



SHREVEPORT BAR FOUNDATION
625 Texas Street
Shreveport, LA 71101

POLICIES AND GUIDELINES FOR SBF CONTRIBUTIONS OVER \$1,000.00

- A. The Shreveport Bar Foundation, the charitable arm of the Shreveport Bar Association, considers requests for contributions over \$1,000.00 on the basis of the following policies:
1. The purposes of contributions made by SBF shall be for the benefit of persons, activities and institutions of Caddo and Bossier Parishes, Louisiana and primary consideration will be given to requests that are law-related.
 2. Unless otherwise approved by the Board of Directors for the SBF, contributions are made only to nonprofit organizations exempt from federal taxation under Section 501(c)(3) of the Internal Revenue Code,
 3. Contributions are awarded for a definite project covering a specific period of time. Contributions are ordinarily made for one year only.
 4. The Shreveport Bar Foundation operates without discrimination as to age, race, religion, sex, national origin or sexual orientation or preference, in the consideration of contribution requests, and will award grants only to agencies and organizations which do not discriminate as to age, race, religion, sex, national origin, or sexual orientation or preference.
- B. Requests for the following contributions will not be funded unless approved by the SBF Board of Directors. Substantial cause must be shown to justify approval as an exception to these general prohibitions:
1. SBF contributions are not made for political or religious purposes. (This does not preclude consideration of requests by church-affiliated or church-supported organizations for education, health or human service projects operated on a non-sectarian basis for an inclusive population).
 2. SBF contributions are not made to retire indebtedness or for the payment of interest or taxes.
 3. SBF contributions are not made to establish or add to endowment funds.
 4. SBF contributions are not usually made to support general operating expenses or annual sustaining fund drives. On occasion, the SBF may provide such support on a short-term basis when it is critical to the survival of a key agency or program which has been placed in jeopardy by changes in funding patterns or for other exceptional reasons.
 5. SBF contributions are not made to capital campaigns to which the SBF can contribute no more than a small fraction of the total need.
 6. SBF contributions customarily are not awarded to continuing projects where the SBF's contribution will not be replaced in later years by alternative funds.

APPLICATION PROCEDURE

A. General Instructions:

Please type and single-space all proposals.

Please answer all of the applicable items in the order listed.

Please use the headings, subheadings and numbers provided.

Please submit the number of copies requested.

Please do not include any materials other than those specifically requested at this time.

Please do not send videotapes.

Please do not bind your application.

B. Application Procedure:

Please include three copies of the materials listed in items 1-6 in the order listed and one copy of the materials listed in items 7 and 8.

1. Application Cover Sheet provided by SBF (See Attachment 1)
2. A letter written on the agency's letterhead and signed by the chief executive officer of the governing body (chairperson or president) describing the objective of the proposal.
3. Project Description. (See Section D below). Requests for funding of less than \$5,000 should include only those items in D. 1-2, may be less detailed, and should be limited to 3 pages or less.
4. A list of the members of applicant's governing body, if any, (briefly list pertinent information concerning the officers or executive committee of the organization), indicate any paid staff members serving on the board.
5. A one-page budget summary showing the current fiscal year as compared to the preceding year.
6. The SBF Project Budget form for which funding is requested. (See Attachment 2).
7. A copy of the organization's 501(c)(3) tax exemption letter from the IRS, if applicable.
8. A complete financial statement for the most recent fiscal year, if available. For requests for funding of \$5,000 or more, the statement should include the following:
 - a. a firm percentage of administrative costs per year for the prior three years;
 - b. the percentage of administrative costs budgeted for this project; and
 - c. a list of the organization's funding sources.
 - d. certification of financials and, if agency is required to perform an annual audit, a copy of the last year's audit.

C. Consideration of Requests:

Requests shall be considered tri-annually and should be submitted to the office of the SBF by 5:00 p.m. on the date due. If due date falls on a Saturday or Sunday, applications are due by 5:00 p.m. the following Monday.

Due Date: March 31 **Considered in:** Last week of May

Due Date: August 15 **Considered in:** Last week of August

Due Date: December 31 **Considered in:** Last week of February

A contact person will be designated annually. Contact the Shreveport Bar Association at (318) 222-3643 for that person's name and contact information.

D. Project Description:

1. Background – Describe the work for your agency, addressing each of the following topics:
 - a. A brief description of its history and mission.
 - b. The issue(s) that your organization works to address.
 - c. Current programs and accomplishments. Please emphasize the achievements of the past year.
 - d. The population that your agency reaches, including geographic location, socio-economic status, race, ethnicity, gender, age and physical or mental abilities.
 - e. Overview of organizational structure including board, staff and volunteer involvement.
 - f. Your organization's relationships – both formal and informal – with other organizations working to meet the same needs or providing similar services. **Please briefly explain the differences and similarities to these other agencies.**
 - g. Any other information deemed necessary.
2. Funding Request – Please describe the program for which you seek funding:
 - a. If applying for general operating support, briefly describe how this grant would be used.
 - b. If your request is for a specific project/program, please describe in detail:
 - * A statement of its primary purpose and the issue that you are seeking to address.
 - * The population that you plan to reach, how they will be involved and how they will benefit from the project/program.
 - * Strategies that you will use to implement your project/program.
 - * The names and qualifications of the individuals who will direct the project/program, if known.
 - * Anticipated length of the project/program and timeline.
 - * How the project/program contributes to your organization's overall mission.
 - * How it will benefit our community.
 - * Number of people who will be served and cost per person served.
 - * Any collaboration/interaction with other groups.
3. Evaluation – Unless the request for funding is for less than \$5,000, please explain how you will measure the effectiveness of your activities:
 - a. Describe your criteria for a successful program.
 - b. List the results you expect to have achieved by the end of the funding period.
 - c. Tell your plan for future funding.
 - d. What other groups or agencies could you network with in this project? Who is the contact person for that agency?
 - e. Explain how evaluation results will be used and/or disseminated and, if applicable, how the project/program can be replicated.

ATTACHMENT ONE

SHREVEPORT BAR FOUNDATION
625 Texas Street
Shreveport, Louisiana 71101

Application Cover Sheet

Date of Application

Date Funding Needed

Amount of Grant

Legal Name of Organization Applying

Telephone Number

Fax Number

Address of Organization

Please list the most recent previous grants received from the Foundation.

Date

Date

Amount

Amount

Purpose

Purpose

Letter from IRS stating (501)(c)(3) tax status: yes _____ no _____

Signature, Chairperson, Board of Directors

Signature, Executive Director

Typed name and title

Typed name and title

Signature, Fiscal Agent

Signature, Project Director

Typed name and title

Typed name and title

Abstract of Proposed Project:

ATTACHMENT TWO
SHREVEPORT BAR FOUNDATION
PROJECT BUDGET

PROJECT INCOME (itemize)	AMOUNT
TOTAL PROJECT INCOME	

PROJECT EXPENSES (itemize)	PROJECT EXPENSES TO BE COVERED BY SBF REQUEST	TOTAL PROJECT EXPENSES
TOTAL PROJECT EXPENSES		

Period of time in which fund will be spent from _____ to _____
 Percentage of project budget requested from SBF: _____
 Number of people to be served: _____ Cost per person: _____