



John C. Bock Foundation

Submit application to:
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Email: Patricia.Marx@quarles.com

Dedicated to the Preservation of Old-Growth Forest

2021 GRANT APPLICATION

1. Organization Name: _____
2. Address: _____
3. City, State, Zip Code: _____
4. Contact Name/Title: _____
5. Phone Number: _____
6. Contact's Email: _____
7. Name/Title of Chief Executive of the Organization: _____
8. Email Address of Chief Executive of the Organization: _____
9. Project Budget: \$ _____
10. Amount Requested: \$ _____
11. Project Title: _____
12. Project Timeframe: from _____ to _____
13. Does your Organization have a determination letter from the IRS stating that it is described in section 501(c)(3)?

Yes No

- a. If so, please indicate the public charity/foundation status reflected in your Organization's determination letter by checking the appropriate box below:

<input type="checkbox"/> 170(b)(1)(A)(i)	<input type="checkbox"/> 170(b)(1)(A)(v)
<input type="checkbox"/> 170(b)(1)(A)(ii)	<input type="checkbox"/> 170(b)(1)(A)(vi)
<input type="checkbox"/> 170(b)(1)(A)(iii)	<input type="checkbox"/> 509(a)(1)
<input type="checkbox"/> 170(b)(1)(A)(iv)	<input type="checkbox"/> 509(a)(2)
<input type="checkbox"/> 509(a) private foundation	<input type="checkbox"/> Other: _____

- b. **Please submit a copy of your Organization's IRS Determination Letter with this Application.**

ORGANIZATION BACKGROUND

1. Describe the Organization's history, overall goals, and objectives:

2. Describe the Organization's current programs and activities:

3. Describe any formal and informal relationships the Organization has with other organizations:

4. Summarize the Organization's mission:

5. Provide the name of, and amount contributed by, each of the Organization's 5 largest funders during the Organization's most recently completed fiscal year:

<u>NAME</u>	<u>AMOUNT</u>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

6. Organizational Budget (**last** fiscal year): Revenue \$_____ Expenses \$_____

7. Organizational Budget (**current** fiscal year): Revenue \$_____ Expenses \$_____

PROPOSED PROJECT

1. Summarize the purpose of the Organization's request (*attach additional pages if necessary*):

2. Project Budget: \$ _____

3. Timeframe in which the Funds will be used: from _____ to _____

4. Describe the Organization's other sources of funding for the proposed project:

PROJECT EVALUATION

1. Explain how the Organization will measure the effectiveness of its activities for the proposed project:
2. Describe the Organization's criteria for assessing the success of the proposed project:
3. Describe the results the Organization expects to have achieved by the end of the funding period:

ATTACHMENTS

Please submit the documents listed below with this Application. If your Organization is unable to submit one or more of these documents, please explain why. Please check the box next to each document that your Organization is submitting with this Application.

- A **signed** copy of the Organization's most recently filed Form 990, 990-PF, or 990-EZ (or a confirmation that the Organization filed Form 990-N, if applicable)

- A copy of the Organization's IRS Determination Letter

- A Letter of Good Standing from the state in which the Organization is incorporated/organized (or a screenshot of the state's webpage confirming that the Organization is in good standing), dated no more than three (3) months prior to the date on which this Application is signed

CERTIFICATION

I hereby certify that I am authorized to represent the Organization with respect to this Application and that the information set forth in this Application is true and correct to the best of my knowledge.

Signature of Authorized Representative of Organization: _____

Name and Title: _____

Date: _____