



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?: Anchorage needs to learn how to develop our downtown area and explore new options to improve the area.
- 5. Why is the association interested in conducting this initiative:: To help our members learn and explore more opportunities related to smart growth.
- **6.** How will the initiative advance the associations community development advocacy goals?: Anchorage is a growing city and we need to learn more about community development to expand our advocacy goals.
- 7. How will the association measure the success of the initiative?: Working with the Municipality of Anchorage and collaborate with them.
- 8. How will REALTORS® be involved in the planning and implementation of the initiative?: Currently we have one of our Realtor members serving as Assembly member, he and as well as our leadership is committed to be involved.
- **9. How will association staff be involved in the planning and implementation of the initiative?:** Staff will be involved and will implement the initiative as determined by the Anchorage Board of Relators.
- 10. List any organizations that will partner with your association in the initiative. Describe their role(s) in the initiative.: none

Budget Details

The following are NOT eligible uses of grant funds.

• REALTOR® association staff time/hours, including contract

· Cash prizes or purchase of gifts and prizes

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
- 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)	\$3,000
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	
Expenditures Consulting Fees	\$0
•	\$0 \$495
Consulting Fees	, -
Consulting Fees Venue rental	\$495
Consulting Fees Venue rental Catering/refreshments	\$495 \$700
Consulting Fees Venue rental Catering/refreshments Marketing	\$495 \$700 \$100

- 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 Municipal Leaders to attend too.
- 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?: Yes
- 14. If this funding request is approved, do you give NAR permission to share your application, and any outcomes?: No