



## 2025 Smart Growth Grant - Level 1 Application

Status: Started

Date Submitted: This application has not been submitted.

Submitted By:

Does the proposed activity adhere to the stated requirement? Yes

First Name: Kristie

Last Name: Smithers

Contact Title: Association Executive

Contact Email: kristie@ancboard.com

Contact Phone: 907-917-8035

Association:

**Association ID:** 

Address 1: PO Box 241414

Address 2:

City: Anchorage

State: AK

**Zip**: 99524

Association Executive First Name (if different from above):

Association Executive Last Name (if different from above):

Association Executive Contact Email (if different from above):

## **Activity Details**

1. Amount Requested (Max \$3,000): \$3,000

2. Projected Completion Date:: 2025-09-30

- 3. Type of Initiative:: REALTOR® class / education
- 4. Describe the proposed initiative including key details about how it will be executed and how the initiative will align with one or more of the 10 Smart Growth Principals?: Encourage community and stakeholder collaboration in development decisions and create a walkable downtown area.
- 5. Why is the association interested in conducting this initiative:: Anchorage needs to revitalize their downtown area which has changed since Covid.
- **6. How will the initiative advance the associations community development advocacy goals?:** We will expand our advocacy goals, locally and at the state level, by greater awareness.
- **7. How will the association measure the success of the initiative?:** Expand communication to the Mayor, Assembly, Alaska Realtors and our ABR leadership.
- **8.** How will REALTORS® be involved in the planning and implementation of the initiative?: One of our members is an Assembly Member and he and our leadership team is committed in implementation and planning.
- 9. How will association staff be involved in the planning and implementation of the initiative?: Staff is available to assist as needed and directed by the board of directors.
- **10.** List any organizations that will partner with your association in the initiative. Describe their role(s) in the initiative.: None at this time, however, we will invite municipal leaders and home builders association.

**Budget Details** 

The following are NOT eligible uses of grant funds.

- REALTOR® association staff time/hours, including contract staff
- Fundraising contributions or money to hold a fundraiser
- General operating expenses for the association or partner organization
- Purchase of capital equipment such as cameras, speakers, lights, mics, computers, printers. Rentals <u>are</u> permitted
- Donations to an organization or person including direct down payment or closing assistance

\$3,000

- Cash prizes or purchase of gifts and prizes
- Materials for construction/rehab of a property
- · Landscaping materials
- · Home furnishings or similar items
- Subscription fees for video conferencing services or other software licenses
- In-house association classroom rental fees
- Activities that benefit a single/select group of property owner(s)

Note: Associations are encouraged to use the majority of grant funds for expenditures related to the development and implementation of an activity (such as speaker fees, marketing, printing, etc.) rather than venue and catering costs. The TOTAL REVENUE and the TOTAL EXPENSES must net to ZERO, no profit or loss.

## Revenue

**Smart Growth Grant (enter** 

requested amount)	ψ3,000
Contribution from other REALTOR® association(s)	\$0
Contribution from non- REALTOR® collaborating partners	\$0
Admission fee/tickets	\$0
Revenue from sponsors (e.g., booth rental, payment for advertising, etc.)	\$0
Total	\$3,000
Expenditures	
Consulting Fees	\$0
Venue rental	\$495
Catering/refreshments	\$900
Marketing	\$100
Speaker fees	\$3,000
Speaker expenses (travel,	\$0
lodging, meals)	Φ0

- 11. Additional Budget Information: If applicable, use the space below to: provide explanations for "other" revenue or expenses noted above; provide an estimated number of attendees for activities with an admission fee; provide a breakdown of consulting fees; or provide details about in-kind contributions the association will make toward the activity.: 100 plus, and we will invite local leaders in the muni.
- 12. For local associations, the state association must be notified of this funding request. Please provide the name and title of the person at the state association who is most familiar with this request.

First Name Association Contact: Rosetta Last Name Association Contact: Alcantra

## **Association Staff Email:**

- 13. In reference to THIS activity, has your association applied for funding from another NAR grant programs including Housing Opportunity, Fair Housing, Diversity, Consumer Advocacy Outreach or Issues Mobilization?: No
- 14. If this funding request is approved, do you give NAR permission to share your application, and any outcomes?: No