



## GRANT APPLICATION DETAILS

The Solomon Jackson, Jr., Foundation Corporation was established on October 30, 2009 under the laws of the State of South Carolina. The foundation is organized exclusively for charitable, religious and education purposes.

### **Grant Focus**

- Applicant Organizations must be 501 (c)(3) public charities.
- Applicant Organizations must be located in and serve the people of the state of South Carolina.
- Preference is given to organizations that focus on after-school programs with a focus on personal development and educational enhancement.
- In general, proposals for capital campaigns and endowments will not be considered.
- Applicants will be awarded funds for no more than three consecutive years. A grant to the same organization (for the same program) will not be considered until one year has elapsed following close of the last grant.
- Grants normally range from \$5,000 to \$25,000 in size.

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### **Application Deadline**

Grants are made twice each year and the deadlines for submitting applications are:

- Organizations on a fiscal year: **January 1 – April 15**
- Organizations on a calendar year: **June 1 – September 15**

Applications will only be accepted by email or through the mail and must be postmarked by the deadline dates. If the deadlines fall on a weekend or a holiday please postmark on the Friday before the deadline dates. ***Please do not hand deliver or fax the application. Deadlines are strictly enforced.***

### **Application Submission & Selection**

Submit one (1) completed application, including supporting documentation to the address or email address on the right. ***Please ensure all documents are single-sided and do not include any staples.***

Notification of the grant decision will be made in writing within 12 - 14 weeks after the application deadline dates.

The Solomon Jackson, Jr. Foundation  
SouthState Private Wealth  
P.O. Box 1030  
Columbia, SC 29202

For questions, contact  
SJJFoundation@SouthStateWealth.com

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***Application Documents***

Requests for Grants must contain the following information in the following order. Please be sure to complete, number and label each section.

- 1. **Grant Application Coversheet**  
*[See attached form]*
- 2. **Background**  
*[Not to exceed two paragraphs]*  
Provide a brief description of the background, purpose and services of your organization.
- 3. **Organizational Budget**  
Include a budget for the entire organization for your current fiscal year.
- 4. **Grant Request**  
*[One to two pages]*  
Please include a comprehensive description of the services for which you are seeking to support. Be sure to include information that highlights the urgent need of your organization, project or program in the community and justifies the amount requested.
- 5. **Project / Program Budget**  
*[Not applicable for general operating requests]*  
If the requested funds are to be used for anything other than the general operating expenses of the organization, include a detailed line-item budget for the specific project or program, which justifies that amount requested.
- 6. **Other sources of funding**
  - *For project / program requests* —  
Provide a list of funds that have been secured to date and the sources of those funds. Please also include a list of pending requests.
  - *For Operating support requests* —  
Provide a list of foundation and/or corporate grants received by the organization over the past two years. Please also include a list of pending requests.
- 7. **Evaluation**  
*[Not to exceed one page]*  
Include a detailed description of how you currently evaluate your organization / project or how you plan to evaluate if seed funding is requested. Please include the evaluation results, if available.
- 8. **Board Members**  
Provide a list of the members of your current Board of Trustees.
- 9. **Tax Status**  
Provide evidence of the tax status of your organization, i.e. a copy of the organization's Federal (IRS) Tax-Exempt Ruling Letter, verifying that the organization is a qualified charity under Section 501 (c)(3) of the IRS, and not a private foundation.
- 10. **Audited Financial Statement**  
A copy of the organizations audited financial statement for the most recent fiscal year available.



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**Grant Application Coversheet**

This coversheet is intended as a summary only. We ask that you restrict your answers to the space provided, and that you make any additional comments in the proposal you submit with this coversheet. *Please note, this coversheet must be submitted with all requests.*

Organization Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Extension \_\_\_\_\_ Fax \_\_\_\_\_

Website Address \_\_\_\_\_

Contact Person Name (Mr., Ms., Dr.) \_\_\_\_\_

Title \_\_\_\_\_ Email \_\_\_\_\_

Legal Name of Organization \_\_\_\_\_

Tax ID Number \_\_\_\_\_ Federal Tax Status \_\_\_\_\_

Date of IRS Determination Ruling: \_\_\_\_\_ Does your organization engage in lobbying activities?  Yes  No

Organization Mission \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_


**THE SOLOMON JACKSON, JR.**  
**F O U N D A T I O N**

GRANT APPLICATION

**Organizational Budget Information**

**Current Fiscal Year (FY) Projections**

FY \_\_\_\_\_ Ending (day/month) \_\_\_\_\_

Revenue \$ \_\_\_\_\_ Expenses \$ \_\_\_\_\_

**Most Recent Fiscal Year (FY) Completed**

FY \_\_\_\_\_ Ending (day/month) \_\_\_\_\_

Revenue \$ \_\_\_\_\_ Expenses \$ \_\_\_\_\_

Sources of revenue from the most recent completed fiscal year. Please list in % of total operating revenue:

Federal \_\_\_\_\_ % Corporations \_\_\_\_\_ %

State \_\_\_\_\_ % Individuals \_\_\_\_\_ %

City \_\_\_\_\_ % Endowment \_\_\_\_\_ %

Fees \_\_\_\_\_ % United Way \_\_\_\_\_ %

Foundations \_\_\_\_\_ % Other (Explain) \_\_\_\_\_ %

\_\_\_\_\_

**Project Budget Information (If Applicable)**

**Project Name:**

\_\_\_\_\_

**Current Fiscal Year (FY) Projections**

Revenue \$ \_\_\_\_\_ Expenses \$ \_\_\_\_\_

**Most Recent Fiscal Year (FY) Completed**

Revenue \$ \_\_\_\_\_ Expenses \$ \_\_\_\_\_

Sources of revenue from the most recent completed fiscal year. Please list in % of total operating revenue:

Federal \_\_\_\_\_ % Corporations \_\_\_\_\_ %

State \_\_\_\_\_ % Individuals \_\_\_\_\_ %

City \_\_\_\_\_ % Endowment \_\_\_\_\_ %

Fees \_\_\_\_\_ % United Way \_\_\_\_\_ %

Foundations \_\_\_\_\_ % Other (Explain) \_\_\_\_\_ %

\_\_\_\_\_

**Additional Information**

Please check the services provided by your organization

Education

Health Care

Human Services

Arts & Culture

Other (Please specify) \_\_\_\_\_ Are you a United Way Agency?  Yes  No

Amount of Funds Requested \$ \_\_\_\_\_ Over \_\_\_\_\_ Months

Description & Purpose of Request *(State if operating or program)*

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



GRANT APPLICATION

Approximate Geographic location, demographic and description of population served by this request

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Number of individuals expected to benefit from this request \_\_\_\_\_ Market Value of Endowment \$ \_\_\_\_\_

Are you currently in a capital campaign phase?  Yes  No

If yes, indicate the amount of the campaign \$ \_\_\_\_\_ If no, specify the date of your last campaign \_\_\_\_\_

What alternative does the agency have if this request is not funded? Will the program be able to continue?

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If a previous grant was made to your organization from this foundation, have all funds been used?  N/A  Yes  No

If no, please explain \_\_\_\_\_

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We agree to report to the Trustee on the expenditure of any funds received.

**Agreement**

Original Signature Required

Signed \_\_\_\_\_ Date \_\_\_\_\_  
(President / CEO or Executive Director)

If the Applicant Organization has a **fiscal agent**, please include the signature of a representative from that organization

Signed \_\_\_\_\_ Date \_\_\_\_\_