



POLICIES AND INSTRUCTIONS REGULATING GRANT REQUESTS 2012

The quality of a child's tomorrow depends to a large extent on the child's health, medical treatment, and the wellness support the child receives today. If children are to thrive in our uncertain times and exercise thoughtful citizenship as adults, they must be equipped with the possibility for emotional, mental and physical well-being.

When children's families are unable to provide the funding for this well-being, Kosair Charities gives the financial support so that these children do not suffer and are not neglected.

Grants will only be made to those non-profit agencies and organizations whose program falls within the above stated mission. Grants are made for one year only and do not represent any future commitment on the part of Kosair Charities.

One fourth of grant funds will be distributed at the end of each quarter on a reimbursement basis. Each recipient must furnish to the Kosair Charities office at the **end of each quarter, a detailed accounting of how the money was spent** before reimbursement will occur.

In your grant application, the following information is needed:

1. Describe in detail the project for which the grant is sought, establishing the fact that it will provide either a new service or facility, or an expansion of an existing service. Also include the number of children to be served and how they will benefit.
2. Submit a detailed budget on one year's operating cost for the project, specifying all sources of income, including the request of Kosair Charities.
3. If the project involves activities continuing beyond one year, the agency must indicate how it would continue the program after Kosair Charities one year grant.
4. If the project involves medical services, the agency must furnish professional, scientific or medical opinions supporting its merits and needs.

5. The agency must submit a brief sketch of the educational background and specialized training of the teachers, aides and other persons involved, in the program for which the request is made.
6. Each grantee for the 2012-2013 grant is requested to follow the Better Business Bureau's Charity Review Standards. The Better Business Bureau Charity Review information and implementation instructions can be found at: <http://louisville.bbb.org/SitePage.aspx?id=1bce9b1f-74e9-4c94-96e8-1ee2b519b0c4>. **Kosair Charities suggest that organizations desiring to apply for grants comply and complete the Better Business Bureau application before March 26, 2012 (to allow for acceptance process before the April 25, 2012 deadline).** Please note that 2012-2013 applications will not be mailed. Visit our website www.kosair.org, under *About Us, Grants*, for more information.

***All University of Louisville grant applications must be approved, prioritized and signed by the Executive Vice President of Health Affairs, University of Louisville.**

Grant recipients are required to use the Kosair Charities Supported Agency logo on all printed and electronic materials and media used by their agency, including but not limited to letterheads, newsletters, solicitation letters, television commercials and websites.

1.



GRANT APPLICATION FOR MORE THAN \$1,500

Deadline: Wednesday, April 25, 2012

Date: _____

1. Name of organization: _____

2. Address: _____

City: _____ State: _____ Zip: _____

3. Exe. Director or CEO: _____ Title: _____

Phone: _____ Email: _____

GENERAL INFORMATION

4. If incorporated, in what state: _____

5. IRS 501(c)3 exemption (Y/N) _____ Number: _____
If not 501(c) 3, under what IRS tax exempt status do you operate?

6. Amount requested: \$ _____

7. Purpose of organization: _____

8. Purpose of proposed project: _____

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9. Please list below the agencies that fund you and the percentage of your financial statement covered by each:

_____ %

_____ %

_____ %

Do you conduct a fund-raising drive? Yes ___ No ___

Are you a part of a national organization? Yes ___ No ___

Do you contribute to a national organization? Yes ___ No ___

How much: _____

10. Percent of your budget used for fund-raising expense: _____ %
11. Percent of your budget used for administrative cost: _____ %
12. Agency complies with Better Business Charity Review Standards? Yes ___ No ___

ORGANIZATION PERSONNEL

13. Number of Board of Directors: _____
(Please attach list of Board of Directors)
14. How often does the Board meet? _____
15. Total number of identified volunteers: _____
16. Total number of paid staff: _____

GRANT PROPOSAL

Submitted by:

Name (Print)

Title

Signature

17. On no more than two (2) pages, summarize your proposal including project goals and objectives.
18. On no more than one (1) page, present a detailed budget narrative for the funds requested.
19. How will your program, if funded, be evaluated? On no more than one (1) page, submit a detailed plan for self evaluation of your program.

ATTACHMENTS

1. Copy of IRS determination letter.
2. Current year's budget
3. Income and expense statement last two years.
4. Balance sheet statement for past 2 years including endowment/investments.
5. Copy of last completed audit
6. Copy of roster of Board of Directors
7. Descriptive literature on agency and its services.
8. If the proposal is for an existing or continuing program, submit latest self-evaluation of program.
9. If the proposal is for one that Kosair Charities has funded in the past, demonstrate use of Kosair Charities Supported Agency Logo and public acknowledgements.
10. Detailed proposal budget.
11. **Original grant application plus nine (9) copies (10 Total copies of all requested information.)**

RETURN

**Kosair Charities, Inc.
Attn: Grants Committee
982 Eastern Parkway
P.O. Box 37370
Louisville, KY 40233
Telephone: (502) 637-7696
Fax: (502) 637-7698**

All applications submitted by mail must be mailed to the P. O. Box.