

# MSD Grant Portal Technical User Guide

This technical guide will be broken up into three primary sections:

1. **Initial Account Creation** - How to create a new account and log in
2. **Getting Started** - How to create a new proposal
3. **Submitting a Proposal** – Step by step instructions on submission, including how to return later to edit and submit

For any technical support questions, please contact: [msdsbigrants@benevity.com](mailto:msdsbigrants@benevity.com)

To get started, visit <http://msdgiving.com>



## Welcome to the Office of Social Business Innovation (OSBI) and our company's Foundation Grant Portal

Philanthropy is an important component of our company's commitment to corporate responsibility, and is a visible demonstration of our efforts to improve access to health and to strengthen communities where our employees live and work.

The Office of Social Business Innovation (OSBI) and our company's Foundation provide funds to support eligible 501(c)(3) or other nonprofit organizations, both inside and outside the United States, for philanthropic purposes related to health and community-based charitable programs.

Applications should follow our [Grant Application Guidelines](#). If you are a qualified nonprofit organization and have been invited to submit your application, please review our [Giving Priorities](#) on our website at <https://www.msd.com/company-overview/responsibility/philanthropy/>.

Username (email)	<input type="text"/>	Create an account <input type="button" value="Create"/>
Password (case sensitive)	<input type="password"/>	
<input type="button" value="LOG IN"/> <a href="#">Forgot your Password?</a>		

**NOTE:** Once you have created an account and log in (see next page for account creation details), click “Get Started” and you will select either the “[I have been provided a submission code for my request](#)” or “[I have been invited to apply by a contact at MSD](#)” option. If neither the submission code or contact at MSD apply, select the third option and click “Next”, to be brought to the application:

### MSD Grant Portal

\*Have you been invited to submit an application or provided a submission code?

- ☒ I have been provided a submission code for my request  
☐ I have been invited to apply by a contact at MSD  
☐ I am submitting a new grant without any of the above

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### MSD Grant Portal

\*Have you been invited to submit an application or provided a submission code?

- ☐ I have been provided a submission code for my request  
☒ I have been invited to apply by a contact at MSD  
☐ I am submitting a new grant without any of the above

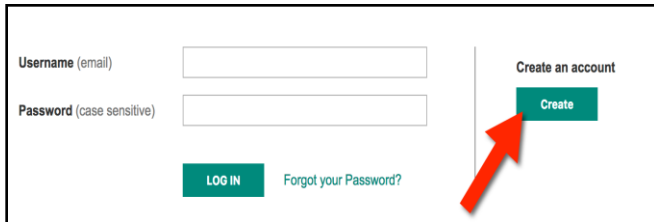
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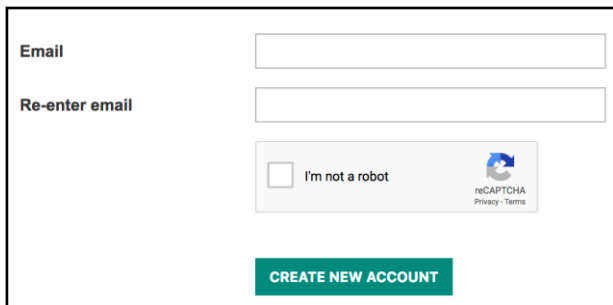
# Initial Account Creation

## Creating a New Account

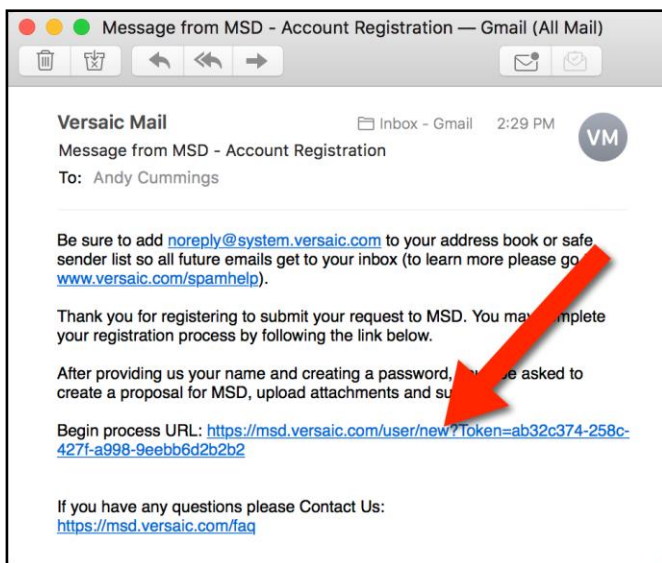
1. Click “Create” in the “Create an account” section to the right on the first page.



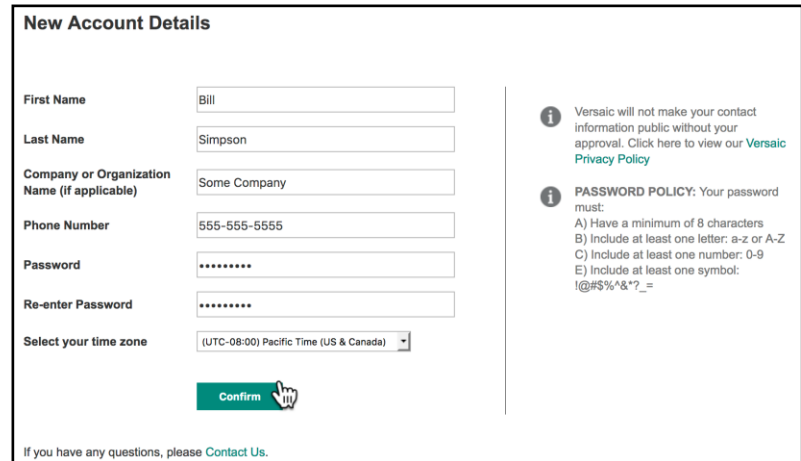
2. Enter your email address twice and check the “not a robot” box, and click “Create New Account”...



3. An email will be sent to your email to complete the account registration. Click the link in the email provided.



4. You will be asked for some basic information, and to create a new password (please note the “Password Policy” to the right.

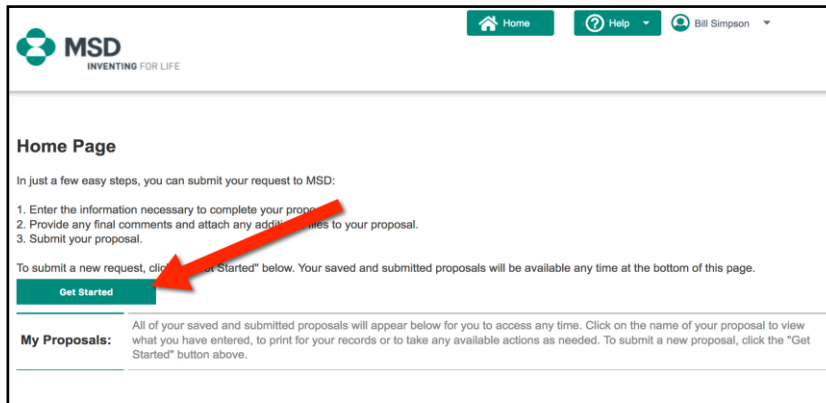


5. Once complete you will be logged in to your Home page with your newly created account. You can now click “Get Started” to create your first Grant Proposal.

You will be able to return to the system and log in with your username (which is your email) and the password you created any time.

# Getting Started

1. To submit a new Proposal, log in to the grant portal and click “Get Started” to begin...



2. You may be asked a few up-front questions to determine the appropriate application type. You will select either the “[I have been provided a submission code for my request](#)” or “[I have been invited to apply by a contact at MSD](#)” option and click “Next”.

MSD Grant Portal

\*Have you been invited to submit an application or provided a submission code?

☒ I have been provided a submission code for my request

☐ I have been invited to apply by a contact at MSD

☐ I am submitting a new grant without any of the above

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MSD Grant Portal

\*Have you been invited to submit an application or provided a submission code?

☐ I have been provided a submission code for my request

☒ I have been invited to apply by a contact at MSD

☐ I am submitting a new grant without any of the above

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3. You will be brought to the first page of the application where you will provide details about your organization and contact information...

## Submitting a Proposal

4. From this point forward, answer all required questions on the page in order to access the next section. Begin by reviewing and agreeing to the terms and conditions.

### (OSBI) Charitable Program

1 | General Info > 2 | Program Overview > 3 | Global Org Info > 4 | Attachments >

#### General Info

\*Grant ID

CCO-22-161397

\*Please read the following Privacy Policies and Terms of Use carefully. It is important that you agree to these terms in order for you to proceed with the funding request.

- Privacy Policies: <http://www.msd.com/privacy/>
- Terms of Use: <http://www.merck.com/policy/terms-of-use/home.html>

☐ I Agree

5. At the bottom of each page click “Next” to continue to the next page (or “Back” to the previous), you can “Save” your work and stay on the current page or “Save & Close” to save and return later. The “Submit” button will appear only when you are finished and can Submit. Clicking “Cancel” will close the application without saving any of your work on the current page.

[<< Back](#)[Next >>](#)[Save](#)[Save & Close](#)[Submit](#)[Cancel](#)

If you have started a proposal but have not submitted it, it will show up on your Home Page like you see below (with the status “Not Completed”). Click on the Proposal Name to view and continue/edit your proposal...

### Home Page

Welcome to the Office of Corporate Responsibility and Foundation Grant Portal

- 1.) Please follow the instructions and prompts to select the correct proposal type for your submission.
- 2.) Enter the information necessary to complete your proposal.
- 3.) Upload all required documentation.
- 4.) Submit your proposal.

To begin a new submission, click on "Get Started" below.

[Get Started](#)

#### My Proposals:

Saved and submitted proposals will appear below for access at any time.  
Click on the name of your proposal to view the entry, print for your records or to take any available actions.  
When submitting a new proposal, click "Duplicate" below to duplicate the contact information and certain other fields from a previously submitted proposal of the same funding type.

#### Notifications

You have a saved but not completed submission "A Test Grant Proposal". Click on the name from the list below to complete.

	Proposal Name	Type	Grant ID	Start Date	End Date	Status	Date Created ▾	
!	<a href="#">A Test Grant Proposal</a>	(OCR) Charitable Program	CCO-18-1006			Not Completed	10/31/2018	<a href="#">Delete</a>

1 of 1 (1 items)



6. Provide answers to all required fields, which are designated with a red asterisk \*. All information needs to be provided in the English language. Begin with the organization information. Please be sure to attach the 501c3 letter from the IRS, as well as the latest W9 form. The W9 form must be signed, dated and a document that is not editable.

Organization (Payee) Information	
<p>The organization and banking information entered below must pertain to the organization that will receive the requested funds should this request be approved by our company.</p> <p>You will be asked to attach proof of Banking Information documentation. The information entered below MUST match the information in the attached documentation. If you make any subsequent changes to the fields below which differ from information in the proof of Banking Information documentation provided, please be sure to update the proof of Banking Information documentation attached below.</p>	
<b>*Organization Legal Name</b> <input type="text"/>	
<b>NOTE: Organization Legal Name above must match the name stated in Box 1 of the W8/W9 form to be attached below.</b>	
<b>*Organization Country:</b> <input type="text" value="Select"/>	<b>*Tax Status</b> <input checked="" type="radio"/> (USA) 501(c) Non-Profit <input type="radio"/> (USA) For Profit
<b>*Organization Address (Line 1):</b> <input type="text"/>	<b>*501c3 IRS Determination Letter (U.S. only)</b> <input type="button" value="Choose file..."/>
<b>Organization Address (Line 2):</b> <input type="text"/>	<b>*Your organization's tax ID or EIN number:</b> Format: XX-XXXXXXX 12-1234567 <input type="text"/>
<b>Organization Address (Line 3):</b> <input type="text"/>	<b>*Attach the W9 Form showing your organization's Legal Name</b> <p>Organizations based inside the United States MUST submit a signed and dated non-editable PDF IRS form W9. The most recent revision of the IRS form, found at the link provided below, must be used - older revisions of the form are not acceptable. No other documents are acceptable substitutes.</p> <p><a href="#">Click here to download the latest W9 form.</a></p> <p><a href="#">Click here for instruction on completing the W9 form.</a></p> <input type="button" value="Choose file..."/>
<b>*Organization City:</b> <input type="text"/>	
<b>*Organization Postal Code:</b> <input type="text"/>	
<b>*Tax Status</b>	
<b>Organization Website URL</b> <input type="text"/>	

7. Next, enter the banking information.

<b>*Name of Bank</b> <input type="text"/>
<b>NOTE: Bank Name (above) and Address (below) must match the name and address stated in the Proof of Banking Information Documentation to be attached below.</b>
<b>*Bank Country</b> <input type="text" value="Select"/>
<b>*Bank Address Line 1</b> <input type="text"/>
<b>Bank Address Line 2</b> <input type="text"/>
<b>Bank Address Line 3</b> <input type="text"/>
<b>*Bank City</b> <input type="text"/>
<b>*Bank Postal Code:</b> <input type="text"/>
<b>*Does the Account Holder name on the Bank Account differ from the Organization Legal Name specified above?</b> <input type="radio"/> Yes, the Account Holder is different from the Organization Legal Name <input type="radio"/> No, the Account Holder is the same as the Organization Legal Name
<b>*Please indicate which you will provide: Bank Account Number or IBAN Number for this Bank?</b> <input type="radio"/> Bank Account Number <input type="radio"/> IBAN Number
<b>*Bank Account Type</b> <input type="radio"/> Checking <input type="radio"/> Saving

**8. Attach proof of banking information.** If using a letter from the bank as verification, the letter from the bank needs to be non-editable and on bank letterhead and signed by bank representative.

**\*Bank Account Type**

☐ Checking

☐ Saving

**\*Attach Proof of Banking Information Documentation.**

Attach one of the following documents:

1. A voided check for the account where funds will be deposited.
2. A signed PDF letter from the banking institution on their letterhead which must contain the following information that matches the account where funds will be deposited:
  - Bank Name,
  - Bank Address,
  - Bank Country,
  - Bank Account Number and Bank Identifier Number (i.e., Routing/Transit/Sort/ABA# –OR– IBAN# and SWIFT code),
  - Account Holder Name.

**9.** Next, enter Primary Contact, Authorized Signer, and highest ranking individual information. Click next to continue.

<h2>Primary Contact Information:</h2> <p><b>*Contact: Salutation</b></p> <p> <input type="radio"/> Dr.    <input type="radio"/> Mrs.  <input type="radio"/> Mr.    <input type="radio"/> Ms.         </p> <p><b>*Contact: First Name</b></p> <input type="text"/>		<p>Name of the person authorized to sign any legal agreements associated with this grant, if approved:</p> <p><b>*Salutation - Authorized Signer</b></p> <p> <input type="radio"/> Dr.    <input type="radio"/> Mrs.  <input type="radio"/> Mr.    <input type="radio"/> Ms.         </p> <p><b>*First Name - Authorized Signer</b></p> <input type="text"/> <p><b>*Middle Name - Authorized Signer</b></p> <input type="text"/> <input type="checkbox"/> No middle name	
<p><b>*Contact: Middle Name</b></p> <input type="text"/> <input type="checkbox"/> No middle name		<p><b>*Last Name (Surname) - Authorized Signer</b></p> <input type="text"/> <p><b>*Job Title - Authorized Signer</b></p> <input type="text"/> <p><b>*Phone Number - Authorized Signer</b></p> <input type="text"/> <p><b>*Email Address - Authorized Signer</b></p> <p>(Please provide the direct email address of this individual such as john.smith@companyname.com. If there is no official email domain for this organization, please provide explanation in next field.)</p> <input type="text"/> <p>If there is no official organization domain for the above email, please provide explanation.</p> <input type="text"/>	
<p><b>*Contact: Last Name (Surname)</b></p> <input type="text"/> <p><b>*Contact: Job Title</b></p> <input type="text"/> <p><b>*Contact: Phone Number</b></p> <input type="text"/> <p><b>*Contact: Email Address</b></p> <input type="text"/>		<p>Name of the highest ranking individual (e.g., President, CEO, Chair) of your organization:</p> <p><b>*First Name - Highest Ranking Individual</b></p> <input type="text"/> <p><b>*Middle Name - Highest Ranking Individual</b></p> <input type="text"/> <input type="checkbox"/> No middle name	
		<p><b>*Last Name (Surname) - Highest Ranking Individual</b></p> <input type="text"/> <p><b>*Job Title - Highest Ranking Individual</b></p> <input type="text"/>	

10. Enter program information. If working with a contact at our company, selecting “Yes” will open a dialog box to enter the name of the individual.

## (OSBI) Charitable Program

1 | General Info   2 | Program Overview   3 | Global Org Info   > 4 | Attachments   >

### Program Overview

\*Program/Event/Activity Title

\*Program Director Name

\*Program Director Email

\*Organization Mission Statement

\*Program/Event/Activity Description

\*Briefly Describe The Population To Be Served

**\*Describe Expected Outcome**

**\*Describe How Your Organization Will Measure Success**

**\*Is this funding being provided to support an event where an elected or appointed federal or state government official will be honored or receive an award?**

- ☐ Yes  
☐ No

**\*Is this funding being provided to support an organization or event that is named for or controlled by an elected or appointed federal or state government official?**

- ☐ Yes  
☐ No

**\*Is this funding being provided to support a Presidential Library foundation or an official Inaugural Committee event?**

- ☐ Yes  
☐ No

**\*Start Date**



**\*End Date**



In the field provided below, please include details for each location that is benefiting from the program. **Please include only up to the 5 primary locations.**

Location(s):

	*Country	City/County/Town	*State/Province/Region
1	Select ▼	<input type="text"/>	Select ▼

 -



**11.** Next, enter information regarding the requested amount, total program costs, total annual operating budget, number of year for the grant to be paid out, and anticipated amount from other supporters. Click next to continue.

**\*Requested Amount**  
Enter in USD. Do not enter "\$".

**\*Total Program/Event/Activity Costs**  
Enter in USD. Do not enter "\$".

**\*Total Annual Budget For Your Organization**  
Enter in USD. Do not enter "\$".

**\*Number of years in which grant will be paid out**

**\*Anticipated Amount From Supporters Other than our company**  
Enter in USD. Do not enter "\$".

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Next >>

Save

Save & Close

Submit

Cancel

**12.** Lastly, upload all required attachments. Please ensure all documents are complete (i.e. Please note that the Board of Trustees list must contain company affiliations for each Board Member. If a Board Member does not have an affiliation, please include a descriptor, such as "retired teacher," "philanthropist," "community volunteer," "former lawyer," etc. to further describe the Member.). Once uploaded, you can click "Submit" to submit your proposal

## Attachments

**\*Proposal (include requested amount in U.S. Dollars)**

**\*Line-item budget - requested program total budget**

**\*Most recently audited financial statement**

**\*Annual Operating Budget**

**\*Current Board of Trustees list with affiliations**

**Prior year Progress Report (if applicable)**

**Additional Document(s)**

Click "**Submit**" below to submit your proposal (once submitted, it cannot be edited). Click "**Save**" to save your work and stay on this page. Click "**Save & Close**" to save and return to your proposal later.

To view your proposal before submitting, [click here](#) (opens in new window). If you need to make any changes, you can click "**Back**" to go back to previous pages.

<< Back

Next >>

Save

Save & Close

Submit

Cancel

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Get Started

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	Proposal Name	Type	Grant ID	Start Date	End Date	Status	Date Created	
	<a href="#">A Test Grant Proposal</a>	(OCR) Charitable Program	CCO-18-1006			Not Completed	10/31/2018	<a href="#">Delete</a>

1 of 1 (1 items)

### Notifications

You have a saved but not completed submission "A Test Grant Proposal". Click on the name from the list below to complete.

Your proposal will open in a new browser window/tab and you can review your work. To continue, mouse over “Required Actions” at the top and click “Continue/Edit Proposal” — you will be brought to the first page where you can continue and submit once ready.

[View Email History](#)

[Print](#)

[Required Actions](#)

## A Test Grant Proposal

[Continue/Edit Proposal](#)

You can review your answers below. If additional actions are required, you will see a “Required Actions” button above. please use the Print button above.

**Status:** Not Completed

**Date:**

Charitable Program Contributions/Donations

### General Info

Grant ID	CCO-18-1006
Please read the following Privacy Policies and Terms of Use carefully. It is important that you agree to these terms in order for you to proceed with the funding request.	I Agree
Organization Legal Name	Tuskegee University - Research Division
Organization Country:	U.S.A.
Organization Address (Line 1):	7815 Woodmont Ave