

Donation Request Form

Date of application: _____

Legal Name of Organization: _____
(should be the same as on IRS determination letter and as supplied on IRS Form 990)

This organization is 501(c)(3) 501(c)(3) Church 501(c)(4) Public School
 Private School Other (please specify) _____

Executive: _____ Email: _____

Contact person/Title (if different from Executive): _____

Address (principal/administrative office): _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Website/Social Media URL: _____

Project Name: _____

Purpose of funds request: _____

Geographic area to be served: _____

Population to be served: _____

Amount Requested: _____ Total Project Cost: _____

Signature/title of executive: _____

**Please refer to page 2 for application details and page 3 for Guidelines for Applicants.
Incomplete applications will not be accepted.**

Print and mail to: NMC Health
Attn: Administration
PO Box 308
Newton, KS 67114

Project Name _____

Additional pages may be attached.

1. Briefly summarize the program or project you request funds for. Summarize the purpose of the project, goals, objectives and activities.

2. Explain how this project/program addresses or supports NMC Health's Current Community Health Needs Assessment and the current hospital implementation strategies?
(<https://www.myNMCHHealth.org/about-nmc/community-health-needs-assessment>)

3. Describe how these funds address one of the following:
 - a. Our community's current health-related needs, health inequities, health disparities as described by the US Department of Health and Human Services and/or CDC
 - b. Building community capacity to improve health?

4. Describe how you will measure outcomes and impact, including how many people will be impacted and over what timeframe?

5. How and when do you aim to communicate results with your constituents?

6. How will your marketing plan acknowledge NMC Health's financial contribution?

7. Describe how your organization is uniquely positioned to achieve the goals set out by use of these funds.

8. If your organization has received charitable funding from NMC Health in the past, please describe the amount and when obtained, how funds were utilized, and the measured impact achieved to address health-related needs, and/or health inequities, and/or health disparities and/or how they built community capacity to improve health.

Guidelines for Applicants

- 1. By our philanthropic gifts, NMC Health intends to support and strengthen causes in our primary service area that further our mission and corporate purpose.**
 - a. Philanthropic gifts will be principally directed to meet the definition of Community Benefit (1) or Community Building (2, 3). Such contributions are intended to support priorities of the current Community Health Needs Assessment Implementation Plan and few exceptions are to be expected.
 - b. Funding priorities include
 - i. Addressing health and wellness of all persons in our primary service area, including Social Determinants of Health (4).
 - ii. Education that furthers a broad spectrum of health careers development: supportive, technical, professional.
- 2. Programs and causes eligible for funding:**
 - a. 501(c)(3) nonprofit organizations whose mission concerns health-related matters;
 - i. Requests from religious organizations for sectarian purposes will not be considered.
 - ii. Community health-related efforts sponsored by a religious organization may be considered (e.g., food pantry that is open to all in the community).
 - b. Specific programming in accredited schools that are developing clinical/non-clinical and/or professional/technical/supportive healthcare workforce.
 - c. Health-related programming requests of 501(c)(4) social welfare organizations may be considered;
 - d. Other at the discretion of the Newton Healthcare Corporation Board of Directors.
- 3. NMC Health does not contribute to:**
 - a. A request that does not principally advance our mission;
 - b. A request that does not meet the definition of community benefit or community building as described by the IRS at 501(c)(3) or 501(r);
 - c. Programs, projects, or events outside our Harvey County/contiguous county Primary Service Area Zip Codes (*please contact hospital Administration to determine if your organization is in our Primary Service Area*);
 - d. Programs, projects, or events already completed;
 - e. Individuals or individual fundraising efforts;
 - f. Political campaigns/parties;
 - g. Religious organizations except as described above;
 - h. Administrative, staffing, or operational costs;
 - i. Community-based sports team, booster clubs, or program ads;
 - j. Membership fees or association fees;
 - k. Political activity;
 - l. Family foundations;

- m. Groups that discriminate on the basis of age, religion, color, race, sex, sexual orientation, gender identity, or national origin;
- n. In general, requests for capital campaigns (“bricks and mortar”) are not considered.
 - i. Health-related programming or programming designed to reduce health inequity and/or address social determinants of health (as defined below) that will be initiated or expanded as the direct result of or in conjunction with a capital campaign may be considered.

Definitions

1. Social Determinants of Health. “Social Determinants of Health (SDOH) are the conditions in the environments where people are born, live, learn, work play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks.” Its five domains are Economic Stability; Education Access and Quality; Healthcare Access and Quality; Neighborhood and Built environment; and Social and Community Context. (1)
2. Community Benefit: programs and services designed to improve health in communities and increase access to health care including
 - a. Financial Assistance
 - b. Government-sponsored means-tested programs
 - c. Community health improvement services
 - d. Health professions education
 - e. Subsidized health services
 - f. Research
 - g. Cash and in-kind contributions
 - h. Community-building activities: investments in programs or activities that seek to improvement the health of communities, address health inequities, address SDOH; and improve capacity (2)
3. Community Building: investments in programs or activities that seek to improve the health of communities and health inequities and improve capacity (2)
4. Health Equity: characterized as action to ensure all population groups living within an area have access to the resources that promote and protect health. (3)
5. Health Disparities: differences in health outcomes and their causes among groups of people. (3)

Reference

1. US Department of Health and Human Services. Healthy People 2030: “Social Determinants of Health.” <https://health.gov/healthypeople/priority-areas/social-determinants-health>
2. “A Guide for Planning & Reporting Community Benefit.” <https://www.chausa.org/communitybenefit/what-counts>
3. “Paving the Road to Health Equity.” https://www.cdc.gov/minorityhealth/publications/health_equity/index.html Accessed 07/18/22