



## CITY OF FOSTER CITY

### FY 2025-2026 Nonprofit Funding Application

#### PROGRAM OVERVIEW

City Council has set aside funds to support local nonprofit agencies that operate programs and services that benefit the Foster City community and that the City would otherwise be unable to provide. Funding levels are determined annually by the City Council. The total funding made available may vary and traditionally has been funded by the General Fund.

#### NONPROFIT FUNDING PROCESS SCHEDULE

June 2, 2025	The nonprofit funding application period opens.
July 2, 2025	All applications are due from nonprofit agencies no later than 5:00 P.M.
TBD	Applicants are invited to appear during a City Council Special Meeting. Applicants will be given three minutes to briefly provide an overview of their organization and how nonprofit funding would benefit the Foster City community. The City Council will then determine funding levels by agency.
TBD	Awarded nonprofits to submit invoice to City requesting disbursement.

#### PROGRAM ELIGIBILITY

- Organization must be incorporated as a nonprofit organization or school with tax-exempt status under Section 501(c)(3) of the Internal Revenue Code.
- An unincorporated organization may apply through a fiscal sponsor, provided that the fiscal sponsor is a 501(c)(3) organization or school with tax-exempt status under Section 501(c)(3) of the Internal Revenue Code.
- The applicant agency understands funding disbursement may only occur after an invoice and W-9 documentation is submitted to the City.
- The applicant agency agrees that an annual report/presentation will be provided to the City Council and shall indicate the number of services provided and Foster City residents served by the organization during the reporting period. The report will include measurable contract outcomes, successes, and challenges.
- Organizations must comply with all appropriate requirements on the use of public funds, particularly prohibiting funds from being used for personal benefit or lending of funds to a private entity.
- Agencies are required to apply for funding each year. Funding for any given year does not guarantee funding for succeeding years.



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*(Please use additional sheets if necessary)*

### **APPLICANT INFORMATION**

Organization Name:

Organization Address:

Contact Name:

Contact Email:

Contact Phone:

Amount Requested:

### **SECTION 1: IDENTIFICATION/ANALYSIS OF LOCAL NEEDS**

- 1a. Describe the problem or need area being addressed, including any formal study that has been done of the local and regional need for the service, program, or project.

### **SECTION 2: PROGRAM DESCRIPTION**

- 2a. Describe the goals of the program for which you are requesting funding and how the funds would be used.



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2b. Describe the accomplishments over the recent year of your organization and/or the program for which you are requesting funding.

2c. Describe the benefits to the City of Foster City and/or its residents of the program goals and accomplishments described in the previous two questions.

2d. How many Foster City residents did this program serve last year and/or how many are expected to be served in the coming year?



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- 2e. Does your organization or program serve a larger geographic area or any other jurisdictions? List (if any), including the total number typically served.

### **SECTION 3: ADMINISTRATIVE CAPACITY**

- 3a. Describe the organization's experience providing the proposed project or program.

- 3b. Describe the way that the program is staffed (full-time, part-time, volunteer) and organized, as well as your organization's total annual budget and your various sources of revenue.



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3c. Describe any collaboration that exists between your organization, this program and programs administered by other agencies, including financial, staffing or cross-referral, and how this may have benefitted or increased the impact of your services.

### **SECTION 4: REQUIRED ATTACHMENTS**

- 4a. Proof of nonprofit status (501(c)(3) or equivalent)  
4b. Copy of latest organization's annual report (if possible)

### **RETURN ONE COPY OF COMPLETED FORMS TO:**

#### **Mail**

City of Foster City  
Attention: City Manager Department  
610 Foster City Boulevard  
Foster City, CA 94404

#### **Email**

[nonprofitfunding@fostercity.org](mailto:nonprofitfunding@fostercity.org)

### **SIGNATURE**

Signature of Applicant:

Date:

Printed Name:

Title: