



**Community Economic Development
Microenterprise Program**
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Nonprofit Business Plan & Eligibility Worksheet

Directions: This form is only used for nonprofit businesses, including those seeking incorporation. To be considered for free legal services, complete this worksheet. It is divided in 2 parts: group eligibility for services and a business plan. If you have a completed business plan for your nonprofit, then **you may skip Part II but must send us a completed plan along with this worksheet.** Note this business plan is an extremely simplified version of the kinds of things to consider before starting a nonprofit. Email your completed worksheet to ced@lsem.org and we will contact you shortly. A paralegal from the program will reach out to you to confirm your eligibility and gather more information related to your legal issues.

I. Group Eligibility for Services

Name of Organization:

What Address Will This Group Operate From?

Contact Person:

Contact Person Email:

Contact Person Address:

Contact Person Phone Number:

May we text this person if the group is approved as a client? Yes No

Nature of Organization: Seeking Incorporation Corporation Unincorporated Association

Tax-Exempt Status: Planning to Apply For Active Application/Received Not interested Unsure

A. Financial Eligibility

Instructions: If incorporated, you must attach a budget or most recent financial statement for your group. Your group must show that it lacks and has no practical means of obtaining, funds to retain private counsel. For organizations not yet incorporated, attaching financial projections is recommended as part of your application.

Please provide the following information:

Approximate annual income:

Approximate annual expenses:

Funds currently budgeted for legal representation:

Cash assets not dedicated to client services:

Prospects for increased or decreased income:

Other considerations:

Source of Financial Data (Provided by officer, taken from annual audit, financial statement, Form 990, Form 1023, etc.):

Does the group lack funds to pay for an attorney? Yes No

If "No" the group is not eligible for our services. You do not need to answer the rest of the worksheet but we can make referrals on your behalf.

If "Yes," the group must answer "Yes" to either question "B" or "C" below.

B. Membership/Board of Directors

Is the group's membership, or if not a membership organization, its operating body, primarily composed of individuals whose household income would be considered low-income (i.e. less than \$80,000 for a family of 4).

Yes No

If "No" go to question "C" below. If "Yes," answer the following questions:

Membership Qualification:

Number of Members:

State financial or other socioeconomic characteristics showing that members may be considered as persons who would be financially-eligible for LSC-funded legal assistance, such as average income or other factors:

C. Delivery of Service

Does the group have as a principal activity the delivery of services to those persons in the community who would be financially eligible for legal assistance and does the assistance sought relate to helping the low-income community in Eastern Missouri? Yes No

If "Yes" answer questions "I," "II" and "III" below:

I. Activities:

II. Indicators that the financial or other socioeconomic characteristics of the persons served are consistent with those of persons who are financially eligible for LSC-funded legal assistance:

III. Indicators that the assistance sought relates to the activities on behalf of eligible persons:

You must attach your group's business plan or complete the next section.

For Internal Use Only: LSC-Eligible? Program-Eligible? Not Eligible for Services?
REVIEWED: _____ Date: _____

II. Nonprofit Business Plan

You **must** answer all the questions below.

1. What are you going to call your nonprofit? Google the name and check the Missouri Secretary of State's website to see if the name has been taken: <https://bsd.sos.mo.gov/BusinessEntity/BESearch.aspx?SearchType=0>
2. Describe the nonprofit's purpose. **Why** does it exist? What need will you be filling for the public?
3. **Whom** will the nonprofit serve? Be specific listing what kind of people will be served (young, elderly, veterans, etc. and where (a city, neighborhood).
4. **How** will the nonprofit will serve these clients? What will you be doing for them?
5. Using your answers to #2-4 and put them together in **1** sentence. This will be the nonprofit's mission statement.
6. Exactly **what** will the nonprofit be doing for them? List only **3 specific** activities or programs the nonprofit will offer. If you have more than 3 activities, it will be hard to focus and get things done. Start small.
7. **Identify** below 3 other organizations/nonprofits/programs/agencies who do this work already. These are your competitors. How will your nonprofit be different? Are they local, regional or national? If other nonprofits are doing the exact same thing, then it will be very hard to get money to operate and be successful due to competition.

8. Describe your plans for the nonprofit. This is called a strategic plan. Be realistic. What do you want the nonprofit to have done in 1 month, 3 months, 6 months, 1 year from now and 3 years from now:
9. Are you willing to work with and accept a board of people who will run the nonprofit with you? If not, seriously rethink starting a nonprofit. If so, name at least 2-4 other people who are board members or you want to invite to be board members. Identify people you know who would have the interest, experience & knowledge that could help your nonprofit. Consider inviting them to be part of your board of directors. The board runs the nonprofit.

Are they related to you? Yes No

10. To do what you want for your nonprofit for the **first** year, list the materials/supplies, licenses, people and space/location the nonprofit will need. You will need to do this for **each** milestone mentioned above. **Be realistic.**
- List the materials/supplies do you need to meet your goal.

 - What types of people do you need to reach the goal at the end of 1 year?

 - What kind of space do you need to meet your goals? How big is it? Where is your ideal location?

11. Looking at #10 above, **list** estimates of how much programs and infrastructure will cost and research what materials, people and space will cost. These are your expenses that will be part of your budget. List the expenses needed to offer the activities/programs. Also include marketing/advertising costs so people will know about the nonprofit.

- Materials/Supplies:

- People (who is necessary/require special knowledge or skill?):

- Space (include licenses to operate and website costs):

12. Looking at #11 above, **list** your sources of income to run the nonprofit: donors & grants. If grants, name which grants your nonprofit could qualify to receive funding. If selling products or services, will it be more than 10% of the total budget?

- Donors:

- Grants:

- Services/Products:

Thank you for completing this form. Email it to ced@lsem.org or send it to our address on the front.