit: 2000

Equity & Access to Opportunity*

Your organization may serve the general public, specific populations, or both. Please answer both questions below to share how your work supports the communities that you serve.

1. Who do you primarily serve, and how does your work support communities or groups that face barriers to resources and opportunities?
2. How do you ensure your programs are designed to meet the needs of those most affected by systemic inequities?

Character Limit: 3000

Financial Information

Annual Operating Budget

Please enter the total dollar amount of your organization's 2025 annual operating budget.

Character Limit: 50

Budget*

Please select one of the following and upload that document in the next section.

Choices

Year-end Budget
Actual Budget
IRS Form 990
Profit & Loss Statement

Budget Selection: upload here*

Based on your selection above, please upload the document for your budget here.

File Size Limit: 5 MB

Local Operating Budget (For national or statewide organizations only)

****If your organization is located in Lewis, Mason, and/or Thurston Counties, please leave blank.***

Please enter the total dollar amount from your 2025 annual operating budget that will go towards supporting work in Lewis, Mason, and/or Thurston Counties. Approximate numbers are fine.

Character Limit: 50

Budget Narrative - Optional

Use this space to share additional information or explanation of your budget.

Character Limit: 1250

Fiscal Sponsorship*

The Community Foundation of South Puget Sound generally makes grants to 501(c)(3) public charities. If your organization or group is not a 501(c)(3), you must secure a fiscal sponsor to apply. Your fiscal sponsor must be a 501(c)(3) organization, have a minimum of 3 board members, and meet other eligibility requirements. Please choose the option below that best describes your organization.

If you are unsure how to answer this question, please contact Community Foundation staff for clarity.

Choices

501(c)(3)

Fiscally sponsored by a 501(c)(3)

Other

Not sure

Fiscal Sponsorship

Fiscal Sponsor Agreement*

Please upload a letter from the Director of the fiscal agency that confirms your relationship.

Character Limit: 500 / File Size Limit: 2 MB

Fiscal Sponsor Contact*

Please provide the following information for the primary contact at your fiscal agency:

1. Name
2. Position
3. Email
4. Phone

Character Limit: 750