



WCA Foundation 2024 Project Investment Grant Program ***Funding Eligibility & Exclusions and Application Preview Worksheet***

Funding Eligibility & Exclusions

Overview

The WCA Foundation, a Signature Fund of the Minneapolis Foundation, is pleased to announce its **2024 Project Investment** grant round.

[The WCA Foundation](#) is a volunteer-led grantmaking organization whose mission is “Women changing the lives of women.” Its members, all local women, are committed to learning about and responding to the most urgent needs of women in communities across the Minneapolis-St. Paul metro area. They contribute their time, talent, and care to advance the foundation’s mission and engage in participatory grantmaking during two grant rounds a year.

Learn more about the WCA Foundation’s vision and Strategic Framework [here](#).

What We Will Fund

The WCA Foundation supports women-focused organizations, initiatives, and projects that provide direct services to address basic needs in education, economic stability, shelter, safety, and health.

This funding opportunity marks the first open grant round following the WCA Foundation’s [recent announcement](#) of its new approach to grantmaking. The WCA Foundation will announce the grantees for the pilot of its new multi-year general operating grant program in early spring 2024.

In this grant round, the WCA Foundation will fund **project-specific requests**. It will award roughly \$675,000 to 25 to 30 organizations, with grant amounts ranging from \$10,000 to \$30,000.

The WCA Foundation has supported a diverse range of organizations in recent years. More information about previous grant rounds and grant partners is available here: [Fall 2022](#), [Spring 2022](#), and [Fall 2021](#).

Eligibility:

- Grants are limited to nonprofit organizations that have a 501(c)(3) tax determination in their own name. Grant applicants must maintain direct responsibility for the work for which they are requesting funds.
- The project must provide direct services to women ages 18 or older. Project support is defined as support for a specific project that lives within an organization providing broader services.
- The organization and project must have a physical location in the Twin Cities seven-county metro area (Anoka, Carver, Dakota, Hennepin, Ramsey, Scott and Washington counties) and serve clients primarily from that area.

- Funding must be used to support organizations that provide services that meet the fundamental needs of clients, with priority given to education, economic stability, shelter, safety, and health.
- Organizations may only submit one request per funding cycle.
- Organizations that received funding in WCA Foundation’s Spring 2023 and Fall 2022 grant rounds are eligible to apply for funding.
- Additionally, WCA Foundation does NOT make grants:
 - to individuals
 - to private foundations
 - to fiscal agents or fiscal sponsors
 - to political organizations
 - for lobbying purposes
 - to religious organizations for religious purposes, for projects having religious overtones, or for projects wherein religion is a component of the project
 - for medical research projects or to national health organizations; projects which benefit a population afflicted with a medical ailment may be considered
 - for deficits already incurred
 - to cover the cost of litigation
 - to organizations requesting funds for either pro-life or pro-choice projects
 - to organizations or projects which require their employees to raise some or all of their own salaries through their individual fundraising efforts

Application Process

All applications must be submitted online. If you are applying for a grant from WCA Foundation for the first time, you will need to set up an account in the Minneapolis Foundation’s online portal, GranteeView.

We will begin accepting applications on December 6, 2023. All applications must be submitted by 4 p.m. on January 11, 2024. We do not accept late applications or submissions via email.

All applicants will be notified by June 10, 2024.

Questions?

As you consider applying for this funding opportunity, Julia Ruther, Program Coordinator of Impact and Collective Giving, is available to answer questions about the content of your proposal. Please contact her at jruther@mplsfoundation.org or (612) 672-3835.

If you have technical questions, please contact Takara Henegar, Grants Coordinator, at thenegar@mplsfoundation.org.

Application Preview Worksheet

Below is a preview of the application for planning purposes. All applications must be submitted online. Please email Julia Ruther (jruther@mplsfoundation.org) with questions.

This application has two required parts: An application narrative and additional attachments. **Please submit required attachments as PDF files only.**

Section 1: Organization information

Section 2: Contact information

Section 3: Organization senior leadership composition

Section 4: Population served and geographic location of the work

Section 5: Proposal information

Section 6: Evaluation information

Section 7: List of attachments

Section 8: Confirmation and signature

Any answers you provide will be saved as you navigate the application. However, you MUST click "Save & Go Next" or "Save and Return to Details" to save a page as complete. When the application, organization budget, and additional documents are validated and uploaded (see table below), you will be able to sign and submit your application.

Please click on any of the sections to begin or resume your application. You will receive a confirmation email after you have confirmed the information, signed, and submitted your application.

Section 1: Organization information

Legal name of organization:

Is your organization known by other names? If so, please let us know. *(Maximum of 100 characters.)*

Employer Identification Number:

Organization address:

Organization website:

Head of organization name:

Head of organization title:

Head of organization email:

Head of organization phone:

Is the above accurate? Yes/No. *If any information is missing, please select "no" and provide the update.*

Is your organization a 501(c)3? Yes/No. *Only 501(c)3 organizations are eligible to apply, please refer to the grant guidelines for additional information. If you have questions, reach out to Julia Ruther by email at jruther@mplsfoundation.org.*

Provide the mission or vision statement(s) of your organization: *(Maximum of 400 characters.)*

Please describe your organization's primary goals, major programs and/or services: *(Maximum of 1,000 characters.)*

Please enter your organization's current annual budget.

Section 2: Contact information

Name of contact person for this application:

Contact Person Title:

Contact Person Email:

Contact Person Phone:

Contact Person Cell Phone: *An answer to this question is required.*

Contact Pronouns:

Is the contact information current? Yes/No. *If any information is missing, please select "no" and provide the update.*

Section 3: Organization senior leadership composition

This set of questions asks about the demographics of your organization's senior leadership. Senior leaders are defined by your organization and its structure. Please only count full-time staff members who have self-reported this data.

Total number of senior leaders in the organization:

Senior leaders by race/ethnicity.	TOTAL	ACTIONS
African		Edit
American Indian or Native American		Edit
Asian		Edit
Black or African American		Edit
Hispanic or Latinx		Edit
Native Hawaiian or Pacific Islander		Edit
White/Caucasian/European		Edit
More than one race/ethnicity		Edit
Identify in another way		Edit
Prefer not to answer		Edit
Information not available		Edit

Senior leaders by gender	TOTAL	ACTIONS
Woman		Edit
Man		Edit
Identify in another way		Edit
Prefer not to answer		Edit
Information not available		Edit

Senior leaders by age	TOTAL	ACTIONS
40 and younger		Edit
41 and older		Edit
Prefer not to answer		Edit

Information not available		Edit
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Section 4: Population served and geographic location of the work

This set of questions asks about the demographics of the population served. Who will be served by the grant and where will the work take place?

Which primary race or ethnic populations were served by this grant?

Please share only self-reported information and select all that apply.

- African
- American Indian/Native American
- Asian
- Black/African-American
- Hispanic/Latinx
- Native Hawaiian or Pacific Islander
- White, Caucasian/European
- More than one race/ethnicity
- Prefer not to answer
- Information not available

What age groups were served by this grant? Please only share self-reported information and select all that apply.

- Younger than 18
- 18-24 years
- 25-34 years
- 35-44 years
- 45-54 years
- 55-64 years
- 65 years and older
- Multi-generational approach
- Information not available

Will the work primarily take place in the Twin Cities seven-county metropolitan area (Anoka, Carver, Dakota, Hennepin, Ramsey, Scott and Washington) and serve clients primarily from that area? Please provide specific locations below.

Section 5: Proposal information

Project Name: *Feel free to update this if needed. (Maximum of 70 characters.)*

Amount requested:

What focus area best fits your proposal?

- Health
- Safety
- Shelter
- Education
- Economic Stability
- Other

Please provide a brief description of your proposal. *(Maximum of 2,000 characters.)*

Describe the opportunity, challenges, issues or needs you have identified as the focus for this funding request. *(Maximum of 3,000 characters.)*

Describe your implementation plan, including milestones and timeline, to meet the opportunity, challenges, issues or needs you described above. *(Maximum of 2,000 characters.)*

Have you previously received funding from the WCA Foundation? Yes/No/Uncertain. *There is no penalty if this information is uncertain or unknown.*

Section 6: Evaluation Information

How will the proposed activities be measured for success? Include quantitative and qualitative measures. *(Maximum of 1,500 characters.)*

How will you know if you are successful in meeting your project goal(s)? *(Maximum of 1,400 characters.)*

What internal and/or external risks exist that could impact the success of this project? *(Maximum of 2,000 characters.)*

Section 7: List of attachments

Upload all required attachments, which are listed in this table:

Requirements Table						
NAME	CURRENT STATUS	MANDATORY?	DESCRIPTION	DATE COMPLETED	ACTIONS	UPLOAD
List of Key Staff	Not Yet Uploaded	Yes	Please include positions and titles. (PDF only)		Details	Upload
List of Board of Directors	Not Yet Uploaded	Yes	Please include positions and titles. (PDF only)		Details	Upload
Organization Budget	Not Yet Uploaded	Yes	Please provide a organization budget that outlines income and expense. (PDF only)		Details	Upload
Project Budget	Not Yet Uploaded	Yes	Please provide a project budget that outlines income and expenses for your proposal. (PDF only)		Details	Upload
List of Other Funders	Not Yet Uploaded	Yes	List other funders identified for this project, include whether confirmed or pending. (PDF only)		Details	Upload
Statement of Financial Position- balance sheet	Not Yet Uploaded	Yes	Statement of financial position (balance sheet) that shows year-to-date actual assets and liabilities. If referencing audit, please upload your balance sheet only. (PDF only)		Details	Upload
990s	Not Yet Uploaded	Yes	Copy of your most recent 990s. (PDF only)		Details	Upload

Section 8: Confirmation and signature

By checking this box, the applicant confirms that the organization’s senior most leadership has approved submission of this application and certifies that all of the information is true and accurate. In addition, this person agrees to the terms of the grant, including submitting a final evaluation, if approved.

Name:

Title: