



Joseph P. Ganim
Mayor

SUPPORTIVE CONTRIBUTION APPLICATION – FY 2022

Complete and attach the City of Bridgeport Supportive Contribution Application

Attach any links, flyers, or event registration forms

Attach copy of 501 (c) 3

Attach Vendor ID Request

Attach completed W9

Email to: SupportiveContributionGrant@bridgeportct.gov

Contact Name:	Phone:	Email:
Name of Organization:	Type of Nonprofit:	Website, Social Media links:
	<input type="checkbox"/> 501 (c) 3 <input type="checkbox"/> Social Advocacy Group <input type="checkbox"/> Private Charitable Foundation <input type="checkbox"/> Corporate Giving Program <input type="checkbox"/> Other (Explain):	
Name of Program or Event:	Requested Amount:	Program or Event Start Date:
	\$	
Briefly describe how the Supportive Contribution Funds will be applied and how the program or event will substantially benefit the Bridgeport Community:		
List other sources of Capital or donations for this Program or Event:	Dollar Amount(s):	How will these other funds be applied?
	Total \$:	
Has your organized or program received Supportive Contribution from the City in the past?	If yes, how much?	How was past supportive contribution money applied?
<input type="checkbox"/> Yes <input type="checkbox"/> No	\$	



CITY OF BRIDGEPORT

SUPPORTIVE CONTRIBUTION APPLICATION – FY 2022

<p>Do you or your organization employ or have on your board or management or advisory team (whether on a compensated or a voluntary basis) any City of Bridgeport employee(s) or official(s) or member(s) of their immediate family?</p>	<p>If the answer is “Yes”, please identify such individual(s) by name and role with you or your organization; and state whether to your knowledge such person has any decision-making authority on behalf of the City with respect to this funding request.*</p>
<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	

** Supportive Contributions funds will not be awarded to individuals or organizations (and the City reserves the right to reduce the requested funding or withdraw awarded funding) in the event of any conflict of interest, including the failure to properly disclose the information requested herein.*

Applicant Signature	Applicant Printed Name	Application Date
----------------------------	-------------------------------	-------------------------

DO NOT FILL OUT SECTION BELOW (FOR OFFICE-USE ONLY):

DATE RECEIVED:	DATE REVIEWED BY THE PANEL:	
<input type="checkbox"/> APPROVED FOR SUPPORTIVE CONTRIBUTION	REQUESTED AMOUNT:	AWARDED AMOUNT:
<input type="checkbox"/> NOT APPROVED FOR SUPPORTIVE CONTRIBUTION <i>Reason for denial:</i>		
<input type="checkbox"/> Insufficient City Funds <input type="checkbox"/> Not a Non-Profit <input type="checkbox"/> Does not substantially benefit Bridgeport Community <input type="checkbox"/> Incomplete application <input type="checkbox"/> Submitted less than 30-days before the scheduled event <input type="checkbox"/> Event has passed	<input type="checkbox"/> False Statements: _____ <input type="checkbox"/> Conflict of Interest <input type="checkbox"/> Fees owed to the City <input type="checkbox"/> Project duplicates initiative already funded by the City: _____	



CITY OF BRIDGEPORT

SUPPORTIVE CONTRIBUTION APPLICATION RULES

1. Review Panel will review the applications every two weeks (or more frequently, as needed).
2. Applications should be submitted to SupportiveContributionGrant@bridgeportct.gov.
3. Applications should be received a minimum of 30-days in advance of the event or program start date.
4. An applicant must satisfy all of the following criteria:
 - a. 501c3 Organization (proof must be submitted)
 - b. Bridgeport Based Organization
 - c. Project or event must substantially benefit Bridgeport residents
5. What disqualifies an applicant?
 - a. False statements, including but not limited to the following:
 - Failure to disclose additional funding sources from City of Bridgeport entities
 - Failure to disclose previous supportive contribution from the City of Bridgeport
 - Failure to disclose if previous supportive contribution was awarded and the event did not take place
 - Failure to disclose conflicts of interest
 - Misappropriation or failure to expend previous supportive contribution from the City of Bridgeport
 - b. Incomplete application (i.e., missing information, unsigned)
 - c. Failure to submit application at least 30-days in advance of the event
 - d. Request is for reimbursement for events that took place prior to approval for Supportive Contribution
 - e. Fees are owed to the City (taxes, licensing fees, etc.)
 - f. The project duplicates an initiative already funded by the City (i.e., backpacks for kids and after school programs)
 - g. Such other legal and appropriate bases as reasonably determined by the Review Panel.
6. Supportive Contribution awards are contingent on available City funds.
7. Supportive contributions payments will not be issued to individuals, foundations, or business enterprises.
8. If an applicant received funds in prior years, there is no guarantee that they will be approved for new funding.
9. Only one supportive contribution request per applicant, per fiscal year. If rejected, the applicant must wait until the next fiscal year to reapply. The fiscal year runs from July 1st through June 30th. Decisions of the Review Panel are final.
10. A detailed description, history of the organization and social media links must be provided (the City has the right to conduct further research on the organization and the event).
11. Applicants will be notified by email if award has been granted or denied. There will be a check-off list of reasons why application was not approved for payment including insufficient funds along with the aforementioned.