



GOOD NEIGHBOR PROGRAM

Guidelines

Thank you for your interest in the Conrad N. Hilton Foundation's Good Neighbor program. We created the Good Neighbor Program to recognize the critical work being done in the local community near our headquarters in Westlake Village, California. These grants are guided by the same philosophy that guides all of our work—improving the lives of individuals living in poverty or experiencing disadvantage. The primary geographic focus of these grants will be the Conejo Valley, extending northwest to Camarillo, Oxnard and Ventura.

The average Good Neighbor grant ranges from \$5,000 and \$10,000 (and typically does not exceed 10% of an organizations operating budget). The maximum grant award is \$25,000. We do not accept multi-year requests.

Good Neighbor grantees are eligible to apply for a second consecutive year funding through an abbreviated renewal process. There is no guarantee of renewed funding. Generally, after two consecutive grants, agencies must wait one year after the close of the second grant to reapply to the Good Neighbor Program.

Grant Limitations

Good Neighbor grants are not made:

- To organizations that discriminate against certain groups or individuals in the delivery of programs and services on the basis of race, religion, national origin, gender, age, sexual orientation or disability.
- For influencing legislation or elections, promoting voter registration, for political candidates or political campaigns.
- For social or political issues outside the United States of America.
- To individuals.
- For temporary exhibits, travel, surveys, films or publishing activities.
- For endowment funds.
- For fundraising dinners or events.

For any questions please email GMdepartment@hiltonfoundation.org

CONRAD N. HILTON FOUNDATION

1 Dole Drive
Westlake Village, CA 91362
818.851.3700

www.hiltonfoundation.org

Submit completed application to: GMdepartment@hiltonfoundation.org

Cover Form

Requested Amount:

Purpose of Request (1-2 sentences)

Enter purpose here.

	Enter response in each cell below.
Applicant Legal Name	
Also Known As	
Tax ID Number (EIN)	
Complete Address	
Main Phone	
Website	
Fiscal Year End (e.g., June 30)	
Current FY Organizational Budget	
Previous FY Organizational Budget	
Is a Fiscal Sponsor required?	Enter Yes or No If yes, request and complete supplemental form.
Name - Head of Organization	
Title	
Email	
Name – Primary Contact	
Title	
Direct Phone	
Email	

X	Type of Support Requested (generally mark only one)
	General Operating Support
	Project Support Total Project Budget \$X (USD) Current Amount Raised \$X

