



CHANGING THE FUTURE OF
YOUTH SHOOTING SPORTS

MidwayUSA Foundation, Inc. Grant Application

Team Endowment Account Name:

Team ID:

State:

Team Facebook Page/Website:

***Team Contact Name:**

***Email Address:**

**Foundation staff will correspond with this person, through this email address, for all grant application processing inquiries and acknowledgements. If you do not receive an email acknowledgement within one (1) week after submitting your grant application, please contact us via email: grants@midwayusafoundation.org.*

Date of Submittal:

Submittal Deadline: June 15, 2017

Emailed applications must be received by June 15. Mailed applications must be postmarked by June 15.

Grant Application Submittal Options (CHOOSE ONE)

Email: grants@midwayusafoundation.org

Subject: Grant Application – 'Team Endowment Account Name/Team ID'

OR

Mail: MidwayUSA Foundation, Inc. – Grant Dept.

6001 W Van Horn Tavern Rd, STE C

Columbia, MO 65203-9258

**Without written verification from the Foundation that the application has been received and is under review, the Foundation accepts no responsibility for missing grant applications submitted via mail, fax or email.*



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GRANT APPLICATION CHECKLIST

- Cover Page**
 - Foundation staff will correspond with the contact/email address listed on the Cover Page for all grant application processing inquiries and acknowledgements
- Page 3 - Consideration Agreement**
 - Agreement must have two signatures (only 'Pen-and-Ink' or 'Adobe Electronically Certified' accepted)
 - o 'Signature 1' must be an authorized representative of the W-9 Entity/Applicant Organization
 - o 'Signature 2' must be an authorized team representative
 - o The two signatures must be unique (two representatives must sign the agreement)
- W-9 Form**
 - Complete the following required fields on the W-9 Form:
 - o Field 1: **Name** (W-9 Entity Name)
 - o Field 3: **Tax Classification** ('Individual' not accepted)
 - o Fields 5 & 6: **Address**
 - o Part I: **Employer Identification Number (EIN)** – SSN is not an EIN (not accepted)
 - o Part II: **Sign and Date** (only 'Pen-and-Ink' or 'Adobe Electronically Certified' accepted)
 - The grant payout will be issued to the W-9 Entity/Applicant Organization listed
 - Foundation staff will not utilize a W-9 on file; please supply an updated W-9 Form per grant cycle
- IRS 501(c)(3) Determination Letter ****if applicable******
 - Only applicable if the W-9 Entity is exempt from Federal income tax under section 501(c)(3)
- Page 4 – Grant Payout Detail**
 - The Grant Payout amount will be **5%** of the Team's Fund Balance as of **June 15, 2017**
 - Direct Deposit is the recommended payout method
 - Provide the Grant Payout mailing address – this address can differ from the W-9 address
 - Include any 'Additional Detail' you'd like printed on the check (ex. Team Name, Acct. #, etc.) – keep in mind, checks will **only** be made payable to the W-9 Entity/Applicant Organization
 - If the 'Team Address' differs from the Grant Payout mailing address, indicate accordingly
- Page 5 – Grant Payout Direct Deposit Authorization**
 - Sign and Date the form (only 'Pen-and-Ink' or 'Adobe Electronically Certified' accepted)
 - Must attach a voided check or a photocopy of a check from your team's checking account
 - Name on Direct Deposit Account must match the W-9 Entity/Applicant Organization being utilized
- Page 6 – Shooting Team Budget**
 - Complete the 'Current Season (Projected)' column **in detail** (Estimates are acceptable)
 - Complete the 'Prior Season (Actual)' column **in detail** (Estimates are acceptable)
- Page 7 – Team Contact Detail - Shooting Program Description**
 - Indicate the Primary and Secondary contacts associated with the Team Endowment
 - To submit Team contact updates/additions, please visit **midwayusafoundation.org/forms**
- Page 8 – After Action Report ****if applicable******
 - Only complete this form if your team is a previous MidwayUSA Foundation grant recipient



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TEAM ENDOWMENT ACCOUNT GRANT APPLICATION GUIDELINES

Only Participating Organizations may apply for a grant from the MidwayUSA Foundation. In order to qualify as a Participating Organization you must have:

1. At a minimum, a federal employer identification number (EIN) issued by the Internal Revenue Service
2. Successfully completed all Team Endowment Account documentation requirements
3. A fund balance above zero in your organization's endowment account

Grants are not available to organizations that do not participate in the MidwayUSA Foundation's Team Endowment Account program. Your organization's account balance can be found on our website at www.midwayusafoundation.org/find-your-account.

PLEASE READ THIS ENTIRE DOCUMENT AND MIDWAYUSA FOUNDATION'S "GRANT APPLICATIONS AND FUNDING" POLICY PRIOR TO COMPLETING YOUR GRANT APPLICATION.

This application document provides a summary of information from the "Grant Applications and Funding" Policy of the MidwayUSA Foundation, Inc., which governs the award of all grants made from the Team Endowment Account and takes precedence over this document. Receiving a grant based on this application binds the applicant to all provisions of the "Grant Applications and Funding" Policy. The complete policy is available online at www.midwayusafoundation.org/foundationpolicies.

General Provisions: The MidwayUSA Foundation, Inc. (Foundation) operates the Team Endowment Program. The Foundation was incorporated in 2007 in the State of Missouri and is a 501(c)(3) tax-exempt public charity. Funding provided to Participating Organizations through the Team Endowment Program supports a variety of youth focused and firearms-related public interest projects and activities without regard to the age, race, color, religion, gender, sexual orientation, gender identity or expression, national origin, or disability of its benefactors in accordance with applicable federal, state and local laws. Foundation grants are not guaranteed and must be approved by the Foundation's Board of Directors. The Foundation reserves the right to audit the use of grant funding at any time and for any reason.

Projects/Activities Eligible for Funding: Proposed projects/activities must conform to and foster the purposes set forth in the MidwayUSA Foundation's Articles of Incorporation and mission statement. Allowable 501(c)(3) purposes that align with the MidwayUSA Foundation mission are limited to projects which are or include: charitable, educational, or fostering national or international amateur sports competition. Grant proceeds shall not be used to acquire firearms or to provide individual scholarships. Grant proceeds must be directly linked to the shooting team and shall not be used for club, high school, college, or university indirect costs. Grant proceeds shall not be used to lobby or otherwise attempt to influence legislation, to influence the outcome of any public election, to carry on any voter registration drive, or used to contribute to any political campaign of any candidate for public office. An application that fails to demonstrate that grant funds will be used for eligible projects/activities will not be considered for funding.



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CONSIDERATION AGREEMENT

W-9 Entity Information

W-9 Entity Name (Applicant/Grantee Organization): _____

Authorized Representative First Name: _____ Last Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Primary Phone: _____ Secondary Phone: _____

Email Address: _____

The undersigned Applicant/Grantee hereby agrees to the following Terms and Conditions in order to be considered for a grant from the MidwayUSA Foundation. In the event that the MidwayUSA Foundation (hereinafter "Foundation") awards such a grant, the Terms and Conditions herein shall remain in full force and effect until such time as all requirements of the grant have been fully and completely satisfied.

The Applicant/Grantee hereby certifies it has read, has a working knowledge of, and shall abide by the "Grant Applications and Funding Policy" of the MidwayUSA Foundation, Inc., which is available on the Foundation website (www.midwayusafoundation.org/foundationpolicies) and summarized herein by reference. I (we) also hereby certify that the information contained in this entire grant application is accurate.

TERMS AND CONDITIONS

Grantee is not an individual; Grantee is an entity that will use the Grant for a charitable purpose or purposes.

Any grant awarded by the Foundation shall be used solely for the purposes set forth in the application. The Applicant/Grantee hereby certifies the information contained in the application is true and correct and further certifies any grant awarded by the Foundation shall be used solely for a 501(c)(3) purpose. Allowable 501(c)(3) purposes that align with the MidwayUSA Foundation mission are limited to projects which are or include: charitable, educational, or fostering national or international amateur sports competition. If a grant is made, it is expressly understood the Foundation shall make the grant based upon the information provided by the Applicant/Grantee.

Funds not used or not committed for the specified purpose of the grant, or not committed within the time limit, if any, specified in the corresponding grant application, shall be returned to the MidwayUSA Foundation. In addition, if the Applicant/Grantee dissolves, disbands, or otherwise ceases to exist, or ceases to use for its intended purpose any property/equipment in reasonable working order that was obtained using proceeds from a MidwayUSA Foundation grant, then the organization is required to notify the MidwayUSA Foundation and make a reasonable effort to transfer ownership of such property/equipment to another Participating Organization for use within MidwayUSA Foundation guidelines.

Applicant/Grantee shall furnish written reports as required by the Foundation with respect to projects and activities financed in whole or in part by the grant, including an After Action Report (as included in the application/budget). Grantee is hereby notified of MidwayUSA Foundation, Inc.'s intent to monitor and evaluate the activities funded by this Grant. This may include a visit by a representative of the MidwayUSA Foundation, Inc. to review and discuss the program with Grantee.

Acknowledgment of the Applicant/Grantee to the Terms and Conditions set forth herein must be made by duly authorized representatives of the organization as provided below. After this application is completed and signed, please make a copy for your records and send the original with signatures to the MidwayUSA Foundation.

REQUIRED-Signature 1 (W-9 Entity Rep - e.g. Board Member, School Administrator, etc.): _____ Date: _____

Printed Name: _____ Title: _____

REQUIRED-Signature 2 (Authorized Team Rep - e.g. Head Coach, Asst. Coach, etc.): _____ Date: _____

Printed Name: _____ Title: _____

Grant funds shall not be used:

- to lobby or otherwise attempt to influence legislation,
- to influence the outcome of any public election,
- to carry on any voter registration drive,
- to contribute to any political campaign of any candidate for public office,
- to acquire firearms,
- to support an individual, or
- for club, high school, college, or university indirect costs.

It is expressly understood the Applicant/Grantee takes full responsibility in carrying out the project contemplated in the grant application, the Applicant/Grantee holds the Foundation harmless from any and all liability relating to the effectuation of the grant or in any other way associated with the grant, and, further, the Applicant/Grantee shall indemnify the Foundation from any claims made or actions taken in any way associated with the grant or grant application.

If a grant is awarded, the Applicant/Grantee agrees to recognize the Foundation's grant award in all related materials published by the applicant organization. Publicity associated with any grant awarded by the Foundation in the form of photographs, video, published or printed information, or any other materials, including any information or materials provided by the Applicant/Grantee, may be used by the Foundation in press releases, publications or other materials, for the promotion of the TEAM ENDOWMENT ACCOUNTS or other Foundation programs, or in any other manner as determined by the Foundation. The Applicant/Grantee releases the Foundation from any liability resulting from any information or materials provided by the Applicant/Grantee and agrees to indemnify the Foundation from any claims made or actions taken in any way associated with any information or materials provided by the Applicant/Grantee.

Any violation of the Terms and Conditions set forth herein shall permit the Foundation to terminate any and all further distributions to the Applicant/Grantee, whether or not such distributions have been properly promised or pledged. Such remedy shall not be the sole remedy available to the Foundation and the Foundation shall retain the right to take any other actions allowable by law.

This Agreement and any disputes arising thereunder shall be governed by and construed under the laws of the State of Missouri, or, if applicable, federal law. Any action arising under or related to this Agreement, or breach hereof, shall be brought only in a federal or state court sitting within the County of Boone, or the City of Columbia, in the State of Missouri. The parties hereby consent to and subject themselves to the personal jurisdiction of such courts and agree jurisdiction and venue for any proceeding arising hereunder shall lie exclusively with such courts.



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RECEIVE YOUR GRANT PAYOUT FASTER BY CHOOSING DIRECT DEPOSIT



Safe. Simple. Secure.

Choose the Direct Deposit option below, complete Page 5, and submit a voided check.

GRANT PAYOUT DETAIL

Indicate how to route your Team's 5% Grant Payout (please choose **ONE**):

Direct Deposit *[strongly recommended]*

OR

Printed Check

Additional Check Detail (if needed): _____

Checks will only be made payable to the Applicant Organization (W-9 Entity Name)

GRANT PAYOUT MAILING ADDRESS

The grant payout will be mailed to your preferred address designated below
(It is acceptable for the address to differ from the W-9 address)

Addressee Name: _____

Attn [*strongly recommended*]: _____

Street Address/PO Box: _____

City, State, Zip: _____

If the Team Address **differs** from the address noted above, please indicate below:

Address: _____ City: _____ State: _____ Zip Code: _____



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GRANT PAYOUT DIRECT DEPOSIT AUTHORIZATION FORM

Instructions

- Complete **all** of the following information to receive your grant payout via Direct Deposit
- Attach a voided check or a photocopy of a check (*not a deposit slip*) from your team’s checking account (Name on Direct Deposit Account **must match** the W-9 Entity being utilized)
- The MidwayUSA Foundation originates the Direct Deposit. Contact your bank to verify the deposit and funds availability

Team Information

Team Name: _____ Team ID: _____

I authorize MidwayUSA Foundation, Inc. (“Grantor”) to Direct Deposit funds to my account at the financial institution listed below and to correct any errors which may occur from these transactions. I understand that the authorization may be rejected or discontinued by Grantee at any time. If any of the below information changes, I will promptly complete a new authorization form. I acknowledge that Grantor will originate the Direct Deposit and that we assume responsibility for verifying fund deposit and availability with our banking institution.

This authorization will remain in force until Grantor receives written notice from us to change this authorization.

Grantee’s Authorized Representative Signature

Date

Please attach your Voided Check here or include a copy

NAME
ADDRESS
CITY, STATE ZIP

0123
01-23456789

DATE

PAY TO THE ORDER OF

REQUIRED

BANK NAME
ADDRESS
CITY, STATE ZIP

FOR

⑆0 2345678⑆ 0 234567890 23⑆ 0 123

Bank Routing Number Bank Account Number Check Number



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SHOOTING TEAM BUDGET

The below information is for our internal use in future planning; help us, help you!

Current Shooting Season (Projected) Prior Shooting Season (Actual)

Revenue	Estimates are Acceptable	Estimates are Acceptable
MidwayUSA Foundation, Inc. Grant (1)	\$	\$
School Grants or Support (2)	\$	\$
Alumni / Booster Support (3)	\$	\$
Fundraising (4)	\$	\$
Student Support (5)	\$	\$
Other Revenue	\$	\$
Total Revenue	\$	\$
Expenses	Estimates are Acceptable	Estimates are Acceptable
Personnel Costs (coaching, trainer, etc.)	\$	\$
Firearms (6)	\$	\$
Travel (7)	\$	\$
Ammunition (practice / tournament)	\$	\$
Targets (8)	\$	\$
Administrative Costs (9)	\$	\$
Entry Fees / Registration Fees	\$	\$
Scholarships	\$	\$
Promotions / Fundraising	\$	\$
Team Equipment	\$	\$
Other _____ (10)	\$	\$
Total Expenses	\$	\$

If grant funds were received in a previous cycle, please also complete the [After Action Report \(Page 8\)](#)

- (1) **MidwayUSA Foundation, Inc. Grant** – The amount your shooting program requests from the Team Endowment Account
- (2) **School Grants or Support** – The amount of money provided by the school to your shooting program
- (3) **Alumni / Booster Support** – Amount of funds provided by any alumni or booster organization
- (4) **Fundraising** – Estimated amount of money to be received from fundraising activities by the shooting program not otherwise listed
- (5) **Student Support** – Fees and expenses covered out of pocket by the students participating in the program. Can include travel, lodging, ammunition, entry fees, etc.; but not tuition, books or costs otherwise associated with attending school
- (6) **Firearms** – Purchasing firearms with MidwayUSA Foundation grant proceeds is prohibited. If the program purchases firearms, there must be adequate revenue from other sources to allow for the expense
- (7) **Travel** – Costs associated with shooting team members' travel and lodging for tournaments but not including normal travel for practice
- (8) **Targets** – If rifle or pistol targets (including steel) please specify
- (9) **Administrative Costs** – Range fees, professional services, uniforms, membership fees
- (10) **Other** – An expenditure not classified under the provided expense categories



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TEAM CONTACT DETAIL

Primary Contact

Name: _____ Title: _____

Primary Phone: _____ - _____ - _____ Secondary Phone: _____ - _____ - _____

Address: _____ City: _____ State: _____ Zip: _____

Primary Email: _____ Secondary Email: _____

Secondary Contact

Name: _____ Title: _____

Primary Phone: _____ - _____ - _____ Secondary Phone: _____ - _____ - _____

Address: _____ City: _____ State: _____ Zip: _____

Primary Email: _____ Secondary Email: _____

SHOOTING PROGRAM DESCRIPTION

1. Your shooting program is considered a:
Select more than one if appropriate (e.g., your local club team has both high school and college age shooters)

- High School Club program (ages 14-18)
- High School Varsity program
- Collegiate Club program (ages 18+, team members are out of high school)
- Collegiate Varsity program

2. Your team includes the following disciplines: *(Mark all that apply)*

- Air Rifle
- Air Pistol
- Smallbore Rifle
- Pistol
- Shotgun
- Muzzle Loader
- High Power Rifle

3. Your shooting program began in: _____

4. How many active team members are in your current/most recent season? _____



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AFTER ACTION REPORT

(Disregard if no previous grant funding has been received)

Please briefly describe the impact of MidwayUSA Foundation grant funds on your team. What was your team able to accomplish that would not have been possible without the grant funding? (e.g., Individual and shooting program growth, travel highlights, competition achievements, etc.)

Attach additional detail if needed

NOTE: Purchasing firearms with MidwayUSA Foundation grant funds is PROHIBITED