

S.L. Gimbel Foundation Fund Holiday Food Program Grant Application

In	ternal	Use	On	ly:

Grant

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Organization A	Agency	Information
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Organization/Agency Name:				
Chesapeake	e Cares Food Pantry			
Physical Address:		City/State/Zip		
6045 Solomons Island Rd		Huntingtown, MD 20639		
Mailing Address:		City/State/Zip		
P.O. Box 936 c/o grants		Huntingtown, MD 20639		
CEO or Director:		Title:		
Debbie Weber		Pantry Manager		
Phone: Fax: 410-257-0296		Email:		
		dweber@chesapeakechurch.org		
Contact Person:	Title:			
Robin Brungard Community Relations Paston				
Phone:	Fax:	Email:		
410-286-3401	410-257-0296	grants@chesapeakechurch.org		
Web Site Address:	L	Tax ID:		
Chesapeakechurch.org/foodpantry		52-1378847		

Program / Grant Information

Program/Project Nat Chesapeake Cares Food			Amount of Grant Requested: \$15,000
Total Organization	Per 990, Percentage of	Per 990, Percentage of	Per 990, Percentage of Management &
Budget:	Program Service Expenses (Column B/ Column A x	Management & General	General Expenses and Fundraising
\$3,582,646	100):	Expenses Only (Column C / Column A x 100):	(Column C+D / Column A x 100):
, , , , , , , , , , , , , , , , , , ,	93.1%	- 11	
		6.9%	6.9%
Purpose of Grant Re	quest (one sentence):		
To secure food a	nd hygiene products to s	upport 3,800 unduplicated	low-income individuals.

Signatures		
Board President / Chair: (Print name and Title)	Hgnature:	Date:
2 21		
KOBERT P. HAHN		11/1/19
Executive Director/President: (Print name and Title)	Signature:	Date:
2		
KOBIN C. BRUNGARD	Tourse	11/1/19

S.L. Gimbel Foundation Fund Holiday Grant Application

Please provide the following information for items I. through III. by answering all questions in ONE PAGE-12 Font. Please be thorough, clear, specific, and concise.

I. <u>Organization/Agency Background</u>: State your mission, vision, purpose, and provide a brief history. What are your core programs and activities? How many people do you serve? How many paid staff, full time and part-time? How many volunteers?

The mission of Chesapeake Cares Food Pantry (CCFP) is to provide healthy food to low-income families while assisting them to work towards self-sufficiency. From its inception in 2001, Chesapeake Cares wanted to be different; we wanted to connect families with resources and help develop pathways out of poverty. Today, Chesapeake Cares Food Pantry (CCFP) is the largest food pantry in Southern Maryland, feeding an average of 700 families each week. Over 3800 unduplicated individuals are dependent on CCFP to meet their basic need for food. As of October 31, 2019, CCFP distributed 732,687 pounds of food and expects to exceed 800,000-pound mark by year end.

Chesapeake Cares Food Pantry provides more than a bag of groceries. CCFP acts as a centralized referral hub where families are encouraged to connect with additional resources such as SNAP, school lunch programs, WIC, and utility assistance. Volunteers provide application assistance when needed. CCFP offers life-skill education classes on topics such as basic budgeting, Earned Income Credit, healthy eating, and shopping on a budget. Families are coached to avoid predatory financial practices and are encouraged to use the free tax prep program run by End Hunger in Calvert County. In addition, CCFP partners with the local hospital to provide free on-site health care via the mobile health unit. There are two full time staff members providing support for 400+ active volunteers. Our volunteers are key to feeding hungry families, supporting every facet of the program. We employ contract labor seasonally.

II. Project Information:

Hungry families in Calvert County are not addicted, homeless, or mentally challenged; they are the working poor, with 87% earning less than 25% of the median income for the region. These families earn too much for public benefits, yet not enough to get by (www.selfsufficiencystandard.org). On an individual basis, children (0-18) remain the majority at 41%. However, we have seen a 6% increase in the number of seniors (60+) served over the last three years. Seniors now represent 16% of the pantry population. Traditionally, Hispanic families have represented 2% of those served, however that number increased to 4% in one year. Demographic data (age, income, education, family size) is collected by the admin team utilizing the client intake form at the first pantry visit, then annually thereafter. (see attached intake form) In addition, the admin team records each pantry visit, confirms number of people living in the home, what resources were provided, classes attended, and pounds of food distributed. In 2019, CCFP served 3800+ unduplicated individuals. All pantry client information is maintained in a secure database.

There is no means test to receive food. Anyone who expresses need is served. Pantry families provide demographic information for data purposes only. A Welcome Team volunteer meets with new families to assess for additional services needed. Families are eligible to receive food weekly during one of five pantry openings. Deliveries are also made to home-bound seniors. The pantry employs the "client choice" model which allows families to choose foods that best serve their needs. This also reduces waste and provides dignity of choice. We offer special pantry openings for seniors; these are designed to meet their specific dietary needs. With the increase in our senior population, special attention is placed on providing low sodium and low sugar items. In addition, there is an opening for our growing Hispanic community which includes bilingual volunteers, translated resources, and culturally relevant food items. Fresh produce is offered to everyone throughout the growing season and a Dept. of Agriculture representative provides recipes and cooking demonstrations. Chesapeake Cares Food Pantry acts as a model pantry for best practices.

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III. Project Budget

Please provide a detailed line-item budget for your project by completing the budget form below. The maximum requested amount is \$15,000 or 25% of your operating budget, whichever is less. You can request for less than \$15,000. You may delineate your line items requests per examples below:

- 85% of total request for the purchase of food items only. (Ex. Total request of \$15,000; 85% is \$12,750 for food)
- 15% of total request for female hygiene products and/or diapers. (Ex. Total request of \$15,000; 15% is \$2,250 for diapers and female hygiene products
- 100% of total request for the purchase of food items
- Canned tuna will not be funded.

Food items must be delineated (i.e. canned vegetables, soup, pasta, dried beans, rice, etc.). For each food item, indicate the cost per unit (pound, carton, case, etc.) and the quantity. See attached example.

Line Item	Line Item Description	Requested Amount
Breakfast Items (8,000 lbs)	320 – 25 pound boxes of mixed breakfast items (cereal, pancake mix) @ \$5 per box	\$1,600
Canned Prep (9,000 lbs)	360- 25 pound boxes of mixed canned items (soup, beans, vegetables) @ \$5 per box	\$1,800
Canned low-sugar fruits (8,000 lbs)	320 – 25 pound boxes of low sugar canned fruits (peaches, applesauce, pears) @ \$5 per box	\$1,600
Canned low-sodium tomatoes (7,000 lbs)	280- 25 pound boxes of low sodium canned tomato product @ \$5 per box	\$1,400
Dry Items (5,000 lbs)	200- 25 pound boxes of dry items (pasta, rice, dry soup mix) @ \$5 per box	\$1,000
Poultry, Beef, Pork (33,000 lbs)	1020- 25 pound boxes of mixed frozen meats (chickens, hamburger, chops, roasts, lunch meat) @ \$5 per box	\$5,100
Diapers and Feminine Products	43 cases of diapers – average \$35/case 143 packages of feminine products average \$7/pack	\$2,500
TOTAL:		\$15,000

IV. Administrative Expenses Percentage

This section calculates how much the organization spent for general management, overhead, indirect items as a percentage of the organization's total expenses. The figures are based on your most current 990 form that you submitted, Part IX Statement of Functional Expenses.

*Note: Administrative costs reflect the church as a whole; food pantry is a ministry of Chesapeake Church

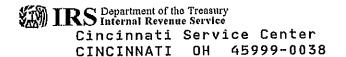
Management & general expenses (Column C only)	/Total expenses (Column A)	= Administrative Percentage
\$271,223	\$3,903,019	6.9%

V. Supplemental Documents Checklist: Submit the following as attachments

•	Your current 501(c) (3) final determination letter from the IRS
•	List of your Board members and their affiliations
•	Your most recent, filed 990 report.
•	Part IX only of the 990 form, Statement of Functional Expenses (one page)
	Your current operating budget (Current calendar or fiscal year)
	2018 Holiday Food Program Grantees: Include your evaluation report
	Other past Holiday Food Program Grantees: Include your most recent evaluation report

Some College Some College Degree/Trade School Degree/Trade School Completed Completed Please complete ONLY ADULT (19+ yrs. old) family member information on this page. Children/Minors (18 yrs. old or less) are on back. County: County: Completed High Sch/GED High Sch/GED Retired ☐ Retired Completed ☐ Veteran ☐ Veteran Middle Name **Chesapeake Cares Food Pantry - Client Information** Did Not Complete HS Middle Name ☐ Did Not ☐ Complete HS Zip Code: Zip Code: 000'09\$ - \$60'000 **250,001 - \$60,000** ☐ Active Active Other: Other: +0000′09\$ □ +000'09\$ **Education Level Education Level** How did you hear about us? How did you hear about us? Gluten Allergy Gluten Allergy Completed: Completed: Military Service: Military Service: 330,001 - \$40,000 **540,001 - \$50,000 240,001 - \$50,000 330,001 - \$40,000** ☐ Work F/T ■ Work P/T ☐ Work F/T ■ Work P/T **Nut Allergy Nut Allergy** Single Parent Single Parent City City: Dairy Allergy Dairy Allergy Retired-62 +yrs old 25,001 - \$30,000 \$20,001 - \$25,000 525,001 - \$30,000 \$20,001 - \$25,000 Retired-62 +yrs old First Name DOB Unemployed First Name DOB Unemployed Cell Phone: Cell Phone: Diabetic Diabetic ☐ Widowed In School ☐ Disabled 15,001 - \$20,000 \$15,001 - \$20,000 In School ☐ Disabled 1 \$1 - \$15,000 1 - \$15,000 Single Low Salt Single Low Salt **Employment Employment** Dietary Needs (Circle all That Apply): Dietary Needs (Circle all That Apply): Status: Status: Married ☐ Married Female Female □ 8 □ \$0 \$0 Male Male Marital Status: Marital Status: Home Phone: Home Phone: Last Name Relationship Last Name Relationship Income: Income: Address: Address: Gender: Gender: Email: Email:

2	Family Members - Chi	- Children/Minors (18 yrs. old or less)	rs. old or less)		
Last Name	First Name	Relationship	Date of Birth	Age	Race
Gender: Female Male	☐ In School ☐ Disabled				
Last Name	First Name	Relationship	Date of Birth	Age	Race
# Gender:	☐ In School ☐ Disabled				
Last Name	First Name	Relationship	Date of Birth	Age	Race
# Gender: □Female □Male	☐ In School ☐ Disabled				
Last Name	First Name	Relationship	Date of Birth	Age	Race
# Gender:	In School Disabled				
Last Name	First Name	Relationship	Date of Birth	Age	Race
# Gender: ☐Female ☐Male	☐ In School ☐ Disabled				
Last Name	First Name	Relationship	Date of Birth	Age	Race
# Gender: ☐Female ☐Male	☐ In School ☐ Disabled				
men engal yang beneral menganan menganyan penganyan penganyan penganyan penganyan beneral dibinah beneral bener	200	Staff Use ONLY			
		Notes:			
# Authorized	Proof of Address Received? (Yes				
				Control (Control (Con	
Person(s) Authorized to Pickup Your Groceries:					



In reply refer to: 0255467241 Apr. 04, 2019 LTR 4168C 0 52-1378847 000000 00

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BODC: TE

CHESAPEAKE CHURCH
DBA CHESAPEAKE CARES FOOD PANTRY
% DANIEL J KELSH
PO BOX 936
HUNTINGTOWN MD 20639



009768

Employer ID number: 52-1378847

Form 990 required: N

Dear Taxpayer:

We're responding to your request dated Mar. 28, 2019, about your tax-exempt status.

We issued you a determination letter in February 2002, recognizing you as tax-exempt under Internal Revenue Code (IRC) Section 501(c) (3).

We also show you're not a private foundation as defined under IRC Section 509(a) because you're described in IRC Sections 509(a)(1) and 170(b)(1)(A)(i).

Donors can deduct contributions they make to you as provided in IRC Section 170. You're also qualified to receive tax deductible bequests, legacies, devises, transfers, or gifts under IRC Sections 2055, 2106, and 2522.

In the heading of this letter, we indicated whether you must file an annual information return. If you're required to file a return, you must file one of the following by the 15th day of the 5th month after the end of your annual accounting period:

- Form 990, Return of Organization Exempt From Income Tax
- Form 990EZ, Short Form Return of Organization Exempt From Income Tax
- Form 990-N, Electronic Notice (e-Postcard) for Tax-Exempt Organizations Not Required to File Form 990 or Form 990-EZ
- Form 990-PF, Return of Private Foundation or Section 4947(a)(1)
 Trust Treated as Private Foundation

According to IRC Section 6033(j), if you don't file a required annual information return or notice for 3 consecutive years, we'll revoke your tax-exempt status on the due date of the 3rd required return or notice.

You can get IRS forms or publications you need from our website at www.irs.gov/forms-pubs or by calling 800-TAX-FORM (800-829-3676).

If you have questions, call 877-829-5500 between 8 a.m. and 5 p.m.,

2018-2019 Chesapeake Church Board of Directors

- Rev. Robert P. Hahn Pastor, Chesapeake Church
- Paul Miller Water Treatment Executive, Bond Water Technologies
- Michael Lea- Congregation Care Pastor, Chesapeake Church
- Ronnie Martin MetroRail Mechanic
- Bill Collette Master Electrician
- Stephen Bertolicinni Defense Contractor
- Chet Taylor Contractor
- Jonny Miller Water Treatment Specialist, Bond Water Technologies
- Marlin Ruhl Hospitality Executive

	rt IX Statement of Functional Expenses			52-1378	3847 Page 10
	ion 501(c)(3) and 501(c)(4) organizations must complete all co	lumns. All other organ	izations must complete	column (A)	
0001	Check if Schedule O contains a response or note to				
Do n	ot include amounts reported on lines 6b, 7b,	(A)	(B)	(C)	(D)
	b), and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22 · · · · · · · · · ·				K0000 (8200000000000000000000000000000000
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				,
7	Other salaries and wages	1,911,512	1,720,361	191,151	
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				-
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees):				
a	Management				
b	Legal				
C	Accounting				
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				·
g	Other. (If line 11g amount exceeds 10% of line 25, column				
40	(A) amount, list line 11g expenses on Schedule O.) Advertising and promotion				
12	Office expenses				
13 14	Information technology				
15	Royalties				
16	Occupancy	85,832	77,249	8,583	
17	Travel	65,632	71,243	6,363	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	132,854	119,569	13,285	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	325,053	292,548	32,505	
23	Insurance				
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
а	Worship, Pantry and Care	1,190,778	1,190,778		
b	Management and Finance	256,990	231,291	25,699	
C					
d					
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e .	3,903,019	3,631,796	271,223	0
26	Joint costs. Complete this line only if the				
	organization reported in column (B) joint costs from a combined educational campaign and				
	fundraising solicitation. Check here 🕨 🗌 if				
	following SOP 98-2 (ASC 958-720)				

Chesapeake Church Food Pantry Budget

January through December 2019

	Budget
Ordinary Income/Expense	
Income	
Ministry Income	
Designated Giving	
Grants	152,155.00
Designated Giving - Other	74,000.00
Total Designated Giving	226,155.00
Total Ministry Income	226,155.00
Total Income	226,155.00
Gross Profit	226,155.00
Expense	
Ministry	
Advertising/Marketing	500.00
Care & Hospitality	800.00
Commissions/Services	122,100.00
Computer Hardware	1,000.00
Equipment	9,500.00
Food	80,000.00
Postage	300.00
Printing	1,500.00
Prof. Dues/Memberships	750.00
Supplies	5,000.00
Training/Development	1,500.00
Total Ministry	222,950.00
Total Expense	222,950.00
Net Ordinary Income	3,205.00
Net Income	3,205.00

#123

COMPLETE

Collector: New Link (Web Link)

Started: Monday, July 11, 2016 4:05:00 PM **Last Modified:** Monday, July 11, 2016 4:44:32 PM

Time Spent: 00:39:31 IP Address: 76.114.148.217

PAGE 1: Organizational Information

Q1: Name of your organization. Chesapeake Cares Food Pantry

Q2: Grant # 20150968

Q3: Grant Period 1/1/16-6/30/16

Q4: Location of your organization

City Huntingtown

State MD

Q5: Name and Title of person completing evaluation. Robin Brungard

Q6: Phone Number: 3015096177

Q7: Email address. rbrungard@chesapeakechurch.org

Q8: Total number of clients served through this grant

funding:

7000

Q9: Approximate volume of food purchased with grant funds? (i.e 10 lbs of fresh produce; 1000 boxes; 10 cases, etc)

71,701 pounds of food

PAGE 2: Key Outcomes and Results

Q10: Describe the project's key outcomes and results based on your goals and objectives:

The key outcome of this grant was to secure food to feed the hungry. We anticipated obtaining 50,000 pounds of food however we were able to exceed that amount and obtain over 71,000 pounds.

Q11: Please describe any challenges/obstacles the organization encountered (if any) in attaining stated goals & Objectives.

We had difficulty obtaining donated food product from Maryland Food Bank due to internal struggles they were experiencing. Fortunately, Maryland Food Bank farmers were able to provide additional produce drops to help fill the gap- a truck full of produce for \$300. We secured several of these produce drops to ensure adequate healthy food for our families.

Q12: How did you overcome and/or address the challenges and obstacles?

As stated above, we were able to take advantage of excess produce drops to meet the need.

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Q13: Describe any unintended positive outcomes as a result of the efforts supported by this grant.

One of our internal goals is to provide the healthiest food possible to our families. We believe it is not enough to feed a family only to leave them a legacy of obesity, diabetes and hypertension. The excess produce was a wonderful way to meet that goal. We have a volunteer providing nutritional and preparation tips to help families take full advantage of the produce.

Q14: Briefly describe the impact this grant has had on your organization.

Grant funds from the Gimbel Foundation assist us in feeding the 7100 unduplicated individuals we serve each year. Te funding was especially helpful as we were unable to obtain our normal amount of donated food and had to purchase higher priced food product. The Gimbel Foundation Funds allowed us to obtain the needed food and take advantage of the produce drops.

Q15: Please provide a brief narrative on how the funds were used to fulfill grant objectives. Support documents (receipts or expense reports) can be emailed to klampert@thecommunityfoundation.net or faxed to 951-684-1911.

All funds were used to obtain food that was distributed to low-income families.

PAGE 4: Success Stories

Q16: Please relate a success story:

Calvert County, Maryland is a rural area populated primarily by Caucasian and African-Americans. Over the last few years we have experienced a rise in the Hispanic community however we did not see a corollary rise in the number of Hispanics using the food pantry. We knew we needed to reach this population differently however this year was fiscally tighter than usual. Because of the Gimbel Foundation Funds we were able to expand services during tight economic times rather than keep the status quo.

We used the following model to reach this previously unreached population. First, we developed a team of volunteers who are fluent in Spanish. We created a special pantry opening just for the Hispanic Community and translated all of our menus and resources into Spanish. We worked with a nearby Catholic Church who we knew had Hispanic congregants. The first week we had 26 new families attend the pantry opening. The next week we added another 18 families and expect that word of mouth will continue to grow thisservice. In addition, we used funds to secure food that Hispanic families would recognize and enjoy. When new families share our services it demonstrates a level of trust- it is safe for them to come here and they will be treated with dignity and able to communicate fully. Families will not only get food but community resources as well.

Funding from sources such as the Gimbel Foundation make all the difference in whether we hold tight during economic struggles or grow through them Thank you for helping us grow.

Q17: Please relate a success story here: Respondent skipped this question

Q18: Please relate a success story here: Respondent skipped this

auestion

PAGE 5: Demographic Information

S. L. Gimbel Foundation Holiday Food Grant

Faith Based Organization Q19: Which category best describes your organization. Please choose only one. Food Bank Q20: What is your organizations primary Program Area of Interest? Q21: Percentage of clients served through grant in each Ethnic Group Category. Total must equal 100% 21 African American Asian/Pacific Islander 1 68 Caucasian 5 Hispanic Latino Unknown 5 Q22: Approximate percentage of clients served from grant funds in each age category. Children Birth-05 years of age 14 16 Children ages 06-12 years of age Youth ages 13-18 9 Young Adults (18-24) 10 38 Adults Senior Citizens 13 Respondent skipped this Q23: Approximate percentage of clients served with question disabilities from grant funds. Q24: Approximate percentage of clients served in Economic Group At/Below Poverty Level 22

78 Working Poor

Q25: Approximate percentage of clients served from grant funds in each population category.

Respondent skipped this question

	Chesapeake Cares Food Pantry	es Food Pantry	
Requested Item	Requested Amount	Purchased Item	Actual Cost
Breaktfast Items (5,000 lbs)	\$1,008.00	Breakfast Items (5,800 lbs)	\$1,010.00
Canned Prep (7,000 lbs)	\$1,260.00	Ganned Prep (8,400 lbs)	\$1,428.00
Canned Fruits (6,000 lbs)	\$1,080.00	Ganned Fruits (8,600 lbs)	00.006\$
Canned Tomatoes (6,000 lbs)	\$1,080.00	Canned Tomatoes (7,100 lbs)	\$1,136.00
Dry Items (3,175 lbs)	\$572.00	Dry Items (2,228 lbs)	\$401.00
Poultry/Beef/Pork (27,775 lbs)	\$5,000.00	Poultry/Beef/Pork (36,024 lbs)	\$5,125.00
Diapers/Feminine Products	\$1,000.00	Diapers/Feminine Products	\$1,000,00
Total - 54,950 lbs	\$11,000.00	68,152 lbs	\$11,000.00