

# Kane County Bar Foundation Request for Funds

*The Kane County Bar Foundation acknowledges the ever-increasing unfulfilled legal needs of local citizens. In response, each year the Kane County Bar Foundation is proud to be able to offer funds to a variety of agencies serving the legal needs of the residents of Kane County. These funds encourage and reward cooperation and creativity among agencies to develop new and innovative programs and resources to better meet the legal needs of the community.*

## Eligibility to Apply

The Kane County Bar Foundation recognizes non-profit agencies as eligible to apply for this offering. Only one application will be accepted per agency per funding year.

Please email complete application and supporting materials to: [director@kanecountybar.org](mailto:director@kanecountybar.org). If you are not able to submit electronically, please mail to:

Beneficence Committee  
c/o Kane County Bar Foundation  
555 S. Randall Road, Suite 205  
St. Charles, IL 60174

## General Grant Process

- ✓ The full application is due no later than July 1st of each granting year.
- ✓ Grant award funds will be distributed by September 1<sup>st</sup> of the same year.
- ✓ All grant funds must be encumbered or expended by the grantee no later than June 30<sup>th</sup> of the granting year.
- ✓ Applicants must demonstrate outcomes based on community need with supporting reports submitted by May 31<sup>st</sup> of the granting year.

## Review Process

- This is a competitive process.
- The Kane County Bar Foundation Beneficence Committee will review applications and make a recommendation to the full Kane County Bar Foundation Board.
- Final recommendations for funding are made by the Kane County Bar Foundation Board.
- The Kane County Bar Foundation reserves the right to not award any grant funding.

## Selection Process

Selection factors that will be taken into account include:

- Submission by application deadline
- Availability of granting funds

- Applicant's past grant performance
- Extent to which the proposed grant awards represent a reasonable use of the funds
- Possible duplication with government funded initiatives
- Breadth and populous served with grant awards

### **Funding Restrictions**

- Costs incurred prior to July 1<sup>st</sup> of the funding year of the award are ineligible.
- The Kane County Bar Foundation will not award funds for sectarian or religious purposes or to political organizations or campaigns.
- The Kane County Bar Foundation's 501 (c)(3) status is not jeopardized by the applicant's request for funds, receipt or use of the funds.
- Any funds paid to the grantee and not fully encumbered or expended by June 30<sup>th</sup> of the granting year shall be returned to the Kane County Bar Foundation.
- Awarding of the funds does not obligate the Kane County Bar Foundation to provide any additional or future funding for extensions or continuations of the project.

### **Reporting & Accountability**

The successful applicant will be required to submit a final report by May 31<sup>st</sup> of the granting year, outlining in detail what services were rendered, correlating statistics, and how many end users were served with the grant funds.

- Grant recipients must adhere in a timely manner to the reporting requirements herein outlined.
- More frequent reporting may be required at the discretion of the Kane County Bar Foundation Board.
- The Kane County Bar Foundation Board reserves the right to waive and/or amend specific application and/or reporting requirements, dates, and procedures on a case by case basis.
- Failure to comply with the aforementioned reporting and accountability requirements may result in:
  1. Ineligibility for competitive grants for one year, and
  2. The return of grant monies in full or in part.

### **Questions**

Contact:

Kane County Bar Foundation  
C/o Jan Wade  
P.O. Box 571  
Geneva IL 60134  
[director@kanecountybar.org](mailto:director@kanecountybar.org)

# Kane County Bar Foundation Request for Funds

Name of Applicant/Organization:

Name \_\_\_\_\_ Date of Incorporation \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State / Zip \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_ E-mail \_\_\_\_\_

Name of Executive Director \_\_\_\_\_ Telephone \_\_\_\_\_

Name / Title of Contact Person \_\_\_\_\_ Telephone \_\_\_\_\_

Name(s) of any Partnering Agencies \_\_\_\_\_

Amount Requested \$ \_\_\_\_\_

Grant request is for

- Existing Program  
In an attachment please supply title of project, initial inception date and statistics illustrating the need for its continued funding
- New Program (title) \_\_\_\_\_
- Other \_\_\_\_\_

Which of the following match the criteria of your grant request?

- Publish and distribute literary works on the law
- Promote the understanding of the law and to assist in legal education to the general public
- Form partnerships among local agencies, legal professionals, and / or the court system to improve and facilitate the administration of justice.
- Promote a greater awareness by Kane County citizens of how local legal professionals donate time, expertise, and funding to their community.

Is this the organization's first application for a Kane County Bar Foundation Grant?

- Yes
- No  
Dates and amounts of prior grant applications and funds received, if any.  
\_\_\_\_\_

Has the organization sought other grants for this project?

- No
- Yes  
Name, date and funds requested \_\_\_\_\_

## Proposal Narrative

Please provide the following information in this order

- A. Your organization's mission, history, overall goals and / or objectives. (A copy of the organizations most current annual report will fulfill this request)
- B. A copy of letter or certificate from the Internal Revenue Service indicating 501(c) (3) and / or 170 (b)(1)(A) tax status.
- C. A copy of your AG990-IL Report and/or "Return of Organizations Exempt from Income Tax" IRS Form 990.
- D. Identify the population your organization serves
- E. Provide the community needs or problems that this effort will address, including population served. Include goals and objectives, timetables, any program partners, and how the project will be supported after termination of the grant.
- F. Explain how you will measure the effectiveness of your activities, the results you expect to achieve by the end of the funding period, and your criteria for success

### **Proposed Project Budget Instructions**

Complete the Budget Chart. Attach a Budget Narrative describing the budget item amounts. Justify the value of the budgeted items by relating them to project activities, and show how the costs were determined. Include a list of equipment and describe contracts. Specific names of individuals or brand names of equipment in the explanation are not needed.

### **Proposed Project Budget Chart**

<i><b>BUDGET CATEGORY</b></i>	<i><b>EXPLANATION</b></i>	<i><b>AMOUNT</b></i>
Public Relations	Advertising	\$
Supplies, Postage and Printing		\$
Capital Outlay	Equipment valued over \$500	\$
Professional Contracts	Hiring an individual on contract	\$
Contractual Services	Hiring an agency on contract	\$
Personnel	Salaries and benefits for additional staff	\$
Location rental fees	Rental fees for meeting / program locations	\$
Phones and telecommunications	Phone charges and rental	\$
Equipment rental, repair and maintenance	Rental, repair, insurance and maintenance of equipment	\$
Other		\$