



FOOD BANK
FOR NEW YORK CITY
39 Broadway, 10th Floor
New York, NY 10006
foodbanknyc.org



UNITED WAY
OF NEW YORK CITY
205 East 42nd Street, 12th Fl
New York, NY 10017
unitedwaynyc.org

Online Application Instruction Booklet

Hunger Prevention and Nutrition Assistance Program (HPNAP)

Food and Operations Support Funds

Funding Period: July 1, 2021 – June 30, 2022

Applications must be submitted online by
Friday, June 4th, 2021, 5:00 p.m.

Paper applications will NOT be accepted
Please access the application at www.feednyc.org

Please note: The HPNAP Advisory Committees of the Food Bank for NYC and United Way of NYC will determine all awards based on the submitted application and will notify all applicants of their decisions by July 15th, 2021. In the event your agency is not funded you may appeal the decision within 30 working days from the time of the rejection notice.



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Grant Eligibility:

Food and Operations Support grants are based on need and eligibility. Please ensure that your agency meets the following eligibility criteria:

- ✓ Is an established Soup Kitchen or Food Pantry with existing funding resources, which has been in operation for at least 6 consecutive months (with up-to-date client sign-in records available as of December 1st, 2020), and serves no fewer than 100 people per month.
- ✓ Must provide emergency food services and be open to the general public. Senior centers, day care centers, or other programs that serve only special populations are not eligible for HPNAP funding.
- ✓ Shelters, whether residential or emergency, are not eligible for funding.
- ✓ Has a valid 501(c)(3) tax-exempt status letter from the Internal Revenue Service of the US Treasury Department. Please note, incorporation is not required.
 - ✓ If using a Group Exemption, a site listing is also required to identify that the organization applying for funding is included in the group.
 - ✓ If using a Fiscal Conduit, the following documents are required:
 - Verification of the applying agency's EIN number
 - A letter from the fiscal conduit outlining the relevant dates that their 501(c)(3) status will cover the applying agency
 - The 501(c)(3) tax-exempt status letter from the organization acting as Fiscal Conduit
- ✓ Has a list of current Board of Directors with **individual contact information**

Soup Kitchens ONLY:

- ✓ Has a current New York City Department of Health and Mental Hygiene Food Service Establishment Permit or a copy of the submitted application
- ✓ Soup Kitchens must prepare food on premises. Catered meals are not eligible.

Operations Support Grant ONLY:

- ✓ Must be up-to-date with all reporting requirements for the past 6 years
- ✓ Must provide an active email address where time-sensitive, financial correspondence will be sent
- ✓ Must maintain an organization bank account
 - If multiple EFROs use the same bank account information, they must apply as one Agency, not individually.
 - Personal bank accounts are not eligible

Important Steps Before You Begin

Before starting your application, please gather the following documents and information:

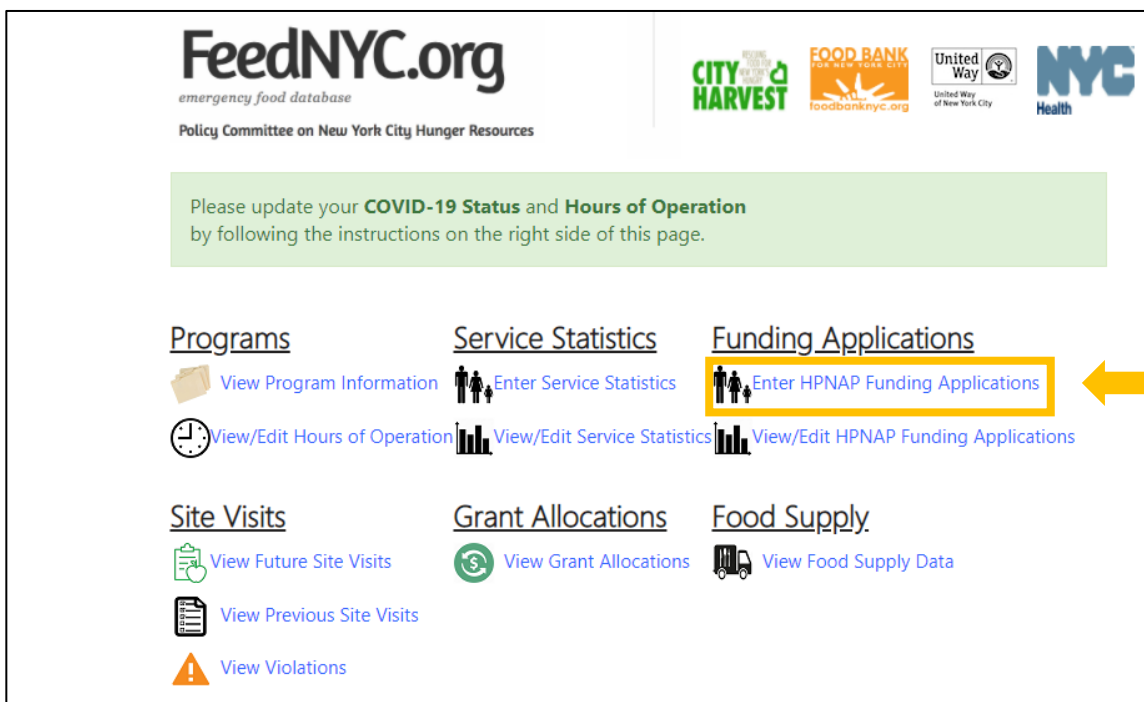
- Email address that can be accessed by the applicant
- Email address of the Executive Director, President or Religious Leader of your organization
- Employer Identification Number (EIN)
- Electronic copy of 501(c)(3), Church listing (for group exemptions)
- Electronic copy of your Board of Directors list with individual contact information
- Electronic copy of your DOH Soup Kitchen permit (if applying for funding for a Soup Kitchen)
- Electronic copy of your Lease agreement (if applying for Operations Support for space costs)

Logging into the Online Application

Please use Chrome, Microsoft Edge, or Firefox web browser to complete your application.

Agencies with Active FeedNYC Accounts:

1. Log in to your agency's FeedNYC portal on feednyc.org.
2. To start a new application, click "**Enter HPNAP Funding Applications**" under the "Funding Applications" heading.





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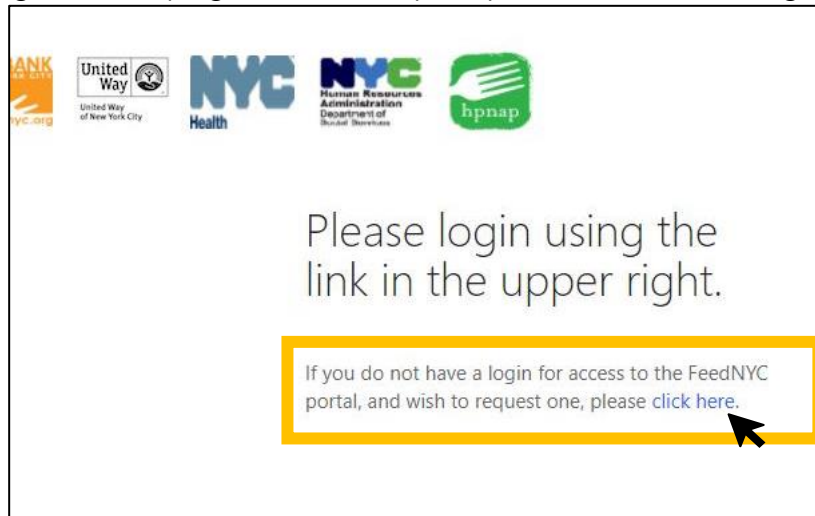


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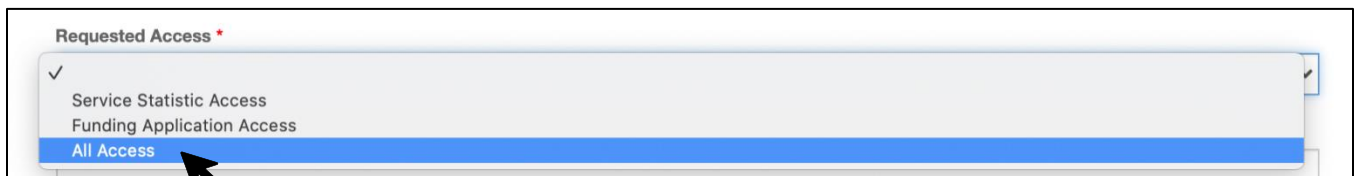
New HPNAP Applicants:

If this is the first time your agency is applying for HPNAP funding, or your agency does not have an active FeedNYC account, you will need to create a FeedNYC login.

1. Go to <https://feednyc.powerappsportals.com/>
2. On the right side of page, where it says “If you do not have a login...,” click the link.



3. Fill out the Portal Access Request Form. Note – you must have access to the e-mail address you provide.
4. Under the “Requested Access” dropdown menu, select “All Access.”

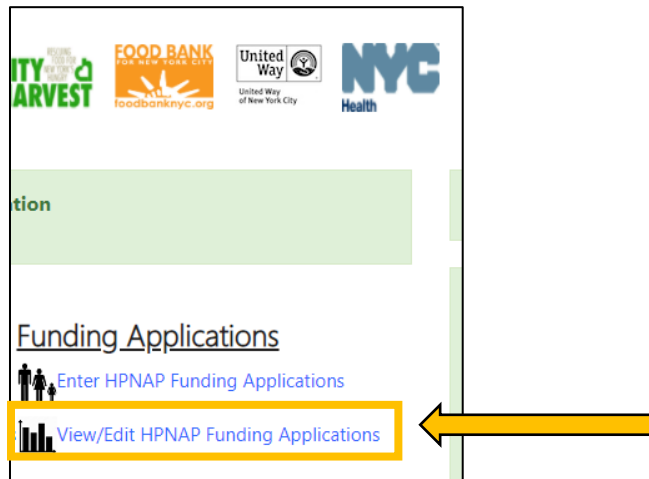


5. When you have completed the form, click “**Submit.**”
6. You will receive an invitation to the e-mail you provided to create a login and password for the FeedNYC portal. Please make sure to check your spam folder if you do not receive it. You may also email (crmadmin@feednyc.org) if you do not receive a response within 8 hours.

Completing the Online Application

Application Overview:

1. The HPNAP application is 6 pages. You must answer every question on a page in order to advance to the next page. You will not be able to skip pages as you are filling out the application.
2. Clicking the **"Next"** button at the bottom of the page will save your work and bring you to the next page. Clicking the **"Previous"** button at the bottom of the page will bring you back to previous page to edit and review.
3. You may return and complete the application at a later time if necessary. To view and edit in-progress applications, click **"View/Edit HPNAP Funding Applications"** under the "Funding Applications" heading in the FeedNYC portal.





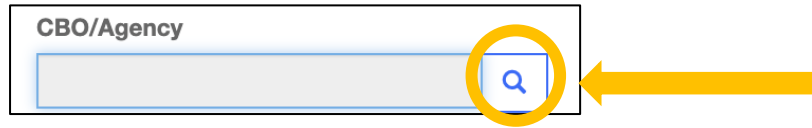
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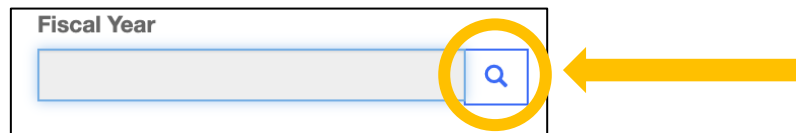
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Application Instructions - Page 1:

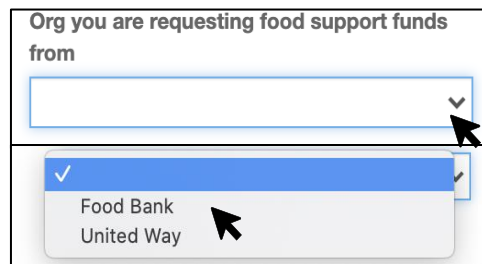
1. To select your CBO/Agency, click the magnifying glass. A pop-up window will appear. Click on your CBO/Agency name and then click "**Select.**"



2. To select the fiscal year, click the magnifying glass. A pop-up window will appear. Click "FY2022" and then click "**Select.**"



3. You must indicate if you are requesting HPNAP funds from Food Bank or United Way. Click the ▼ icon and select your desired HPNAP funder from the dropdown menu.



4. Fill out all the remaining questions on page 1. Click the "**Next**" button at the bottom of the page to save and move on.



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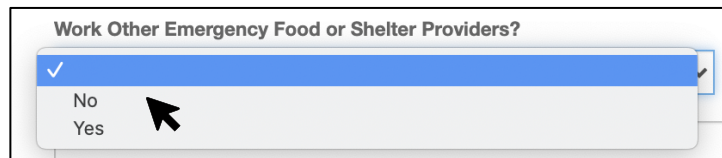
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Application Instructions - Page 2:

1. For question 7A, enter the date your food program started operating in **MM/DD/YYYY** format. If you are unsure of the exact day your program started, put the "01" for day (for example, a program that started in May of 1990, start day unknown, should enter 05/01/1990).
2. Answer all remaining questions on page 2. Click the "**Next**" button at the bottom of the page to save and move on.

Application Instructions - Page 3:

1. Continue filling in application questions on page 3.
2. For question 12H, you must indicate whether or not you partner with other organizations. Click the drop-down menu and select "No" or "Yes."



3. If you select "Yes," for 12H, describe your partnerships in the text box below. If you select "No," **you MUST write "none" in the textbox or you will not be able to advance to page 4.**

Work Other Emergency Food or Shelter Providers?

No

None

Previous Next

Application Instructions - Page 4:

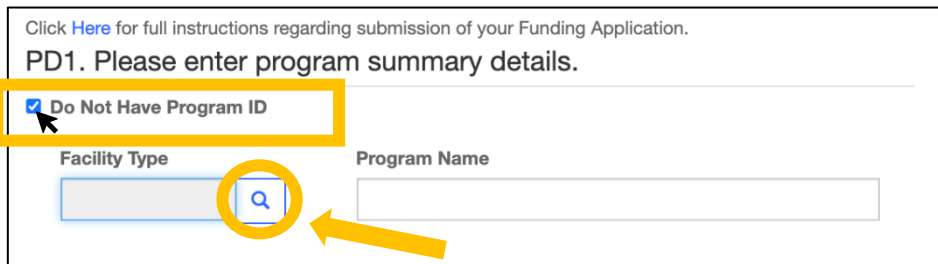
1. Type in the total number of EFROs (Programs) you are applying for and click "Add Program Detail." A pop-up window will appear. The window may need a moment to load.



Total No of EFROs (Programs) you are applying for?
2
Add Program Detail
Name ↑ EFROID (EFP) Facility Type

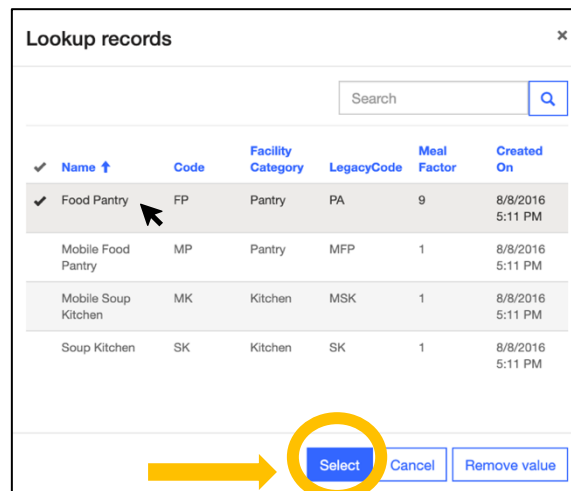
If your program does NOT have an EFROID:

First, click "Do Not Have Program ID" in the pop-up window. Next, under "Facility Type," click the magnifying glass.



Click [Here](#) for full instructions regarding submission of your Funding Application.
PD1. Please enter program summary details.
 Do Not Have Program ID
Facility Type Program Name
[Magnifying Glass Icon]

A pop-up window will appear. Click on an option to indicate if the program is a Food Pantry, Mobile Food Pantry, Soup Kitchen, or Mobile Soup Kitchen, then click "Select."



Lookup records

Search [Magnifying Glass Icon]

✓ Name ↑	Code	Facility Category	LegacyCode	Meal Factor	Created On
✓ Food Pantry	FP	Pantry	PA	9	8/8/2016 5:11 PM
Mobile Food Pantry	MP	Pantry	MFP	1	8/8/2016 5:11 PM
Mobile Soup Kitchen	MK	Kitchen	MSK	1	8/8/2016 5:11 PM
Soup Kitchen	SK	Kitchen	SK	1	8/8/2016 5:11 PM

Select Cancel Remove value

Fill in remaining details in the Program Details pop-up window. Instructions for all programs continue on page 10 of this manual.



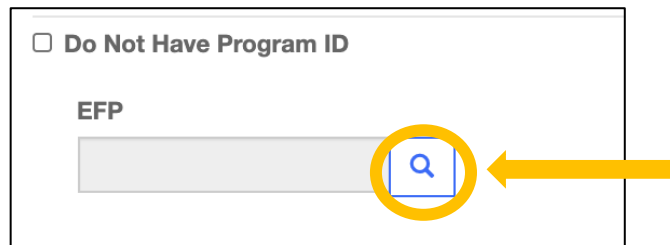
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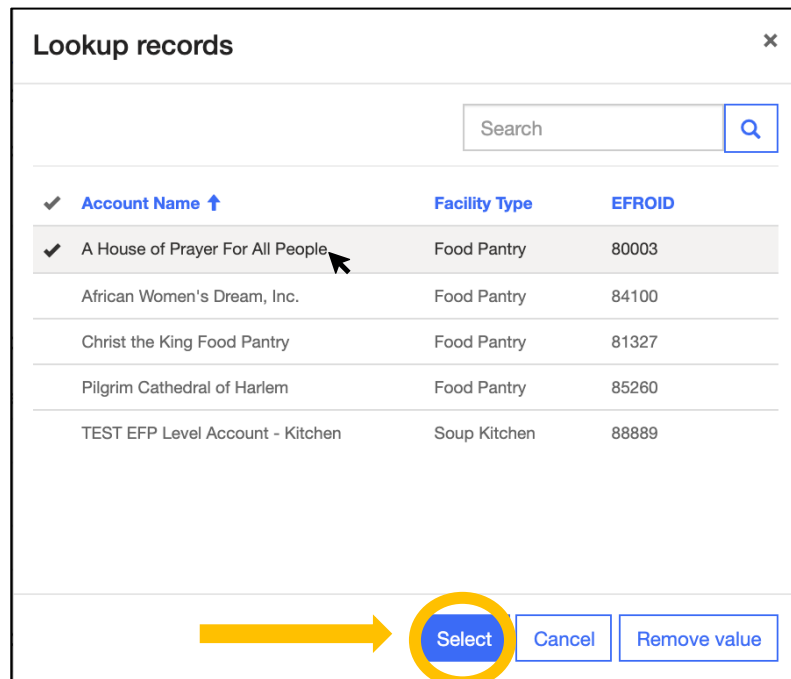
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If your program DOES have an EFROID:

Click the magnifying glass by the EFP field.



A pop-up window will appear listing all EFROs associated with your FeedNYC account. Click on the program for which you are applying, then click **"Select."**



Fill in remaining details in the Program Details pop-up window. Instructions for all programs continue on page 10 of this manual.



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Application Instructions - Page 4, “Program Details” Pop-up Window:

1. Fill in all questions about your food program's operation.

Food Pantries ONLY:

For question PD4, input number of items distributed in a pantry package, or client choice selection, for a family of 2. If you do not distribute by household size (all bags given out are the same), input information for your standard bag. **Note – for any food item not included in your pantry package, put “0.” Do not leave any field empty.** See sample below.

PD4. Based on your last pantry distribution what did a family of two receive?

Fruits and Vegetables

100% fruit/ vegetable juice (46 – 48 oz) <input type="text" value="1"/>	Fresh fruit/vegetables (4 pieces/ 1 head/ 1 pound = 1 item) <input type="text" value="2"/>
Canned fruit/vegetables (15 oz.) <input type="text" value="4"/>	Frozen fruit/vegetables (16 oz.) <input type="text" value="0"/>
Dried fruit (15 oz.) <input type="text" value="0"/>	Other fruit & vegetables <input type="text" value="0"/>
	Other fruit & vegetables quantity <input type="text" value="0"/>

The example above indicates pantry bag includes 1 46-48oz bottle of juice, 4 -15oz cans of fruit/vegetables, and 2 pounds of fresh fruit/vegetables.

2. After all program details are added, click “**Submit.**”
3. Next, scroll down to the bottom of the pop-up window to question PDHO. Click “**Add All Hours of Operations.**” A pop-up window will appear.

PDHO. Please enter all days and hours of operation.

Add All Hours of Operations ←

Frequency of Operation **Day Of Week** **Opening Time** **Closing Time** **Sort Order ↑**



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4. Click each drop-down menu and select your program's frequency of operation, day of week, opening time and closing time. Once all fields are complete, click "**Submit.**" Repeat this process to add multiple days/hours of operation.

General

Frequency of Operation *

Day Of Week *

Opening Time *

Closing Time *

Submit

5. Once all hours of operation have been added, click "**Submit.**"

PDHO. Please enter all days and hours of operation.

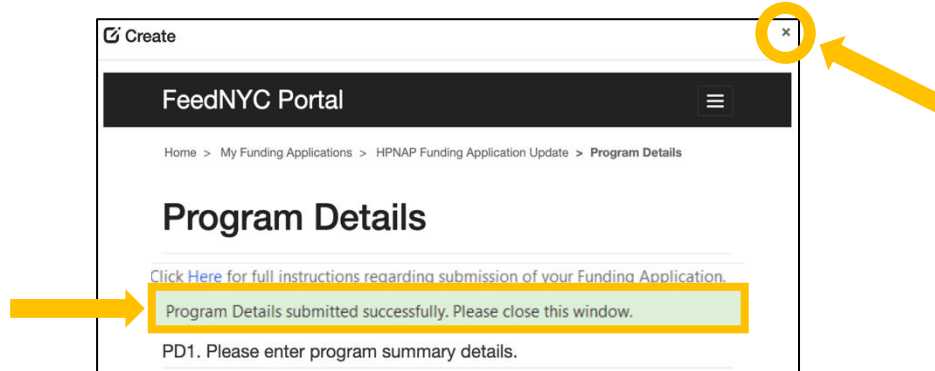
Add All Hours of Operations

Frequency of Operation	Day Of Week	Opening Time	Closing Time	Sort Order ↑
Weekly	Monday	8:00AM	11:00AM	2
Weekly	Wednesday	4:00PM	6:00PM	4

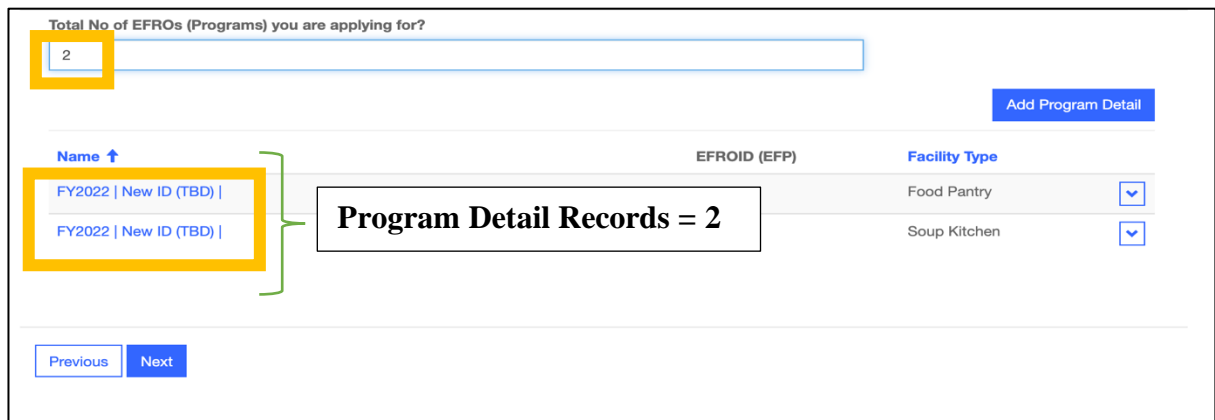
Submit

This will bring you back to the main "Program Details" pop-up window.

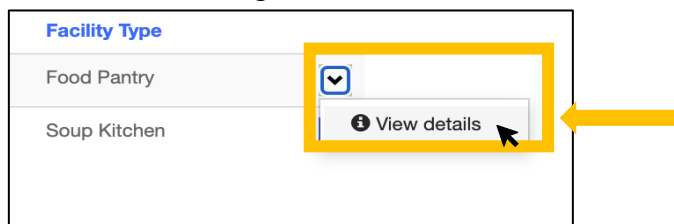
- Review that all information is correct and click “**Submit**” at the bottom of the window. If there are no errors, you will see “Submission completed successfully” at the top of the window. To continue, close the pop-up window by clicking the “X.”



- If you are applying for multiple EFROs (Programs), you will need to repeat this process to create Program Detail Records for each program. The number of Program Detail Records **must be the same** as the number of programs you are applying for.



If necessary, you can edit Program Detail Records by clicking the ▼ icon next to the “Facility Type” field, and then clicking “View Details.”



- Once all Program Detail Records are added, click the “**Next**” button at the bottom of the page to save and move on to page 5.

Application Instructions - Page 5:

1. All applicants must select "Yes" or "No" to receiving Operations Support (OS) on page 5A. If you are requesting OS funds, then you must fully complete page 5B. If you are not requesting OS funds you will be automatically advanced to page 6.

Application Instructions - Page 6:

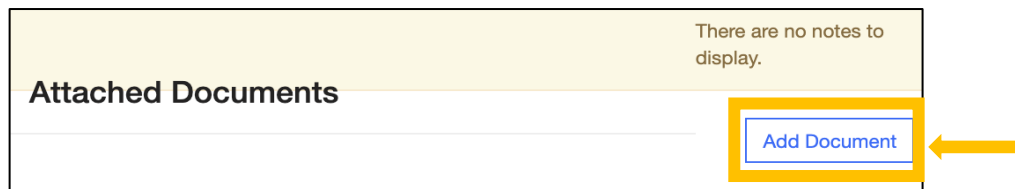
All applicants must submit:

- A current, valid **501(c)(3) form**
- A current list of your **Board of Directors**, including their contact information

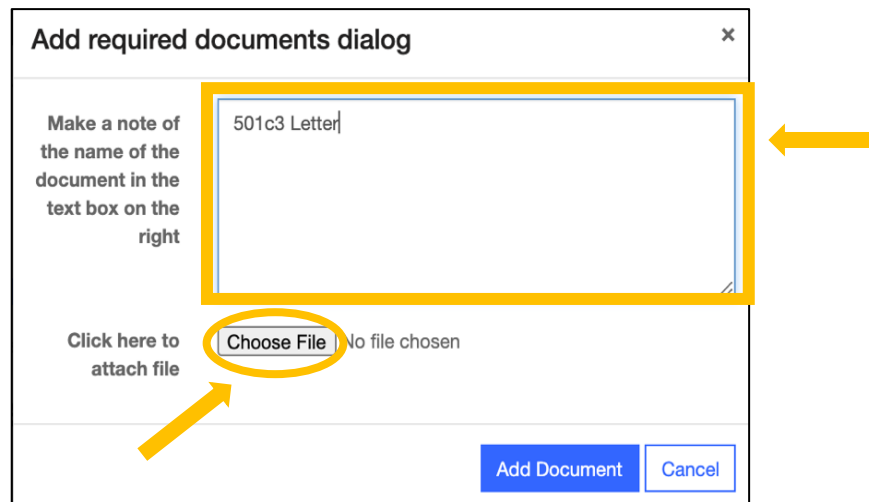
CERTAIN APPLICANTS must submit:

- SOUP KITCHENS must submit a current, valid **NYCDOH Soup Kitchen Permit**.
- OPERATIONS SUPPORT APPLICANTS requesting funds for rent must submit a **lease agreement** for their food storage and/or distribution space.

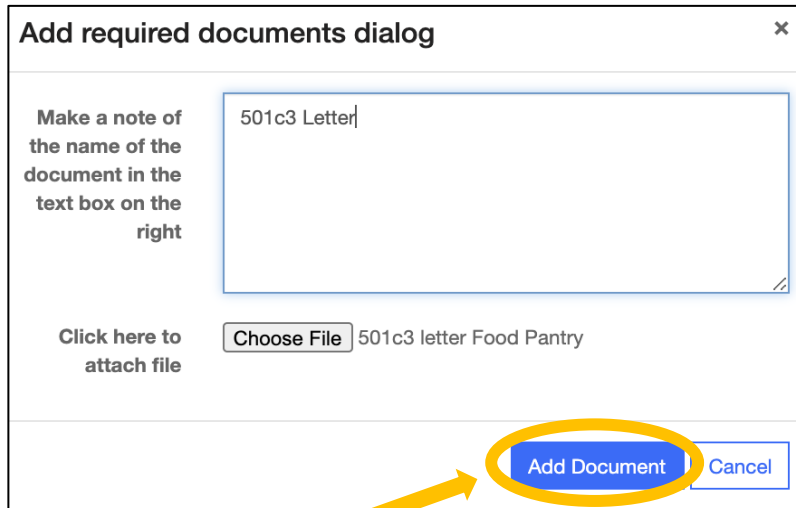
1. To upload required documents, clicking "**Add Document.**" A pop-up window will appear.



2. Type the name of the document in the text box (for example, 501c3 letter). Next, click "**Choose File.**" A pop-up window will appear and allow you to select a file from your computer. Select the file you wish to upload and click "Open."

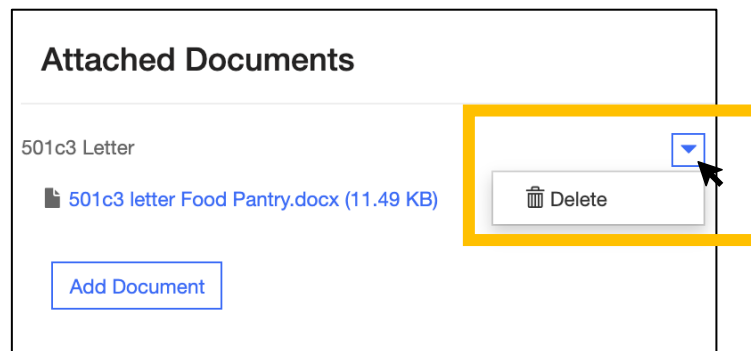


3. Click **"Add Document"** to complete the upload.



4. Repeat this process until all of your required documents are uploaded to the application.

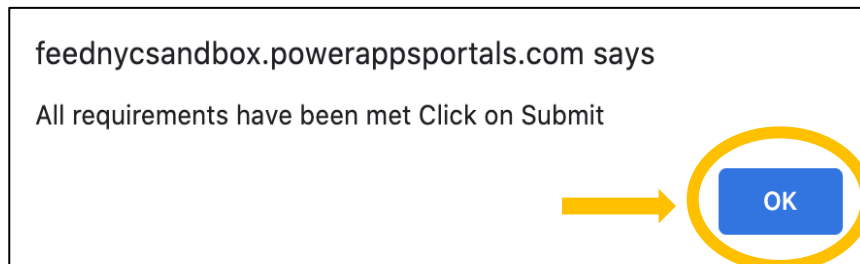
If you need to delete a document, you can click the  icon and select "Delete."



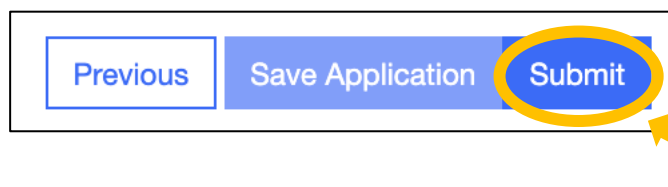
5. Once all required documents are uploaded and you are ready to submit your application, first click **"Save Application"** at the bottom of the page.



6. A pop-up window will confirm if all application requirements have been met. Click "**Okay.**"

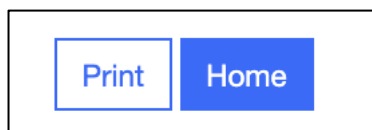


7. Finally, click "**Submit**" to submit your HPNAP application.



This will bring you to a read-only page that will display your fully submitted application.

You may print a copy of the application for your records by clicking "**Print**" at the bottom of the page. Click "**Home**" To return to the "My Funding Applications" page.



Your HPNAP Application is complete!



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Explanation of Funding:

The Hunger Prevention and Nutrition Assistance Program (HPNAP) was founded in 1984 to improve the health and nutrition of the low-income people of New York State. HPNAP is administered by New York State Department of Health. In New York City, HPNAP partners with Food Bank for New York City (FBNYC) and United Way of New York City (UWNYC) to provide funding and other support to enhance the accessibility and availability of nutritious food to low-income New Yorkers through Emergency Food Programs (EFP). Please note that submission of an application does not guarantee funding.

Type of Funding:

Food Support: HPNAP provides food support grants to EFPs through a line of credit. A line of credit, awarded annually, is the value of the grant that an EFP will use to purchase food. Food Support grants are available either through FBNYC or UWNYC. **HPNAP assistance is intended to supplement other resources, it is not intended to provide total food and nutrition needs for the people or agencies it serves.** Please do not apply if you receive HPNAP funds directly from NYS Department of Health, Catholic Charities Community Service Archdiocese, Metropolitan Council on Jewish Poverty, etc.

Operations Support: Operations support (OS) grants are a part of HPNAP funding that provide non-food support to eligible organizations for certain staff, utilities, transportation, food service disposable product, and space expenses. Grants are awarded on a competitive basis, and agencies applying for OS must first be approved for HPNAP Food Support by either FBNYC or UWNYC. The amount of an OS grant award is limited and variable based on annual State budget appropriations.

HPNAP Food Support

You must choose to receive your HPNAP Food Support funding from either Food Bank For New York City or United Way of New York City. Below is a description of how these organizations administer Food Support:

- **Food Bank For New York City:** All food orders are placed and processed directly through Food Bank. Agencies receiving HPNAP Food Support from Food Bank are able to access the HPNAP inventory listings and place orders at any time through an online ordering system. Deliveries to the agencies are free of charge. Food Bank members receive a line of credit to purchase nutritious food from the HPNAP Wholesale inventory. Agencies are strongly recommended to spend three percent (3%) of their Wholesale grant to buy fluid milk that has no more than 1% fat. Agencies also receive a line of credit for the Food Bank's donated inventory. The line of credit covers the shared maintenance fee—to cover storage and distribution of donated items—the food is free. Food Bank distributes produce free of charge to participating programs. This includes both donated and purchased produce. Food Bank provides monthly nutrition education workshops and other valuable training to help enhance the operations of emergency feeding programs.



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- **United Way of New York City:** United Way of NYC (UWNYC) uses a contracted vendor with a full line of food service products. All food orders are placed through this vendor. UWNYC agencies can order as often as needed in amounts over \$300 and orders can be placed until all HPNAP funds have been spent. Food orders may be placed online, by phone or by fax. All food deliveries from the vendor to the agencies are free of charge. UWNYC requests that agencies use at least 15% of their Food Support award on the purchase of fresh produce, unless otherwise indicated, to ensure the provision of fresh, nutritious food. Monthly produce specials are offered for all UWNYC agencies. UWNYC hosts monthly nutrition, food safety and hands-on cooking workshops and onsite nutrition and food safety training is provided to food pantry and soup kitchen staff and volunteers by request.

Compliance Requirement for HPNAP Funding

Each agency receiving HPNAP Food and Operations Support Funds is required to submit a monthly People Served Report, due by the 10th day of each month. All monthly reporting is to be completed online at www.FeedNYC.org.

Online access for monthly reporting can be obtained by contacting UWNYC at 212-251-4022.

Application questions should be directed to the organization that you are requesting food support from:

Food Bank For New York City
HPNAP@foodbanknyc.org
212-566-7855 ext. 1009

United Way of New York City
nhaimson@uwnyc.org 212.251.2419
jfurman@uwnyc.org 212.251.2473
gspadola@uwnyc.org 212.251.4107