

SOUTHERN INDIANA POWER

Local Service + Member Owned



OPERATION ROUND UP GRANT APPLICATION GUIDELINES

GEOGRAPHIC FOCUS

Operation Round Up® provides funding assistance to approved eligible applicants located within the counties of Perry, Spencer, Dubois & Warrick served by Southern Indiana Power, Inc.

GRANT CYCLES

Grant cycles occur every Spring and Fall, with applications due during the months of February and September. Actual deadlines vary, and are posted every grant cycle. Board meetings are held in March and October.

APPLICANT ELIGIBILITY

- Contributions are made only to not-for-profit organizations, governmental entities, and school districts or colleges that have been granted tax-exempt status by the Internal Revenue Service 501(c) (3) or similar.
- The organization must contribute to the community's health and/or welfare.
- The organization's services must be non-discriminatory in nature.
- Scholarship applicants must be members of Southern Indiana Power.
- Awards for an individual/family, excluding scholarships, must be awarded thru a 501(c) (3) organization.
- Have not received an ORU grant within the last 12 months
- Request/Award cannot exceed \$5,000.00
- Request/Award cannot pay utility bills
- Request/Award cannot be used for political activities

CATEGORIES OF ASSISTANCE

1. Community Based Programs and Emergency Services

- Programs, projects and organizations that are important components of a community's overall quality of life, with emphasis on public safety, health care, self-sufficiency, and basic human needs.
 - Victim (abuse and crime) assistance programs
 - Emergency rescue health care equipment and transportation services
 - Local fire departments, rescue squads, law enforcement groups
 - Programs and projects that enhance the cultural environment of communities in our local area.

2. Education and Youth Programs

- School and academic enrichment programs.
- Programs and projects designed to combat critical social problems affecting our youth, with an emphasis on children and teens at risk.
- Programs and projects that promote youth wellness.
- College scholarships (awarded during the Spring application process only).



EVALUATION FACTORS

The following factors will be considered in the evaluation of all funding requests:

- Potential benefit to members of Southern Indiana Power and the entire community.
- Level of community support for the program or project or the organization requesting the funds.
- Fiscal and administrative capability of the organization to deliver a quality service or program.
- Results are measurable and can be evaluated.
- Applicant (and their board of directors) participate in Operation Round Up

COMPLETING THE APPLICATION

- Complete the application form in its entirety.
- Be sure to sign the application.
- A copy of the most recent fiscal year's financial statement must be attached. If the organization has an independent audit, a copy of that report should be attached.
- A copy of the organization's 501 (c) (3) status from the IRS must be included.
- A one page budget outlining the project of this request must be attached.
- A copy of the requesting organization's current fiscal budget should be attached.
- If you are requesting specific items, an written quote from a vendor with a line item breakdown for each item must be attached. Pictures and/or specifications of the items are must also be attached.

SEND BY MAIL OR DROP OFF:

Deliver eight completed copies of the application and the necessary attachments to
SIREC Community Trust Fund, Inc. c/o Southern Indiana Power, Inc.

PO Box 219, Tell City, IN 47586

Questions may be directed to Amy Ramsey at 812.547.2316

Additional information is available on our website, www.southernindianapower.com.

All Operation Round Up donations are placed in a trust
and administered by an independent board of trustees
operating on behalf of the:

**SIREC COMMUNITY
TRUST, INC.**



OPERATION ROUND UP
SIREC COMMUNITY TRUST, INC.
PO Box 219 – 1776 10TH Street
Tell City, IN 47586
800.323.2316
southernindianapower.com

APPLICATION FOR ORGANIZATION/AGENCY



A one-page cover letter must accompany this application. Please use this letter to include amount requested and specifics of how funds will be used, emphasizing how the funds would be used locally.

Name of Organization: _____

Address: _____

Street or Post Office Box

City State Zip Code

Phone _____

Contact: _____ Title : _____

E-mail: _____ Phone: _____

Has the Organization been granted 501(c)(3) tax-exempt status by the IRS?

Yes ____ No ____ If yes, copy of letter from the Internal Revenue Service must be attached

A copy of financial statement(s) for most previous year should be provided.

Number of individuals, families, or groups served in Perry, Spencer, Dubois or Warrick Counties in the last year: _____

State purpose of Organization/Agency request, including amount requested and timeline.

List your Board of Directors, Officers or Trustees:

NAME	PHONE NO.	OPERATION		Southern Indiana Power MEMBER
		ROUND UP PARTICIPANT		
_____	_____	Y	N	Y YES N
_____	_____	Y	N	Y YES N
_____	_____	Y	N	Y YES N
_____	_____	Y	N	Y YES N
_____	_____	Y	N	Y YES N

List other sources where you have applied for funding for the previously-described purpose:

Financial Record of the Organization (attach additional pages if necessary):

Source of funds in previous years: _____

Expenditures for current year (itemize briefly):

Amount:

_____	_____
_____	_____
_____	_____
_____	_____

Other sources of funds for current year:

Amount:

_____	_____
_____	_____
_____	_____
_____	_____

Other assets available for current year (endowment, reserve or other funds):

Amount:

_____	_____
_____	_____
_____	_____
_____	_____

Is this organization a United Way Agency? Yes ____ No ____

Have you applied for or do you contemplate applying for State or Federal Funds?

If yes, please explain fully, including amounts which may be available from those sources:

Previous grants received from the SIREC Community Trust, Inc.

(indicate date):

Amount:

_____	_____
_____	_____

Revised: 01-04-24

Digital Form:
10.17.17

A final report of the use of the grant is required to be filed with the SIREC Community Trust, Inc. at the completion of the project.

The report will be sent (date): _____.

The information contained in this statement is for the purpose of obtaining funding from the SIREC Community Trust, Inc. on behalf of the undersigned. Each undersigned understands that the information provided herein is used in deciding to grant funding and each undersigned represents and warrants that the information provided is true and complete and that the SIREC Community Trust, Inc. may consider this statement as continuing to be true and correct until a written notice of a change is provided. The SIREC Community Trust, Inc. is authorized to make all inquiries they deem necessary to verify the accuracy of the statements made herein. It is understood that all information herein will be kept in the strictest of confidence by the SIREC Community Trust, Inc. Board of Trustees.

NAME OF ORGANIZATION

SIGNATURE OF REPRESENTATIVE

DATE