2025 Arts DuPage - Sustain Grant

DuPage Foundation

Basic Information

Project Name*

Provide a brief name for your project.

Character Limit: 100

Purpose*

Briefly describe the purpose of your request - **Example: To support (name or type of program) that will (what the project will ultimately do).**

Character Limit: 200

Type of Funding*

Specify the type of funding you are requesting.

Choices

Equipment/Supplies
General Operating
Program Support
Salary Support

Population Served*

Which population best describes those who will be served by this program/project?

Choices

Adults
Animals
Children/Youth
Disabled-Developmental
Disabled-Physical
Families
General Public
Immigrants
Incarcerated Adults
Incarcerated Juveniles
Infants/Toddlers
LGBTQ
Low-Income
People of Color
Seniors
Veterans
Women

Program/Project Cost*
What is the total cost of the program/project for which you are applying?

Character Limit: 20

Grant Amount Requested*
What amount is requested from DuPage Foundation?
If the amount requested is over $5,000 fill out the questions in the "Requests Over $5,000" section.

Character Limit: 20

Application Narrative

Organization Description*
What is the overall purpose or mission of your organization? Include a brief history, the date established, and the date 501(c)(3) status was granted.

Character Limit: 2500

Operations*
Describe anything significant that occurred within your organization this year that has impacted your operations.

Character Limit: 2000

Program/Project Description*
Describe the program/project to be funded.

Character Limit: 1500

Fund Allocation*
Provide specific detail as to how the funds will be allocated. Total should equal the amount for which you are applying.

Character Limit: 500

Grant Timeline*
The grant period for a 2025 Arts DuPage grant is December 1, 2025 to November 1, 2026. What is the timeframe for utilizing grant funds to support the proposed project or event? Include any relevant event dates or program activities.

Character Limit: 1000

Participant Costs*
Will attendees be required to pay fees to participate (e.g. admission, tuition, donation, etc.)? If so, what is the total estimated revenue?

Character Limit: 500

Past Grants*

Has DuPage Foundation previously funded this program/project?

Choices
Yes
No

Illinois Arts Council*

Has your organization received notification that you will receive 2026 funding from Illinois Arts Council?
Check all that apply:

Choices
Support for this Project/Program
Support for Another Project/Program
General Operating
N/A

Alignment with Arts DuPage*

Describe how this program aligns with the Arts DuPage grant priorities: *Primarily supports programs and projects that offer broad access, outreach and/or unique opportunities to enrich arts and cultural experiences for DuPage County residents.*

Character Limit: 1000

Arts DuPage Membership*

Is your organization a member of Arts DuPage?

Choices
Yes
No

Event Posting*

Does your organization regularly post events on artsdupage.org?

Choices
Yes
No

Arts DuPage Member*

If your organization is not a member of Arts DuPage or does not post events on artsdupage.org, please explain why

Character Limit: 500

Impact

Impact - Organization*
What percent of the population served by your **organization** are DuPage residents?

Character Limit: 3

Impact - Project/Program*
What percent of the population served by this **program/project** are DuPage residents?

Character Limit: 3

Individuals Impacted with Grant*
Approximately how many individuals do you anticipate being served with these grant funds? This should be the amount served with the dollar amount for which you are applying and not the total number you anticipate serving within the whole program.

Character Limit: 7

Individuals Impacted with Grant - Description*
Provide a short description of how you came up with the number you estimate will be served.

Character Limit: 500

Impact - Total Program*
Approximately how many individuals do you anticipate being served within the whole program.

Character Limit: 7

Impact - Low-Income*
In what ways does your organization provide opportunities for low-income individuals/families?

Character Limit: 500

Communities*
What specific community or communities will benefit from this program/project? (Cities, towns, villages)

Character Limit: 750

Demographics
Provide the estimated demographic distribution expected to be served with this grant. Responses must add up to 100%. Enter 0 in any fields that do not apply.

Demographic Group	Percentage
Caucasian	

African-American	
Latino/Hispanic	
Asian	
American Indian or Alaskan Native	
Middle Eastern-North African	
Other	
Total	

Board, Staff & Volunteers

Board Members*

Enter or upload a list of your board members with their city and state of residency.

Character Limit: 2000 | File Size Limit: 1 MB

What percentage of your board of directors supported the organization with a personal financial gift this past fiscal year? If not 100%, please explain.*

Character Limit: 1000

What percentage of your most recent fiscal year income was the result of personal financial gifts from your board?

*

Character Limit: 250

Staff*

Enter or upload a list of management and pertinent staff members.

Character Limit: 1000 | File Size Limit: 1 MB

Volunteers

Briefly describe how volunteers (including board and committee members) actively contribute to the overall work of your organization.

Character Limit: 1000

Requests Over $5,000

This section is required for grant requests greater than $5,000

Collaboration*

What other organizations or entities are you working with on this program/project? Describe partnerships and activities.

Character Limit: 1500

Sustainability*

Is this a new, continuing or one-time program/project?

Choices
New
Continuing
One-time

Specify other funding sources or steps you have already taken to get additional funding to support it.*

Character Limit: 1000

What are your plans for fully funding and sustaining this program/project?*

Character Limit: 1000

Outcome Measures Table*

Please download the <u>Outcome Measures Table</u>. You will need to complete and save the Outcome Measures Table before uploading it below.

File Size Limit: 1 MB

Financial Indicators Form*

Please download the <u>Financial Indicators Form</u>. You will need to complete and save the form before uploading it below.

File Size Limit: 1 MB

Did your organization receive a 2024 Arts DuPage grant?*

Note: If yes, answer the questions in the "Progress Report" section.

Choices

Yes
No

Progress Report

Please note that final reports are due by the following dates:

- **May 1, 2025** for health and human services grants
- **November 1, 2025** for arts, education, environment and animal welfare grants.

The final report is available under the Follow-up section in your 2024 application.

If you have already submitted your final report, please copy your answers into the progress report below.

Program/Project Progress*

Describe how the funded project/program has progressed to date.

Character Limit: 1500 | File Size Limit: 2 MB

Impact*

1. Describe the impact the project has had on those served.
2. How many individuals have been served to date?

Character Limit: 2000

Problems/Benefits/Lessons Learned*

Describe any problems you've encountered, unexpected benefits realized or lessons learned to date.

Character Limit: 1000

Attachments

Program/Project Budget*

Submit a program/project budget that includes revenue and expenses for the **entire program/project**. Included project expenses should equal the amount listed in "Total Project Cost" provided at the beginning of the application.

File Size Limit: 1 MB

Current Fiscal Year Operating Budget*

Submit a current fiscal year operating budget.

File Size Limit: 1 MB

990 Form*

Upload your most recent IRS 990 or 990-EZ.

File Size Limit: 9 MB

Audited Financial Statement*

Upload your organization's most recent audited financial statement. If you do not have an audited financial statement, provide a brief explanation as to why your organization does not have one.

Character Limit: 500 | File Size Limit: 6 MB

Additional Attachment (Optional)

If there is information related to your request that you feel is important for the Foundation to know but that you were not able to present in this application, you may describe or upload it here

Character Limit: 1000 | File Size Limit: 2 MB

Electronic Signature

Electronic Signature*

Prior to the release of any grant monies, a grant recipient will be required to sign a grant agreement to use funds for the sole purpose stated in the application form. Failure to comply with the terms of the grant agreement will jeopardize any future grants from the DuPage Foundation.

Enter your full name, business title and the date of submission. (e.g.: Erin Smith, Executive Director, March 1, 2025)

Character Limit: 250

Consent*

As part of our grant process, we share applications that we receive with donor-advisors and a few trusted donors who have expressed an interest in learning more about a specific organization and/or a specific request. Do you provide consent for us to share your application?

Choices

Yes
No

By entering your information above and clicking "I agree" below, you are certifying that:

1. the information contained in this application is true and correct.
2. the proposed program/project has been adopted by your organization as a part of its plan of work.

3. you are duly authorized to submit this application, or you have uploaded a signature page of someone who is duly authorized to submit this application on behalf of your organization.

Your completion of this section constitutes an electronic signature.*

Choices
I agree
I do not agree