









**Authorized Official 1 Email Address (direct)\***

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**Authorized Official 1 Phone Number (direct)\***

*Character Limit: 250*

**Authorized Official 2 Name\***

*Character Limit: 250*

**Authorized Official 2 Organizational Role\***

*Character Limit: 250*

**Authorized Official 2 Email Address (direct)\***

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**Authorized Official 2 Phone Number (direct)\***

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*Organization Overview and Documentation*

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**Organization Mission Statement\***

Please provide here your organization's mission statement.

This is a 1-2 sentence statement that summarizes your organization's purpose and focus. It is typically developed and approved by an organization's leadership and used for formal purposes (tax filings) as well as public communications.

*An ideal response length is 1-2 sentences.*

*Character Limit: 1000*

**Communities Served by Your Organization\***

Given the eligibility criteria for the program, it is likely that your organization primarily serves people from a particular heritage or cultural background and/or in a particular location. Please tell us how which communities, primarily, your organization serves.

*An ideal response length is 1-2 paragraphs.*

*Character Limit: 3000*

**Organization Programs and Services\***

Please briefly summarize the programs and services your organization offers to your communities, and to the public at large. If you have a standard description of your organization's programs and services that you use in public-facing communications, you're

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welcome to use that to answer this question.

*An ideal response length is 1-2 paragraphs.*

*Character Limit: 3000*

### **Current Fiscal Year Annual Operating Budget Overview\***

With this question, we seek supporting documentation for your earlier statement that your organization's annual operating budget is \$150,000 or less.

Please upload here an overview of your organization's annual operating budget for your current fiscal year.

We are looking for an overall summary of your organization's budget for the current fiscal year. This could be a one-page Excel spreadsheet or PDF including total projected income and total projected expenses, with a breakdown of sources of income and categories of expenses.

*An ideal response is a one-page document. Please contact us at [grants@rihumanities.org](mailto:grants@rihumanities.org) with any questions.*

*File Size Limit: 2 MB*

### **State Nonprofit Registration Documentation\***

With this question, we seek supporting documentation for your earlier statement that your organization is registered as a nonprofit corporation in good standing with the RI Department of State.

Please upload here a PDF of the "Entity Summary" for your organization from the RI Dept. of State's website.

You can find this by searching for your organization under "Search by entity name" on the RI DoS's entity database: <https://business.sos.ri.gov/corpweb/corpsearch/corpsearch.aspx>. Once you have found the record for your organization, please click on the "Entity Name" in the entity results to see your organization's "Entity Summary." Please download this summary as a PDF and upload it here.

For an example of RI Humanities's "Entity Summary" PDF, please click here: <https://rihumanities.org/wp-content/uploads/2024/01/RI-Humanities-Entity-Summary.pdf>

*An ideal response is one PDF. Please contact [grants@rihumanities.org](mailto:grants@rihumanities.org) with any questions.*

*File Size Limit: 2 MB*

## THRIVE Program-Specific Questions

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### Project Name\*

Our grants management system requires applicants to manually enter in the name of the grant program they are applying to.

Please type "THRIVE Grant Program" into the field below.

*Character Limit: 100*

### Grant Start Date\*

The start date for THRIVE grants is May 1, 2024. Please select "May 1, 2024" from the drop-down menu.

#### Choices

May 1, 2024

### Grant End Date\*

The end date for THRIVE grants is Dec. 31, 2024. Please select "Dec. 31, 2024" from the drop-down menu.

#### Choices

Dec. 31, 2024

The THRIVE program prioritizes supporting organizations whose communities are reflected in their organizational leadership, and organizations who are making efforts towards strengthening diversity, equity, inclusion, and accessibility in their programs, services, and operations.

You will be asked to address these areas for your organization in the following two narrative questions.

### Reflection of Communities Served in Organizational Leadership\*

Earlier in the application, you identified the communities that your organization primarily serves. How does your organization's leadership (including Board, staff, and any other leadership roles) reflect these communities? Feel free to discuss community participation in organizational leadership, the composition of your organization's leadership, meaningful collaborations between your leadership and served communities, etc.

*An ideal response length is 1-2 paragraphs.*

*Character Limit: 3000*

### Efforts towards Diversity, Equity, Inclusion, and Accessibility\*

Please share an overview of any efforts your organization has made, or is in the process of making, towards strengthening diversity, equity, inclusion, and accessibility (DEIA) in your programs, services, and operations.

Please approach this answer in the way that makes the most sense for your organization and communities. We acknowledge that this work can be different depending on the histories, needs and resources of organizations and communities, and are interested to learn more about your efforts in these areas given your particular circumstances.

If your organization has been focusing these efforts on one or two areas of DEIA work (for example, improving the physical accessibility of your spaces, or creating a new program for an audience in your community you haven't served before), you are welcome to focus your response on those areas.

*An ideal response length is 2-3 paragraphs.*

*Character Limit: 3000*

## *Attestation of Request for Funds*

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### **Request Amount\***

All awards made in the THRIVE grant program are for \$5,000. Please confirm that your organization is requesting this amount.

### **Choices**

Yes, I request \$5,000 from the THRIVE program administered by RI Humanities.

## *Planned Use of Requested Funds*

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### **Planned Use of Funds**

In this question, you will provide information on how you plan to use the requested funds. Your application will not be evaluated based on this plan. We are asking for this information for two reasons:

1. If you are awarded the grant, in the required final report, we will ask you to tell us how you spent the funds using these categories.
2. We would like to learn more about the operational needs of the organizations we serve in our grantmaking programs.

For each row, please select an expense type from the drop-down menu in the "Expense Type" column, and put the dollar amount you plan to spend towards that expense type in the "Amount" column. **Please ensure that the "Amount" column sums to \$5,000 (the final row in the table will automatically sum the column).**

If you select "Other" for your expense type, please provide more detail in the text box below.



Expense Type	Amount

### "Other" Expense Types / Additional Information (optional)

If you selected "Other" for any expense type, please provide more information about the expense type here.

You can also use this space to provide any additional information you would like to share about your planned use of funds.

*Character Limit: 3000*

## Use of Funds Restrictions Agreement

### Use of Funds Restrictions Agreement\*

Awardees who receive a grant through this program may **NOT** use THRIVE funds for the following:

- Expenses unrelated to the operations of the grantee organization.
- Purchase of alcoholic beverages.
- Purchase of firearms, guns, and/or explosives.

- Competitive regranting, prizes, or awards.
- Pre-award costs prior to May 1, 2024.
- Promotion of a particular political, religious, or ideological point of view; advocacy of a particular program of social or political action; support of specific public policies or legislation; lobbying.
- Any fundraising or for-profit efforts, such as social events or benefits.
- Undergraduate or graduate school activities (activities which are part of a graduate or undergraduate degree program, or for which academic credit is received).

Do you acknowledge and agree to comply with these restrictions?

### Choices

Yes, we acknowledge and agree to comply with these restrictions.

## *Authorized Official Attestations and Signatures*

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### **Authorized Official 1 Attestation and Signature\***

I, Authorized Official 1, certify that the information contained in this application, including all attachments and supporting materials, is true and correct to the best of my knowledge. I attest that I understand my responsibilities as Authorized Official 1, and those of my organization as applicant, in submitting this application.

I also confirm that the filing of this application has been authorized by the governing body of this organization, and that I am authorized to file this application on behalf of this organization.

By applying, I agree to the grant program guidelines as detailed in the THRIVE FAQs. I also acknowledge that acceptance of an award also requires the agreement to additional award terms and conditions detailed in the grant agreement.

**Authorized Official 1 Signature (please type below):**

*Character Limit: 250*

### **Authorized Official 2 Attestation and Signature\***

I, Authorized Official 2, certify that the information contained in this application, including all attachments and supporting materials, is true and correct to the best of my knowledge. I attest that I understand my responsibilities as Authorized Official 2, and those of my organization as applicant, in submitting this application.

I also confirm that the filing of this application has been authorized by the governing body of this organization, and that I am authorized to file this application on behalf of this organization.

By applying, I agree to the grant program guidelines as detailed in the THRIVE FAQs. I also acknowledge that acceptance of an award also requires the agreement to additional award terms and conditions detailed in the grant agreement.

**Authorized Official 2 Signature (please type below):**

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