2020 LARGE Grant Guidance

Have a Question? Read the Guidance

Still have a question?
Feel free to email the
Hemophilia Alliance Foundation Board Vice Chair, Brenda Riske
Brendariske@hemophiliaalliancefoundation.org

CHECKLIST OF THE FOLLOWING ITEMS TO BE INCLUDED WITH YOUR APPLICATION:

- Your organization’s tax-exempt certification from the IRS, also called the IRS Tax Determination letter. This is a document from the federal government, not from the state
- A copy of your organization’s W-9
- Other institution documents related to your application
- If the application reflects a collaboration, letter(s) from each collaborating partner(s) must be provided stating the role each partner will play in the implementation
- Budget

PLEASE NOTE THAT ALL GRANTS ARE SUBJECT TO THE AVAILABILITY OF FUNDS
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Audra Ames, PhD, St. Petersburg, FL

Founder and Advisor
Joseph Pugliese, Hemophilia Alliance President and CEO, Lansdale, PA
I. History

The Hemophilia Alliance, a nonprofit corporation, was incorporated in 2005 as a member organization for hemophilia treatment centers. Together they are able to purchase clotting factors and related products more efficiently. From its inception, the Hemophilia Alliance planned to dedicate its discretionary revenue to the bleeding disorders communities.

Toward that end, the Alliance created a grants committee in 2009. Its first task was to establish a process through which the Alliance could channel its discretionary funds to nonprofit organizations that served people with bleeding disorders. The first grants were given out that year; they totaled $250,000. In 2020 grant awards totaled more than $770,000. **Beginning in 2020, new grant funds were provided to the Hemophilia Alliance Foundation to establish a new, larger amount of funding for innovative projects that would enhance the care of persons with blood disorders.**

In 2013, the grants committee was incorporated as the Hemophilia Alliance Foundation, and the following year it received its IRS 501(c)(3) tax-exempt certification.

II. Timeline for 2020 Grant Process

- Call for Applications; Guidance posted on web site: Apr 1, 2020
- Applications due: July 30, 2020
- Decisions made by Foundation Board: Aug 20, 2020
- Award letters and checks sent: Aug 25, 2020
- Grant-funded year begins: Sep 1, 2020
- 6-Month Progress reports due: Feb 15, 2021
- Final Report due: Aug 30, 2021

III. Purpose of Grants

The goal of this grant is:

- To **encourage larger scale, creative, and unique projects**
- To serve the community with resources that will **improve the lives of patients with blood disorders**
IV. Eligibility

A. Types of Applicant Organizations

- A non-profit 501 (c) (3) organization
- An organization that has a history and documented track record of serving the blood disorders community

B. Grant Amount for 2020
The ceiling for applicants for 2020 is $50,000. Two grants will be awarded.

C. Criteria for Consideration
To be considered for funding, an organization must meet all of the following criteria:
1. It serves people with blood disorders, either directly or through its members
2. It operates under one of these IRS tax exemptions: 501(c)(3) or 170(c)(1) or other nonprofit status approved in advance and in writing by the Alliance Foundation board
3. It has submitted an application by the deadline, COMPLETE WITH REQUIRED ATTACHMENTS as itemized in Section VII Submission Requirements
4. The project or service it describes is within the Alliance Foundation’s guidelines, and alignment of changes in blood disorders care
5. Priority for funding will be given to expanding of capacity, collaboration, innovation, integration of programs into benign hematology
6. Well-defined measurable objectives are required
7. The project or service will be completed in the grant year (Sep 1, 2020 – Aug 30, 2021)

V. General Guidelines for All Applicants

A. Examples of Projects
1. The following are some examples of project grants that serve the community:
   a. Developing or purchasing educational materials to improve consumer or family or staff knowledge. Developed materials should contain acknowledgement of the Hemophilia Alliance Foundation as the source of funds.
   b. Creative approaches to larger scale patient education projects including development of regional and shared programs that include curriculum, objectives, timeframe, etc.
   c. Clinical research projects that evaluate outcomes of care

   NOTE: You will be expected to let other eligible organizations copy and use newly developed materials with appropriate credit to the developer.

B. Examples of Personnel Costs Allowed
   Personnel expenses incurred exclusively for the grant activities will be considered, however the temporary nature of the duties must be made clear in the application.
C. Costs Not Allowed
Grant funds will NOT be awarded for the following costs:
   a. Administrative or overhead may not exceed 8% of budget.
   b. Basic, laboratory research, or related equipment
   c. Underwriting or sponsorship of fundraising events
   d. Recurring costs, such as:
      1) office rent and utilities
      2) monthly phone bills for the applicant organization
      3) Salaries of staff not related to the grant application

VI. Guidelines for Project Collaborations

A. Collaboration Projects
If collaboration between two organizations is planned, the total amount is $50,000. The organization that submits the grant becomes the fiscal agent for the project, and therefore receives and disburses the project funds.

B. Additional Requirement for Collaborative Projects
Applications for collaborative projects must include a letter from each collaborating organization that is specific about its role in the project (e.g., “we will recruit participants and our staff will supervise their activities”) and is signed by its Authorized Official.

VII. Submission Requirements

A. Format
See outline in Section IX.

B. Budget
Expenses in the budget must be itemized and justified. Each major item must be identified; along with the calculation showing how the item’s total was derived. Put another way, the budget must reflect how the writer came up with each major line item’s total (See Sample Budget in Appendix C). Failure to itemize and justify proposed expenses will result in a rejection of the application. This budget is for funds requested from this Hemophilia Alliance Foundation Grant. These funds are not intended to supplement a larger grant project. Where applicable, the Hemophilia Alliance Foundation grant recipient acknowledges and agrees to comply with the Federal Anti-Kickback Statutes as found in Section 1128 D(b) of the Social Security Act and 42 U.S.C. Section 1330a-7b(b) and the grant recipient acknowledges and agrees to comply with all state and federal statutes.

C. Length of Proposal Narrative (not counting required attachments)
Applications may not exceed the following page limits. Brevity is appreciated; please use the fewest words necessary to describe the organization, the needs, the objectives, the budget.
1. Proposals only requesting project funding – maximum 3 pages
2. Proposals for a collaborative project – 4 pages

D. Required Attachments

Applicants must also include the following attachments with the application. These attachments will not count against your application page limit. Applications will not be considered for funding if these required documents are not included:

1. Copy of the organization’s tax-exempt certification from the IRS, also called the IRS Tax Determination letter. This is a document from the federal government, not one from the state. See example in Appendix A
2. A copy of the organization’s W-9. See example in Appendix B
3. If the application reflects a collaboration, letter(s) from each collaborating partner(s) must be provided stating the role each partner will play in the implementation.

NOTE: The Hemophilia Alliance Foundation reserves the right to require additional information as it considers an application.

E. Form of Transmission and Deadline

1. Applications will be available online on the Foundation website on April 1, 2020. Applications are to be filled out online and submitted online by pressing the SUBMIT button on the bottom of the application form. Attachments must be submitted electronically by attaching them to the application.
2. Applications must be received by July 30, 2020, by 11:59 p.m. PST. Late applications will not be considered.
3. Applicants will receive an electronic acknowledgement that their application has been received. IF YOU HAVE NOT RECEIVED AN ACKNOWLEDGEMENT OF RECEIPT, IT MEANS THAT YOUR APPLICATION MAY NOT HAVE BEEN RECEIVED. Please contact Audra@hemophiliaalliancefoundation.org if you do not receive this acknowledgement.

APPLICANTS ARE RESPONSIBLE FOR ENSURING THAT THEIR APPLICATION AND ATTACHMENTS HAVE BEEN RECEIVED BY JULY 30, 2020.

F. Authorized Signature

1. Applications and letters of collaboration must be signed by the organization’s authorized official, that is, the person with the authority to incur obligations on behalf of the organization. Such officials are recognized by their authority to:
   a. sign contracts on behalf of the organization
   b. approve the organization’s budget
   c. add or subtract staff
For example, in consumer-led entities, the Executive Director would sign (or, in the absence of the Executive Director, the President); for an HTC, the Grants Administrator, Medical Director, Administrative Director or institution designated responsible person would sign.

Upon the award of a grant by the Hemophilia Alliance Foundation, the grant recipient acknowledges and agrees to all the terms and conditions of the grant as provided in the grant guidelines. The terms and conditions include but are not limited to the following:

- The grant application is submitted by a duly authorized representative having full authority to bind the applicant entity; and
- All required documents submitted with the grant application are true and correct; and
- A progress report on the first 6 months of the operation of the grant shall be submitted; and
- A final report after the grant project is completed, not later than the end of the grant term, shall be submitted

VIII. Causes for Immediate Rejection of Application

A. Failure to submit all required attachments.
   These documents are:
   - IRS Certification letter (See example in Appendix A)
   - Most recently filed Form W-9 (See example in Appendix B)
   - Patient/Consumer Assistance Guidelines (only if applying for Patient/Consumer assistance funds)
   - Letter(s) from collaboration partner(s) describing their role in the project

   Please note that the Hemophilia Alliance Foundation will not advise applicants that attachments are missing. Incomplete applications will be rejected immediately.

B. Failure to itemize and justify the budget.
   See sample budget in Appendix C

C. Failure to submit application on time.

IX. 2020 Application Format

1. State applicant organization type: Local Chapter/Association/Other, HTC.

2. Contact information
   In the event that the staff who submitted the grant request leaves the organization during the grant period, the Foundation needs the contact information for a second individual who is responsible for the project.
   1. Name of applicant organization
   2. Address of organization
   3. Address to send check if that differs from the organization’s address
4. Name of two contact persons
5. Telephone numbers of the two contact persons
6. Email of the two contact persons

3. Amount Requested: **$50,000 maximum total.** For collaboration list partners, and how much funding is included for each.

4. Name and signature of institution/organization fiduciary designated individual

5. Organization description: **brief** description of mission, geographic service area, # served.

6. **Brief** description of the project,

7. **Brief** description of the need that the project addresses.

8. Concisely state the specific outcomes or measurable objectives of the project. Well-conceptualized and clearly stated outcomes and objectives will receive higher consideration. If you are unfamiliar with writing outcome or measurable objectives, you may refer to the following CDC article: [https://www.cdc.gov/std/Program/pupestd/Developing%20Program%20Goals%20and%20Objectives.pdf](https://www.cdc.gov/std/Program/pupestd/Developing%20Program%20Goals%20and%20Objectives.pdf)

9. Statement of how the project will strengthen the care of persons with blood disorders.

10. Itemized Budget - Format

   This is total budget for project that is requested from the Hemophilia Alliance Foundation

<table>
<thead>
<tr>
<th>Item Description &amp; Calculation Detail</th>
<th>$ Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
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<tr>
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<td></td>
</tr>
</tbody>
</table>

   TOTAL*

   *Cannot exceed $50,000
   See Sample Budget in Appendix C
   Be sure to include required attachments specified in the Guidance

**X. 6-Month Progress Report**

Grant recipients are required to submit a progress report on the first six months of operation. An email reminder will be sent to grant recipients in January 2021 with a link to the 6-month Progress Report. The online form may also be found on the Grant Information page on the Hemophilia Alliance Foundation website.
The report must be submitted online. Once completed, the report is submitted electronically by pressing the “submit” button at the bottom of the form. You will receive an electronic confirmation of receipt.

The 6-Month Progress Report is due by February 15, 2020, at 11:59 PDT.

As you will see below, the Progress Report also serves as a vehicle to request project and budget amendments and to request a deadline extension. These requests should not be made lightly. The Hemophilia Alliance Foundation Board expects projects to be completed in the grant-year timeline. However, we recognize that unanticipated circumstances may arise, and for this reason we will entertain requests for project, budget, and/or deadline changes.

Failure to submit a Progress Report will result in ineligibility to apply for a large grant the following year.

**Progress Report Content [maximum length one page].**

1. Contact information
   a. Name of organization
   b. Name of project
   c. Amount received
   d. Name of two contact persons
   e. Phone and email for two contact persons
   f. Authorized Person’s (person with institution/organization fiduciary responsibility) signature

2. Briefly describe the progress of your Hemophilia Alliance Foundation grant project.

3. Briefly describe any unanticipated hindrances to the project.

4. Briefly describe your expectations for the project’s completion.

5. Unused funds from this project. Funds remaining at the end of the grant will be returned to the Alliance Foundation. However, if there were hindrances to the project that were out of your control, you may request an extension of up to six months. Please describe the following:
   a. Return of unused funds.
   b. Projected amount of unused funds

6. If requesting an extension of up to 6 months on the grant’s deadline, state requested new deadline. Any requests for extensions must be for the same purpose for which the grant was originally awarded.
7. Any request for use of leftover funds must be used for the same purpose for which the grant was originally awarded.

IF YOUR PROJECT HAS BEEN COMPLETED BY JANUARY 2021, YOU MAY FORGO SUBMITTING A PROGRESS REPORT AND SUBMIT YOUR FINAL REPORT BY FEBRUARY 15, 2021.

XI. Final Report

Grant recipients are required to submit a final report after the project’s completion no later than Aug. 30, 2021. An email reminder will be sent to grant recipients in August 1, 2021 with a link to the Final Report. The online form may also be found on the Grant Information page on the Hemophilia Alliance Foundation website.

The Report must be submitted online. Once completed, the report is submitted electronically by pressing the “submit” button at the bottom of the form. You will receive an electronic confirmation of receipt.

FAILURE TO SUBMIT A FINAL REPORT WILL MAKE THE RECIPIENT INELIGIBLE TO RECEIVE FUNDING FOR SUBSEQUENT YEARS’ PROJECTS UNTIL THAT REPORT IS RECEIVED. IF THE RECIPIENT HAS APPLIED FOR AND BEEN AWARDED A GRANT FOR THE FOLLOWING YEAR, THE AWARD CHECK WILL BE HELD UNTIL THE FINAL REPORT IS RECEIVED.

Please note that copies of receipts and other justification of expenses are not required in this submission; however, it is expected that adequate documentation would be available in the event of an audit. The Hemophilia Alliance Foundation Board reserves the right to conduct a program and financial audit of documents and finances associated with this grant.

Final Report Content [maximum length 2 pages]: Grantees will receive the form to fill out online.

1. Contact information
   a. Name of organization
   b. Name of two contact persons
   c. Phone and emails for two contact persons
   d. Authorized person’s signature who has fiduciary responsibility

2. Name of project and amount of grant

3. Objective(s) of the project

4. Describe how well the proposed objectives were met

5. Describe how the project strengthened the organization and/or its patients/consumers

6. Financial report: Please reproduce here the original budget, adding a column showing actual expenses
Example:

<table>
<thead>
<tr>
<th>Item</th>
<th>Budgeted</th>
<th>Actual Spent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Salary for PI (20% supported time for this project)</td>
<td>$32,000</td>
<td>$32,655</td>
</tr>
<tr>
<td>Benefits for PI (20% of institutional benefits)</td>
<td>$5000</td>
<td>$4844</td>
</tr>
<tr>
<td>Consultant</td>
<td>$8000</td>
<td>$10000</td>
</tr>
<tr>
<td>Software for project data analysis</td>
<td>2600</td>
<td>0</td>
</tr>
<tr>
<td>Travel to national meeting to present results of project</td>
<td>2400</td>
<td>3200</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>$50,000</strong></td>
<td><strong>50,699</strong>*</td>
</tr>
</tbody>
</table>

*If overspent, please identify from where additional funds derive

7. Amount, if any, of funds remaining. Any leftover funds must be used for the same purpose for which the grant was originally awarded with Hemophilia Alliance Foundation approval.

XII. Frequently Asked Questions

1. Q. Can I submit a proposal for less than $50,000?
   A. Yes.

2. Q. We are moving to more efficient office space. Would the costs associated with the relocation be acceptable as a grant request?
   A. No.

3. Q. We want to hire an expert consultant to assist us with specific expertise in our project. Would that qualify?
   A. Yes, with documentation in budget and clear delineation of use of consultant. Up to 25% of total budget may be used in the manner.

4. Q. Changes in the university or chapter organizational personnel make some revisions necessary as to grant fund use. Can we revise the timeline and budget?
   A. You need to complete a report on the award and your progress. The 6-month report is to be used for this purpose. If the reason you didn’t use it is compelling, you may request an extension and the board may approve the timing change. If not, you should return unused funds and describe the circumstances for changes.

5. Q. We are partnering with another organization for this project. Do we need to include this other organization’s W-9 and 501c3 letter in our application?
   A. No. We only require the attachments for the organization that is applying for the grant and who will have financial responsibility for the funds, not for the collaborating organization.

6. Q. If I have previously applied and successfully received a HAF grant, am I still eligible for this grant?
A. Yes.

XIII. Where to Email for Help

You are welcome to email the Hemophilia Alliance Foundation Board Vice Chair, Brenda Riske, at Brendariske@hemophiliaalliancefoundation.org.
Appendix A: Sample IRS Determination Letter

Dear Applicant:

We are pleased to inform you that upon review of your application for tax exempt status we have determined that you are exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code. Contributions to you are deductible under section 170 of the code. You are also qualified to receive tax deductible bequests, devises, transfers or gifts under section 2055, 2014 or 2532 of the Code.

Because of this letter could help resolve any questions regarding your exempt status, you should keep it in your permanent records.

Organizations exempt under section 501(c)(3) of the Code are further classified as either public charities or private foundations. We determined that you are a public charity under the Code section(s) listed in the heading of this letter.

For important information about your responsibilities as a tax-exempt organization, go to www.irs.gov/charities. Enter “4211-PC” in the search bar to view publication 4211-PC, Compliance Guide for 501(c)(3) Public Charities, which describes your recordkeeping, reporting, and disclosure requirements.

Sincerely,

Ms. Mission

Director, Exempt Organization

Letter 111

This document is a sample for the sole purpose of displaying what an IRS determination letter looks like. This is not an actual determination letter. The use of this document is intended strictly for informational purposes and not any commercial purpose. This document is not for sale.
Appendix B: Sample Blank W-9 Form
Applications must include a copy of the organization’s current W-9.

Need 2018 version here
Appendix C: Sample Itemized Budget

This budget is for funds requested from this Hemophilia Alliance Foundation Grant. These funds are not intended to supplement a larger grant project.

<table>
<thead>
<tr>
<th>Item</th>
<th>$ Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Salary for PI</strong></td>
<td></td>
</tr>
<tr>
<td>PI has 20% of total salary and time allocated to this project. Per institutional salary agreement/contract</td>
<td></td>
</tr>
<tr>
<td><strong>Benefits for PI</strong></td>
<td></td>
</tr>
<tr>
<td>Per institutional standard, 20% of PIs benefits</td>
<td></td>
</tr>
<tr>
<td><strong>Travel</strong> for PI to attend annual meeting to present data from project</td>
<td></td>
</tr>
<tr>
<td>Round trip air fare @ $575 each</td>
<td></td>
</tr>
<tr>
<td>Hotel for meeting @ $225/night x 3 nights</td>
<td></td>
</tr>
<tr>
<td>Per diem for PI during meeting</td>
<td></td>
</tr>
<tr>
<td><strong>Consultant</strong> – institutional biostatistician to assist with data analysis</td>
<td></td>
</tr>
<tr>
<td><strong>Software license</strong> – software license (at institutional rate) that is needed for project data collection (scanning system)</td>
<td></td>
</tr>
<tr>
<td><strong>Other</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Total Amount Requested</strong></td>
<td>$50,000.00</td>
</tr>
</tbody>
</table>