The Pittsburgh Foundation (FOR OPERATING SUPPORT REQUESTS)

Previous Grants
Have you received a foundation-directed grant from The Pittsburgh Foundation in the last two years?*
This does not include grants received through a donor-advised fund, the Critical Needs Alert, or Wish Book program.
Choices
- Yes
- No

Final Report and Funds Spent
To be eligible for a new grant award, all funds from the previous year's grant must be expended AND a final report must be submitted. Please contact your program officer before continuing with this application. If you do not know who your program officer is, please contact Jill Ritchie at ritchiej@pghfdn.org.

Have you submitted your final report?*
Choices
- Yes
- No

Do you have funds remaining from your previous grant?*
Choices
- Yes
- No

Grant Opportunity Selection
Please select the grant opportunity to which you are applying. You may only select one.*
Please click here to review our current strategic priority areas and other initiatives below.
Choices
- Current strategic priority.
- Direct Care and Medical Assistance for Specific Disease Areas.
- Raymond C. and Martha S. Suckling Fund
- Serving Seniors in Allegheny County.

Strategic Plan Area Strategy*
Please select all that apply.
Choices
- Access to Information
- Access to Post-Secondary Education
- Career Advancement
- Child Care
- Education
- Emergency Response
- Employment
- End Mass Incarceration
- Entrepreneurship
- Equitable Access to Land, Water and Air
- Food
- Homeownership
- Learning and Action
- Mental Health
- Physical Health
- Protecting Basic Needs
- Shelter/Housing
- Small and Mid-Size Arts Organizations
- Support for Careers and Lives of Individual Artists
- Voter Engagement
- Youth Justice

**Grant Request Purpose and Amount Requested**

*Grant Request Purpose*
Provide a brief, one-phrase description of the purpose of your grant request (e.g.: To support the expansion of the Senior Housing Initiative.)

*Character Limit: 250*

*What amount are you requesting?*

*Character Limit: 20*

*Duration of Request*

**Choices**
- One year
- Two years

**Organizational Background**

*Organizational Information*
Is there publicly available, up-to-date information about your organization’s mission, history, programs and impact that we can access to learn more about your work (i.e. on a website or nonprofit search platform that does not require a paid subscription)?

**Choices**
- Yes
- No

*Organizational Background Detail*

*Where can this information be found?*

**Choices**
- GuideStar/Candid
- Your website
- Other
If you selected other, please list.

Character Limit: 1000

Organizational Background Detail - Please Describe

If no, please describe.*

Describe your organization’s mission, history, programs and impact in the space below.

Character Limit: 2500

Organizational Information

Social Media

Please provide links to your social media pages and your social media handles to allow us to learn more about your organization and programs.

Twitter

Character Limit: 250

Instagram

Character Limit: 250

Facebook

Character Limit: 250

LinkedIn

Character Limit: 250

YouTube

Character Limit: 250

Other

Character Limit: 250

Demographic Information

For the past several years, The Pittsburgh Foundation has been working to ensure equitable access to funding through new, more targeted grant-making approaches such as Small and Mighty. However, we know that in order to truly achieve this goal, we must take a systematic approach to tracking all of our grant-making efforts and understanding our reach. Though not a solution in and of itself, collecting demographic data offers another lens for understanding which organizations and communities benefit from our Foundation’s grant-making resources. We are committed to using this data to identify areas where our grantmaking should grow to ensure that communities which, historically and presently, have had less access to philanthropic support have a role in shaping the organizations and programs that serve them. Your individual responses to these questions will not be shared publicly. Responses to these questions will be aggregated and any data we publish will summarize responses received from all applicants.
Leadership Race/Ethnicity*
How does your executive director/CEO self-identify their race/ethnicity?

Choices
- African American/Black
- Asian/Asian American/Pacific Islander
- Hispanic/Latino/Latinx
- Native American/American Indian/Indigenous
- Two or more races/ethnicities
- White/Caucasian
- Other (Please specify below)

Leadership Race/Ethnicity Other
Character Limit: 100

Leadership Gender*
How does your executive director/CEO publicly self-identify their gender?

Choices
- Agender/Doesn't identify with any gender
- Man
- Non-Binary
- Transgender Man
- Transgender Woman
- Woman
- Prefer not to state
- Other (Please specify below)

Leadership Gender Other
Character Limit: 100

Does your organization currently collect racial/ethnic demographic data regarding board members?*

Choices
- Yes
- No

Does your organization currently collect racial/ethnic demographic data regarding people served?*

Choices
- Yes
- No
**Demographics of Board Members**

What is the current racial/ethnic makeup of the board of directors of your organization? Please enter percentages (i.e., 15%) in the below fields. Your total must add up to 100. Please enter 0 if it does not apply to your organization.

<table>
<thead>
<tr>
<th>Demographic Type</th>
<th>Board Members (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>African American/Black</td>
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<tr>
<td>Asian/Asian American/Pacific Islander</td>
<td></td>
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<tr>
<td>Hispanic/Latino/Latinx</td>
<td></td>
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<tr>
<td>Native American/American Indian/Indigenous</td>
<td></td>
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<tr>
<td>White/Caucasian</td>
<td></td>
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<tr>
<td>Two or More Races/Ethnicities</td>
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<tr>
<td>Unknown Race/Ethnicity</td>
<td></td>
</tr>
<tr>
<td><strong>Total:</strong></td>
<td><strong>100%</strong></td>
</tr>
</tbody>
</table>

**Demographics of People Served**

What is the current racial/ethnic makeup of the people served by your organization? Please enter percentages (i.e., 15%) in the below fields. Your total must add up to 100. Please enter 0 if it does not apply to your organization.

<table>
<thead>
<tr>
<th>Demographic Type</th>
<th>People Served (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>African American/Black</td>
<td></td>
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<tr>
<td>Asian/Asian American/Pacific Islander</td>
<td></td>
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<tr>
<td>Hispanic/Latino/Latinx</td>
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<tr>
<td>Native American/American Indian/Indigenous</td>
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<tr>
<td>White/Caucasian</td>
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<tr>
<td>Unknown Race/Ethnicity</td>
<td></td>
</tr>
<tr>
<td><strong>Total:</strong></td>
<td><strong>100%</strong></td>
</tr>
</tbody>
</table>

**Grant Type**

**Type of Support**

Please review our grant guidelines to determine which type of support you are eligible to be considered for and select the grant type below. Please note, applicants utilizing a fiscal sponsor cannot receive a general operating support grant.

**Choices**

- General Operating Support
- Project Support
Proposal Narrative

Proposal*
Organizations are now permitted to upload an application that has been submitted to another foundation for the same purpose in place of completing the support request section. The application must be no more than six months old. **LOIs or inquiry forms will not be accepted.** Your uploaded application should be no more than 25 pages.

If your organization has submitted a grant application and/or request to another foundation for the same purpose in the past six months, would you like to use it for this application?

**Choices**
- Yes
- No

Completed Application

Completed Application
Please upload your completed application here.
- Please submit full applications. Letters of inquiry will not be accepted as a full proposal.
- Do **not** upload applications that are more than 25 pages.

*File Size Limit: 5 MB*

Recent Changes
If applicable, please describe any relevant changes that have occurred since this application was written. If there are no changes, please enter N/A.

*Character Limit: 5000*

General Operating Support Request

Proposed Goals and Activities*
Describe, in detail, your organization’s proposed goals and activities for the next 12 months.
We strongly recommend that you address each of the following bullet points in your response:
- A brief overview of your organization and/or programmatic goals for the grant period.
- A description of the specific activities and/or projects you will undertake to achieve the identified goals and how you will implement them.
- Strengths or assets that your organization has that will help you be successful. This can include past successes, staff expertise, volunteers, etc.
- If you are collaborating with other organizations on specific activities/projects, please list your partners and describe how you will work together. Only include the names of individuals or organizations that have committed to working with you and be sure that you have received their permission to include their names in this application. If you receive a grant for this proposal, you may be asked to submit formal documentation of these partnerships.

*Character Limit: 10000*
Evaluating and Measuring Progress

What outcomes/results do you plan to track?*

Please consider including outcomes that you are already tracking and measuring for this work.

Programmatic Examples:

• Program delivery: The number of sessions or programs offered.
  o Example: *Five performances are held each quarter. OR Each client receives at least five hours of counseling.*

• Program impact (client/community changes): Differences in knowledge, skills, behavior or outcomes from the beginning to the end of program participation.
  o Example: *The program will result in a 30% reduction in the days of school missed by youth participating in the program.*

Operating Support Examples:

• Staff knowledge/skill: Impact of professional development or other training.
  o Example: *Five staff will achieve a 50% increase in knowledge of strengths-based assessment and demonstrate proficiency in using skills in client interviews.*

• Fundraising: Changes in financial resources secured from various sources.
  o Example: *New annual campaign will result in a 25% increase in individual giving and reduced reliance on government funding.*

How will you measure your progress?*

Examples include surveys, questionnaires, interviews or entering client information into case-management software. These tools may be used to collect and analyze information on a weekly, monthly, quarterly or annual basis.

Examples:

• We will use pre- and post-questionnaires and/or assessments to measure changes in students’ STEAM related knowledge.

• We will use our constituent management software to track the number of new donors over the course of the year.

Character Limit: 2500

Financial Information

Operating Budget*

What is your organization's current board approved operating budget?

Character Limit: 20

Operating Revenue*

What is your organization's annual operating revenue from your current board-approved budget?

Character Limit: 20

Operating Budget Upload*

Please upload your organization's current board approved operating budget.

File Size Limit: 15 MB
Operating Budget Breakdown Sources of Support
Please enter percentages (i.e., 15%) in the below fields. Your total must add up to 100.

<table>
<thead>
<tr>
<th>Source of Support</th>
<th>Percentage</th>
</tr>
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<tbody>
<tr>
<td>Foundation Grants</td>
<td></td>
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<tr>
<td>Corporate Donations</td>
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<tr>
<td>Individual Donations</td>
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<tr>
<td>Government Grants/Contracts</td>
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<tr>
<td>Special Events</td>
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<tr>
<td>In-Kind Donations</td>
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<tr>
<td>Fees for Service</td>
<td></td>
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<tr>
<td>Other (Please specify in blank fields in the column to the right)</td>
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</tbody>
</table>

Other Foundation Funding
Please list all approved and pending requests from foundations to support this project and their respective amounts.

<table>
<thead>
<tr>
<th>Foundation Name</th>
<th>Approved or Pending?</th>
<th>Amount</th>
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<tbody>
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</tbody>
</table>
Grant Request Budget

Please describe how you will use The Pittsburgh Foundation (TPF) funds requested in this proposal. Please utilize the “other” section to provide any costs associated with your project not listed under “expenses.”

<table>
<thead>
<tr>
<th>EXPENSES</th>
<th>Other</th>
<th>Use of TPF Funds Requested in this Proposal</th>
<th>Actual Expenses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Salaries (non-consultants)</td>
<td></td>
<td></td>
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<tr>
<td>Independent Contractors (not consultants)</td>
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<tr>
<td>Artist Fees</td>
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<tr>
<td>Consultants and Professional Fees</td>
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<tr>
<td>Payroll Taxes</td>
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<tr>
<td>Fringe Benefits</td>
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<tr>
<td>Travel/Transportation (Car mileage, bus fare for participants, etc.)</td>
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<tr>
<td>Rent and Utilities</td>
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<tr>
<td>Equipment</td>
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<tr>
<td>Supplies</td>
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<td>Postage and Printing</td>
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<td>Evaluation</td>
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<tr>
<td>Meeting/Workshop Expenses (food, space rental, etc.)</td>
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<tr>
<td>In-Kind Expenses</td>
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<tr>
<td>Other (Please specify in blank fields in the column to the right)</td>
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</tbody>
</table>

TOTAL:                                         |       |                                             |                 |
Financial Statements

Financial Statement Requirement*
Is your organization required to complete an annual audit?
Choices
  • Yes
  • No

Annual Audit

Annual Audit*
Please upload your organization's most recently completed annual audit (no more than two years old).
*File Size Limit: 10 MB

990 and Profit and Loss Statements

If your organization is not required to complete an annual audit, please upload your most recently filed Form 990 AND a Profit and Loss Statement (for your last completed fiscal year, including actual income and expenses).

Form 990*
Please upload your organization’s 990.
*File Size Limit: 7 MB

Profit and Loss Statement*
Please upload your most recent Profit and Loss statement.
*File Size Limit: 3 MB

Other Attachments

If you have any questions regarding required attachments, please contact your assigned program officer or Jill Ritchie at 412-394-2611 (ritchiej@pghfdn.org).

Work Samples - REQUIRED FOR ARTS-RELATED REQUESTS ONLY
Upload a relevant work sample file and/or provide links to online work samples. Your application will not be considered complete without this information.
*File Size Limit: 7 MB

Optional Information

If you would like to provide additional information about your organization or your work, you may do so here. For instance, you may want to include annual reports, your current strategic plan, newsletters, reviews or stories that help us to better understand or see the work that you are doing in the community.
*File Size Limit: 3 MB
Length of Application

The Pittsburgh Foundation has recently streamlined our grant-making practices. We are interested in better understanding the amount of time you spent completing this grant application. Your response to this question will solely be used to inform our evaluation of our processes and will not impact the consideration of this application.

Choices

- 0-5 hours
- 5-10 hours
- 10-15 hours
- More than 15 hours