EXHIBIT B: PERFORMANCE CAPACITY

**INSTRUCTIONS: Please respond to these performance capacity questions as required by Minnesota Statutes 16B.981 Subd. 2 (1) and as part of the response to this Grant Request for Proposal.**

1. **Describe your history of performing the work that will be funded by the grant or duties similar to those required. Include your organization’s current and past staffing, current and past budget, and administrative and fiscal capacity to successfully conduct and administer grant programming.**
2. **Have you been awarded or have an active grant from the State of Minnesota in the past 5 years?**

[ ]  No

[ ]  Yes

If “yes”, please provide the details of the award amount, the granting agency, the duties, and the outcomes of your grant.

1. **Has your organization previously received grant funding for which you performed similar work in the past 5 years?**

[ ] No

[ ] Yes

If “yes”, please provide the details of the award amount, the granting agency or organization, the duties, and the outcomes of your grant.

1. **Have there been recent changes in your organization’s leadership or financial management systems? If yes, please describe.**

Print Name Signature Title Date