**Town of Southbury Nonprofit Assistance Program**

The Southbury Nonprofit Assistance Program was established to provide direct financial assistance to eligible Southbury nonprofit organizations. The program is funded through the American Rescue Plan Act funds and administered by the Town of Southbury. The program is intended to provide assistance to nonprofits for eligible projects and services that benefit the community. Grants will be awarded in order of applications received and approved until the funding is completely depleted.

**Who is eligible to apply?**

To be eligible for assistance under this program, applicant must be a Southbury based nonprofit that is physically located and registered within the Town of Southbury.

The nonprofit must have been in operation as of 2020.

Applicant must be in good standing and current on its federal, state and local tax obligations and have no outstanding liens or judgements.

The nonprofit must have a clear and specific use for the grant money, and the grant money can only be used towards future expenditures. The organization must demonstrate community need for the funding, long-term viability of the use and how this funding will enable the nonprofit to enhance its operations and services.

Applicant must self-certify the eligibility requirements on the application.

**How much can I apply for?**

Eligible nonprofits may apply for grants of up to $20,000. Funding is limited and it is anticipated that requests for assistance will be greater than funding on hand. Not all nonprofits approved for participation will receive the maximum amount. The amount will be based upon the documented need for the funding and available resources.

**What is the approval process?**

All applicants will be reviewed by the Town of Southbury’s Nonprofit Subcommittee. Their recommendations will be forwarded to the Board of Selectmen for final approval. Program staff will make every effort to ensure timely review of all applications received.

Upon approval, a formal agreement between the assisted nonprofit and the Town will be executed.

**Submissions:**

Applications may be emailed to Claire Morris, Finance & Human Resources Administrator at [cmorris@southbury-ct.gov](mailto:cmorris@southbury-ct.gov) or delivered to the Fiscal Office at 501 Main Street South Southbury, CT 06488. Please include a copy of your business license and your 2020 and 2021 tax returns. If tax returns are not available, please include 2 years of bank statements (2021 & 2022). Applications will be accepted from February 15, 2023, until the funds are depleted.

**SOUTHBURY NONPROFIT ASSISTANCE PROGRAM APPLICATION *Section 1: Applicant Information***

Name of Nonprofit

Contact

Street Address

City State Zip

Phone Website URL

Email Address

Federal Employer Identification Number (EIN)

Month and year business incorporated/registered

Years in Southbury Years at Current Location

2020 Gross Revenue 2021 Gross Revenue

Briefly describe your nonprofit, organizational structure and overall mission.

*Section 2: Underwriting*

Is your nonprofit current on all tax obligations to the Internal Revenue Service, the State of Connecticut and the Town of Southbury? Yes No

If no, please explain:

Does your nonprofit have any outstanding liens or judgements? Yes No

If yes, please explain:

Is your nonprofit compliant with the Connecticut Department of Labor Office of Unemployment Assistance and all applicable state and federal employment laws and regulations, including but not limited to minimum wage, unemployment insurance, workers' compensation and child labor?

Yes No

If no, please explain.

Amount of funds requested: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Up to $20,000)

*Please provide documentation supporting the funds you are requesting i.e. estimates or quotes.*

How will you use the funds? Please define the scope of the proposed use.

Please providedocumentation supporting the funds you are requesting i.e. budget and estimates or quotes.

Please demonstrate the Southbury community need for the proposed use of the funds.

Approximately how many people will the proposed use of funds benefit?

What impact will this grant have on your nonprofit?

What is the timeline for expending the funding?

Please describe any community support for the proposed use.

***Section 3: Applicant Certification***

Ihereby certify that the information herein is complete, true and accurate to the best of my knowledge. I further authorize the Town of Southbury to make inquiries as necessary to verify the information contained in this application.

The undersigned agrees that any funds provided to this application will be utilized exclusively for the purpose(s) set forth in this application and subject to Town audit. Within two (2) years after approval, the undersigned will issue a final report outlining utilization of the funds. If the funds are not utilized exclusively for the purpose(s) set forth in this application or not used in total, the undersigned will return the funds to the Town of Southbury.

I understand that false or misleading statements may result in forfeiture of benefits and criminal prosecution under the laws of this state.

Authorized Applicant Signature: Printed Name:

Date: