

RESOLUTION NO. T-2017-11-008R

**A RESOLUTION APPROVING AND AUTHORIZING AN AGREEMENT
CONCERNING THE DISPOSITION AND USE OF FUNDS DISBURSED THROUGH
THE CUNNINGHAM TOWNSHIP FISCAL YEAR 2017-2018
(CU Men's Emergency Shelter FY 2017-2018)**

WHEREAS, The Township Board of Cunningham Township, Urbana, Illinois, has found and determined that execution of the attached recipient agreement is desirable and necessary to carry out one of the purposes of Cunningham Township, to address homelessness.

NOW, THEREFORE, BE IT RESOLVED BY THE TOWNSHIP BOARD OF CUNNINGHAM TOWNSHIP, URBANA, ILLINOIS, as follows:

Section 1. That the Cunningham Township Board hereby approves the attached recipient agreement in substantially the same form as attached hereto.

Section 2. That an Agreement providing \$12,500 for the funding of a Men's Emergency Shelter, between Cunningham Township and CU Men's Emergency Shelter, in substantially the form of the copy of said Agreement attached hereto and hereby incorporated by reference, be and the same is hereby authorized and approved.

Section 3. That the Township Supervisor of Cunningham Township, Urbana, Illinois, be and the same is hereby authorized to execute and deliver and the Township Clerk of Cunningham Township, Urbana, Illinois, be and the same is authorized to attest to said execution of said Agreement as so authorized and approved for and on behalf of the Cunningham Township, Urbana, Illinois.

APPROVED BY THE TOWNSHIP BOARD OF THE TOWN OF CUNNINGHAM, Champaign County, Illinois, on this 6th day of November 2017.

Charles A. Smyth, Township Clerk

Diane Wolfe Marlin, Chair

**CUNNINGHAM TOWNSHIP
SOCIAL SERVICE PROGRAM
FY 2017-2018 – Mid-year grant**

A. AGENCY INFORMATION

1.	Applicant Organization/Legal Name:	CU Men's Emergency Shelter
2.	Program to be Funded:	Men's Emergency Shelter Program
3.	Amount Requested:	\$12,500
4.	Contact Person & Title:	Sheryl Palmer, Senior Pastor
5.	Address:	1719 S. Prospect Ave.; Champaign, IL 61820
6.	Telephone No:	217-359-3631
7.	FAX No:	217-359-7826
8.	E-mail Address:	sheryl@champaignfaith.org
9.	Year Established / Incorporated:	2017
10.	Fiscal Year of Agency:	Year ends April 30, 2018
11.	Funding History:	a. <input type="checkbox"/> Funded in FY 16-17 <input type="checkbox"/> Not Funded in FY 16-17 b. <input type="checkbox"/> Funded in Year: _____ <input checked="" type="checkbox"/> Never Applied for Funding

AGENCIES MUST ATTACH THE FOLLOWING REQUIRED INFORMATION

<input checked="" type="checkbox"/>	Agency Mission Statement / Purpose (See Attachment A)
<input checked="" type="checkbox"/>	List of Agency Board Members/Officers (See Attachment A)
<input checked="" type="checkbox"/>	Copy of Agency Board Meeting Minutes Authorizing Grant
<input checked="" type="checkbox"/>	Actual Agency and/or Program Budget for last fiscal year (FY16-17) (See Attachment A)
<input checked="" type="checkbox"/>	A Preliminary Agency and/or Program Budget for current fiscal year (FY 17-18)
<input checked="" type="checkbox"/>	All Agency and/or Program Staff positions by job title, # in each position, & current annual salary amount range (See Attachment A)
<input checked="" type="checkbox"/>	Internal Revenue Service Department of the Treasury: Tax Exemption Letter / Proof of 501 (c)(3) status
<input checked="" type="checkbox"/>	Illinois Department of Revenue Tax Exemption Letter: FEIN Number

B. PROGRAM INFORMATION

B1. Describe **in detail** the program you are requesting to be funded:

The C-U Men's Shelter is a community collaboration to provide emergency shelter for men during the winter. Each night from November 20 through April 14, we will open a homeless shelter from 9:30pm to 6:30am. This shelter will be located at New Covenant Fellowship (124 W. White St. in Champaign) and administered by Faith United Methodist Church.

Each night, the doors will open at 9:30pm, and men will be welcomed in. The capacity of the shelter is 30 men per night, and it will be overseen by a total of five staff persons. Our staff has experience and training in working with our neighbors who are struggling with homelessness, and the aim will be to provide a safe, warm space where men may stay during the coldest months of the year.

B2. Program is a: New Program Continuation of Existing Program, started: _____

o If continuation of existing program, describe in narrative the quantifiable increase anticipated in service level:

B3. Identify the number of recipients your program has the capacity to serve: 30/night _____

o Identify the actual total number of persons you are currently serving:

Last year, the shelter served 22 men/night and 111 unique individuals. However, last year's shelter rotated between two locations, and we expect that our numbers will increase with this year's shelter being at a fixed location that is more centrally located. Thus, we estimate 25-30/night this year, and perhaps 125 unique individuals.

o Of the total number served, identify the number of persons from Urbana currently being served:

We estimate that we will serve 8-10 individuals from Urbana each night of the winter.

B4. Is there a fee to participate in the program? Yes No

o If yes, indicate how much and for what purpose: _____

B5. Does your organization have a waiting list? Yes No

o If yes, identify the number of persons on the waiting list: _____

B6. Interagency Collaboration: List other agencies that are involved with your program; briefly describe extent of involvement.

Interagency Collaboration: Identify other agencies involved in project; briefly describe extent of involvement.				
Agency Name	Address	Phone	Contact Person	Involvement
United Way of Champaign County	404 W. Church St. Champaign, IL 61820	217-352- 5151	Beverly Baker	They have been the financial clearinghouse for the shelter prior to its being incorporated as at 501c3. They have also been a very active promoter of the shelter. Beverly is also on the shelter board.
C-U at Home	34 E Green St Champaign, IL 61820	217-819- 4569	Rob Dalhaus	Staff training, mission direction, providing case-work for shelter guests as needed. Rob is also on the shelter board.
New Covenant Fellowship				They have two staff on the shelter board and are the host site of the shelter.
Faith United Methodist Church				They have three staff on the shelter board and are responsible for administrating the shelter.

B7. Using the table* below, answer the following questions:

FAMILY SIZE	EXTREMELY LOW INCOME 30% MFI	LOW INCOME 50% MFI	MOD INCOME 80% MFI
1	\$14,700	\$24,500	\$39,150
2	\$16,800	\$28,000	\$44,750
3	\$20,160	\$31,500	\$50,350
4	\$24,300	\$34,950	\$55,900
5	\$28,440	\$37,750	\$60,400
6	\$32,580	\$40,550	\$64,850
7	\$36,730	\$43,350	\$69,350
8	\$40,890	\$46,150	\$73,800

*Income amounts subject to Dept. of Housing and Urban Development (HUD)

- How many persons in each category does your program serve? Of those, how many live in Urbana?
(Please provide a specific number, not a range or percentage)

Extremely Low approximately 125 (all)

Live in Urbana approximately 42

Low Income _____

Live in Urbana _____

Moderate Income _____

Live in Urbana _____

B8. From **CONSOLIDATED PLAN FOR PROGRAM YEARS 2015-2019: GOALS, STRATEGIES, & ACTIVITIES (Attachment A)**, list the specific strategy or strategies your program addresses.

- **Goal 6:** Provide Support for existing agencies delivering services to homeless individuals and families and encourage the expansion of local services to meet community homeless needs.
- **Strategy:** Support the existing network of local homeless services.
- **Activity:** Provide support to emergency and transitional shelters through Consolidated Social Service Pool fund allocations.

- Describe briefly how your program addresses each strategy as noted above:

- The C-U Men's Shelter will support the existing network of local homeless services by providing a winter emergency men's shelter where none currently exists and through partnering with C-U at Home in order to provide as-needed case-work for specific guests of the shelter.

- _____

- _____

B9. Use **Appendix B: Performance Measures**, as a guide for the following questions:

- Describe the impact of your activity and the outcome(s) you hope to achieve:

The goal of our shelter is to provide a safe, warm space for men to stay during the winter months.

In Champaign County, normal freezing temperatures are experienced November through March. Further, there is no emergency homeless shelter for men in our county. Therefore, our aim is to bridge that gap by providing a safe, warm place for men to sleep during the most dangerous winter months. The program is therefore focused on basic needs and overnight accommodations; we are not currently organized to provide more in-depth social services.

- Explain how you will measure the long-term impact of the activity on Clients and/or the Community:
Our primary measurement of impact is based on the numbers of people that we serve.
We understand that providing housing during the harshest months of the year will undoubtedly have impact on the recipients' health, overall well-being, and ability to access and organize for deeper life needs.
- Explain the indicators you will use to measure the impact on the Community or on the lives of persons assisted:
Again, our primary indicator will be to track and measure the number of persons served—both on a per-night basis and number of unique individuals served.

B11. Does your organization meet one or more key service areas? (please check all that apply)

- Basic Needs (i.e. food, shelter/housing)
- Health (i.e. Mental Health, Counseling, Substance Abuse)
- Family Support/Special Needs (including Emergency Assistance)
- Seniors
- Children and Youth (Ages):
 - Pre-Natal
 - Birth – Pre-K
 - 5 – 13
 - 13 – 18

B12. Will this funding help build capacity in your organization and promote a long-term benefit in the organization or to the individuals that it serves, i.e can it be leveraged to get other grant funds, does it help build self-sufficiency in your clients? How will these funds supplement what you spend in Urbana? Please explain:

We do not intend to leverage this grant to obtain other funds. The primary purpose of this grant is to enable the C-U Men's Shelter to open an additional month during the season. _____

C. BUDGETARY INFORMATION

C1. ATTACH the following to this application:

- Your actual agency budget for the last fiscal year (FY 16-17)
- A preliminary agency budget for the fiscal year for which you are applying for funds (FY 17-18).

C2 (a). **PROGRAM BUDGET.** List the total expenses that will be required to operate the program for which you are requesting funds, along with an explanation of how the expenses are related to project delivery. Since full funding is not guaranteed, please rank the priority or each budget line item for completing your project.

LINE ITEM/TYPE OF EXPENDITURE	RANK	TOTAL BUDGET	JUSTIFICATION
Salaries & Wages	1	42,320	Without staff, we cannot open.
Fringe Benefits		0	
TOTAL PERSONNEL		42,320	
Supplies	5	3,000	Cleaning supplies and additional bedding
Postage		0	
Publications/Printing		0	
Transportation		0	
Other (specify):	4	500 (Liability Insurance)	

Rent	2	8,750	For use of New Covenant's building
Equipment		0	
Utilities		0	Included in rent
Telephone		0	Faith UMC in-kind use
Maintenance/Repair		0	
Insurance			
Other (specify):	3	8,000 (Laundry)	We will need to wash the bedding provided for the men.
TOTAL NON-PERSONNEL		20,250	
TOTAL FY 17-18 PROJECT BUDGET			

D. REVENUE FUNDING SOURCES

D2. List the name of the funding source and the requested amount for current fiscal year (FY 17-18) for your program. Enter the type of funding received from funding source: **Cash (C), In-kind (I), or Grant (G)**. Enter the status of the funding commitment by entering the appropriate option from the following list of choices: **Funding Secured (FS), Awaiting Final Approval (AFA), Awaiting Response (AR), or Status Unknown (SU)**.

Funding Source	Requested Amount (FY 17-18)	Type	Commitment Status
Requested from City of Urbana/Cunningham Township	12,500	G	SU
United Way	34,000	I	FS
Rotary Club, Cannon Grant	13,000	G	AR
Emergency Solutions Grant	14,640	G	AR
Total Anticipated for FY 17-18	48,640		

D3. Fundraising History - List all fundraising activities, dates of the activities, and the amount of funds raised.

Fundraising Activities (over the past 12 months)	Date(s) of Activities	Amount Raised
City of Champaign grant (one-time grant)	January 2017	\$18,000
ESG Grant	April 2017	
United Way Donor Appeal	May-June 2017	
United Way Service Club Appeal	June-August 2017	
United Way Church Appeal	June-ongoing	
		Total United Way: \$29,000
TOTAL		\$47,000

E. AUTHORIZATION AND SIGNATURE SHEET

- E1. We, the undersigned duly-authorized agents of (name of organization) _____,
- A. Do hereby state, to the best of our knowledge the information contained in this application for the Cunningham Township
 - B. Social Service Funding grant is true and correct.
- B. Understand the Cunningham Township funds are disbursed on a quarterly. We assure that the funds will be administered by the applicant appropriately.
- C. Understand the laws and regulations of the US Department of Housing & Urban Development (HUD), the City of Urbana, and/or Cunningham Township will govern any funding resulting from this application.
- D. Agree to enter into an Agreement with the Cunningham Township for its Social Service grant and will adhere to all Program requirements, as stated in Contract/Agreement.
- E2. If a grant is awarded on the basis of this application, all project information detailed in the application will be implemented accordingly, becoming a part of the Contract/Agreement, and the project shall commence within ninety (90) days of new grant period, which begins July 1, 2017, once contracts/agreements are approved by the Cunningham Township Board.

CHIEF AGENCY OFFICIAL:

Cory Blackwell
Name (Print)

Cory Blackwell
Signature

Pastor Board Member
Title

11-2-17
Date

CHAIRPERSON / BOARD MEMBER OF BOARD:

Douglas Abbott
Name (Print)

Douglas Abbott
Signature

Secretary / Treasurer
Title

11-2-17
Date

APPENDIX B

PERFORMANCE MEASURES

Performance measurement is an organized process for gathering information to determine how well programs and activities are meeting established needs and goals. At the Federal level, performance measurement is no longer a choice. By law, all Federal agencies are required to measure the outcomes of their programs. Additionally, program results are directly linked to funding decisions and public support for programs. Performance measurement is important for state and local jurisdictions receiving community development funds from HUD for several reasons: (a) HUD needs performance information to meet its responsibilities and highlight program accomplishments, and (b) performance measurements will help grantees enhance program capacity and performance.

OBJECTIVES & OUTCOMES

A. Objectives: The Outcome Performance Measurement System offers three (3) possible objectives for each activity:

1. **Creating a Suitable Living Environment** relates to activities that are designed to benefit communities, families, or individuals by addressing issues in their living environment. This objective relates to activities that are intended to address a wide range of issues facing low- and moderate-income persons, from physical problems with their environment, such as poor quality infrastructure, to social issues such as crime prevention, literacy, or elderly health services.
2. **Providing Decent Housing** focuses on housing activities whose purpose is to meet individual family or community housing needs. It does not include programs where housing is an element of a larger effort to make community-wide improvements, since such programs would be more appropriately reported under Suitable Living Environments.
3. **Creating Economic Opportunities** applies to activities related to economic development, commercial revitalization, or job creation.

B. Outcomes: The outcome helps further refine the sub-grantee's objective and is designed to capture the nature of the change or the expected result of the objective that a sub-grantee seeks to achieve. Outcomes correspond to the question "What is the type of change the grantee is seeking? Or, what is the expected result of the activity?"

1. **Availability/accessibility** applies to activities that make services, infrastructure, public services, public facilities, housing, or shelter available or accessible to low- and moderate-income people, including persons with disabilities. In this category, accessibility does not refer only to physical barriers, but also to making the basics of daily living available and accessible to low- and moderate-income people where they live.
2. **Affordability** applies to activities that provide affordability in a variety of ways to low- and moderate-income people. It can include the creation or maintenance of affordable housing, basic infrastructure hook-ups, or services such as transportation or day care. Affordability is an appropriate objective whenever an activity is lowering the cost, improving the quality, or increasing the affordability of a product or service to benefit a low-income household.
3. **Sustainability** applies to activities that are aimed at improving communities or neighborhoods, helping to make them livable or viable by providing benefit to persons of low- and moderate-income or by removing or eliminating slums or blighted areas, through multiple activities or services that sustain communities or neighborhoods.

C. Objectives & Outcomes Table:

	Outcome #1: Availability/Accessibility	Outcome #2: Affordability	Outcome #3: Sustainability
Objective #1: Suitable Living Environment	Accessibility for the purpose of creating Suitable Living Environments	Affordability for the purpose of creating Suitable Living Environments	Sustainability for the purpose of creating Suitable Living Environments
Objective #2: Decent Housing	Accessibility for the purpose of providing Decent Housing	Affordability for the purpose of providing Decent Housing	Sustainability for the purpose of providing Decent Housing
Objective #3: Economic Opportunity	Accessibility for the purpose of creating Economic Opportunity	Affordability for the purpose of creating Economic Opportunity	Sustainability for the purpose of creating Economic Opportunity

D. Indicators: Once the sub-grantee has established the program purpose (*objective*) and intended result (*outcome*), the next step is to identify how to measure progress toward achieving the intended results. Grantees will be required to report on the indicators that are applicable to the individual activities they fund. Sub-grantees will be required to report on the indicators that are applicable to their individual activities which receive funding.

1. Four (4) Common Indicators: There are four common indicators that are relevant for most activities:

- Amount of money leveraged from other Federal, state, local, and private sources
- Number of persons, households, businesses, units or beds assisted, as appropriate.
- Income levels of persons or households by 30%, 50%, and/or 80% of area median income,
- Race, ethnicity, and disability data for activities that currently report these data elements.

2. Specific Indicator: In addition to the common indicators that are used for all program activities, there are 18 major activity-specific indicator categories, examples of several are listed below. These indicators cover most activities carried out under the four Consolidated Plan programs including housing, services for homeless individuals and families, public facilities/infrastructure, public services, and economic development activities.

- *Public Service:* This indicator shows the number of persons that have been assisted with new or improved access to a service. If the activity was used to meet a quality standard or to measurably improve quality, then this indicator will report the number of persons that no longer have access to a substandard service. Examples:

	Availability/Accessibility	Affordability	Sustainability
Suitable Living Environment	An after-school program designed to address crime or juvenile delinquency in target neighborhoods	A housing counseling program	Community policing program
Decent Housing	Fair housing counseling program	Energy conservation training or education program focused on reducing energy costs for low- and moderate-income people	Housing counseling program for existing low- and moderate income homeowners to help them avoid predatory lending
Economic Opportunity	Operating costs for a job transportation program, job training program, literacy program	Free job training program for low- and moderate-income people	Child care programs or day care centers, health services

APPENDIX D

Guiding Principles for Consolidated Social Service Funding

(Adopted March 4, 2013)

Our Consolidated Social Service Funding Program should focus on documented Urbana needs, with the goal of having long-term impact. It should be consistent with goals and strategies outlined in the Consolidated Plan 2015-2019, Appendix A.

1. As a municipal entity, the City of Urbana is bound by the Constitution of the State of Illinois, specifically Articles I and X. Accordingly, agencies or programs that are religiously based, exist for the advancement of religious doctrine, or require participants to engage in religious activities or religious programs as a condition of assistance, may not be eligible to receive Consolidated Social Service Funding.
2. Agencies and programs shall not discriminate, as consistent with the provisions of the City of Urbana Human Rights Ordinance
3. We aim to provide support for multi-year efforts, subject to availability of funds.
4. We focus on five key service areas:
 - a. Basic Needs (i.e. food, shelter/housing)
 - b. Health (including Mental Health), Counseling, and Substance Abuse
 - c. Family Support/Special Needs
 - d. Senior Citizens
 - e. Children and Youth, including Prenatal
5. Grants will be prioritized to encourage partnerships and cooperation among agencies. Preference will be given to previously funded agencies with a strong performing track record. We reserve the right to solicit and fund innovative new programs that meet identified needs, focus on targeted neighborhoods, or meet other city-identified priorities.
6. We will seek cooperation with the City of Champaign if agencies serve clients in both communities.
7. Applicants must have experience with federal/ state/ local grant programs and proof of 501c3 status
8. Agencies funded by Cunningham Township may be required to participate as a workfare site for General Assistance clients. Requirements are attached to the application.
9. We encourage public-private partnerships to leverage funding.
10. We expect that Consolidated Social Service Funding will supplement agencies' services in Urbana rather than replace or supplant funding for services allocated to Urbana residents to the extent possible.

Attachment A

Agency Mission Statement and Purpose

The C-U Men's Shelter exists to provide a safe, warm space for men to sleep during the coldest months of the year.

We strongly believe that everyone deserves a safe and warm place to sleep. In Champaign County, temperatures begin to dip below freezing in November. Normal temperatures stay under freezing through March. The overall objective of this program is to provide that safe and warm sleeping place to the homeless men of Champaign-Urbana during the dangerous winter months. The program is focused on providing overnight accommodations and is not organized to provide social services. However, our trained staff will be able to provide information and referrals about available community services when needed.

Program Staff Positions

Title	Number of Positions	
Shelter Director	1	\$12,600
Shelter Assistant	3	\$6,300/person \$18,900 total
Part-Time Shelter Assistant	1	\$3,150

List of Agency Board Members

Rev. Dr. Sheryl Palmer, President (Faith UMC); 3406 Mill Creek Ct. Champaign, IL 61820

Douglas Abbott, Secretary/Treasurer (Faith UMC); 605 Hamilton Dr. Champaign, IL 61820

Cory Blackwell (Faith UMC); 913 Lincolnshire Dr. Champaign, IL 61821

Beverly Baker (United Way); 111 Blazing Star Dr., Savoy, IL 61874

Walton Kelly (New Covenant Fellowship); 1010 W. Park St. Champaign, IL 61821

Kristi Corbin (First Presbyterian Church Champaign); 4517 Copper Ridge Rd., Champaign, IL

Robert Dalhaus III (C-U At Home); 206 S. Elm, St. Joseph, IL 61873

Program Budget for FY16-17

Since the C-U Men's Shelter just incorporated this summer, we did not have a program budget for 2016-2017. We did run the shelter with volunteers and a few paid staff last year. However, being the first year of the shelter, our work was unbudgeted and came through donations given to the United Way.

C-U Men's Shelter Board Meeting

October 3, 2017

In Attendance: Renee Antrosio, Sheryl Palmer*, Cory Blackwell*, Rob Dalhaus III*, Mike Roys, Beverly Baker*(via phone), Doug Abbott*, Tim Clark, George Johnston *=directors.

Doug Reported that all of the incorporation documents have been approved by both the State of Illinois and the Federal Government including the final determination by the IRS of the Shelter's 501 (c) (3) eligibility.

Doug Reported that the Shelter balances at Faith is \$3,184. The United Way balance was not available at this time. The board approved the use of First State Bank in Champaign for the shelter checking account, although the majority of funds will be held by United Way and dispensed as needed.

Cory Blackwell reported that Cunningham Township has offered a possible grant which would allow the shelter to be open an additional month. Dates were discussed and it was believed that the shelter could potentially be ready to open by November 20 and would then remain open through April 14. The board agreed to this time schedule pending approval by Cunningham Township and an approval vote by the members of New Covenant Fellowship.

Sheryl reported that Marilynne Davis is writing a grant request through Rotary to provide funding for washers and dryers for the shelter.

Mike Roys reported that to provide washers and dryers would be approximately \$5,000. Installation and necessary upgrades at NCF would be additional.

Sheryl reported that she had a meeting with Josh but that Doug Beckett would also like more administrative responsibilities. Sheryl and Cory will take over administrative oversight and Josh and or Doug will report to Sheryl. Interviews for other staff will be forthcoming.

The need and possible purchase of additional blankets , sheets and pillowcases was discussed along with the desire to have uniformity in these items.

Doug Abbott brought forth a proposed revision of the shelter rules and regulations that he and Cory had worked on. There was a desire to simplify and humanize the existing rules. These rules were reviewed favorably by the board and will be implemented after receiving input from the incoming staff.

Staff training was discussed and Rob indicated that Rosencrantz and CPD would be potential sources of good programs.

Rob also indicated that The Phoenix would be willing to take on case management for the shelter.

Next meeting was set for November 7th at 1:30pm.

Respectfully submitted, Doug Abbott , Board Secretary.

C-U Men's Shelter
Projected FY 2017-2018 Budget

	<i>Monthly</i>	<i>5 Months</i>
Payroll and Expense	\$8,464	\$42,320
Supplies & Misc.	\$600	\$3,000
Liability Insurance	\$100	\$500
Rent/Utilities/Cleaning	\$1,750	\$8,750
Laundry Services	\$1,600	\$8,000
Total	\$12,514	\$62,570

INTERNAL REVENUE SERVICE
P. O. BOX 2508
CINCINNATI, OH 45201

DEPARTMENT OF THE TREASURY

Date: SEP 08 2017

C-U MENS SHELTER
1719 S PROSPECT AVE
CHAMPAIGN, IL 61820-0000

Employer Identification Number:
82-2343822
DLN:
26053640004417
Contact Person:
CUSTOMER SERVICE ID# 31954
Contact Telephone Number:
(877) 829-5500
Accounting Period Ending:
April 30
Public Charity Status:
170(b)(1)(A)(vi)
Form 990/990-EZ/990-N Required:
Yes
Effective Date of Exemption:
July 28, 2017
Contribution Deductibility:
Yes
Addendum Applies:
No

Dear Applicant:

We're pleased to tell you we determined you're exempt from federal income tax under Internal Revenue Code (IRC) Section 501(c)(3). Donors can deduct contributions they make to you under IRC Section 170. You're also qualified to receive tax deductible bequests, devises, transfers or gifts under Section 2055, 2106, or 2522. This letter could help resolve questions on your exempt status. Please keep it for your records.

Organizations exempt under IRC Section 501(c)(3) are further classified as either public charities or private foundations. We determined you're a public charity under the IRC Section listed at the top of this letter.

If we indicated at the top of this letter that you're required to file Form 990/990-EZ/990-N, our records show you're required to file an annual information return (Form 990 or Form 990-EZ) or electronic notice (Form 990-N, the e-Postcard). If you don't file a required return or notice for three consecutive years, your exempt status will be automatically revoked.

If we indicated at the top of this letter that an addendum applies, the enclosed addendum is an integral part of this letter.

For important information about your responsibilities as a tax-exempt organization, go to www.irs.gov/charities. Enter "4221-PC" in the search bar to view Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, which describes your recordkeeping, reporting, and disclosure requirements.

Letter 947

C-U MENS SHELTER

Sincerely,

Stephen A. Martin

Director, Exempt Organizations
Rulings and Agreements

AN AGREEMENT CONCERNING THE DISPOSITION AND USE
OF FUNDS DISBURSED THROUGH THE CUNNINGHAM TOWNSHIP
FISCAL YEAR 2017-2018

THIS AGREEMENT is made effective November 7, 2017, by and between the CUNNINGHAM TOWNSHIP, Illinois, body corporate and politic, hereinafter referred to as the Township, and **CU Men's Emergency Shelter**, a not-for-profit corporation, hereinafter referred to as the Grantee, in consideration of the following mutual covenants and conditions:

1. The Township will disburse to the Grantee the sum of **\$12,500.00**, which said sum will be paid in **two** installments of **\$6,250.00** in accordance with the provisions of this Agreement, to the Treasurer of the said Agency, commencing on the 7th of November, 2017 with no installment to be issued after June 30, 2018.
2. The Grantee will use the funds received under this Agreement only as follows:

Men's Emergency Shelter

3. Prior to payment of the 1st installment, the Grantee will provide two signed copies of this agreement. Failure to return the signed agreements by January 2, 2018 may result in the termination of this agreement and loss of the grant.

4. Prior to payment of the 1st installment, the Grantee will provide to the Township an audit or financial report of the Grantee's most recently completed fiscal year, **or the most recent audit or financial report that has been completed.**

5. The Grantee will establish on its books and records a separate set of accounts for the funds received under this Agreement, in which it will account for the receipt and expenditure of the funds.

6. The Grantee will use fiscal, accounting, and audit procedures which conform to accepted accounting practices and applicable statutes.

7. The Grantee will provide to the Township, on reasonable notice, access to and the right to examine such books and records of the Grantee, and the Grantee will make such reports to the Township, as the Township may reasonably require so that the Township may determine whether there has been compliance with this Agreement.

8. If it is determined by the Supervisor of the Cunningham Township that any expenditure made with the funds provided under this Agreement is prohibited by law, the Grantee will reimburse the Township any amount that is determined to have been spent in violation of the Agreement and/or grant.

9. **The grantee agrees to provide emergency shelter for a duration no less than November 20th, 2017 through April 14th, 2018.**

10. No person shall be excluded from participation in programs the Township is funding, be denied the benefits of, or be subjected to discrimination under any program or activity funded in whole or in part with the funds provided under this Agreement on the ground of **race, color, national origin, sex, sexual orientation, gender identity, religion, or on any other ground upon which such discrimination is prohibited by law.**

11. The Grantee will comply with all applicable statutes, ordinances and regulations.

12. The Grantee will not use any of these funds for lobbying purposes.

13. In the event that the Grantee does not use all or a part of the funds received under this Agreement for the purposes set forth herein by the end of the Township's fiscal year in which this Agreement is made, the Grantee will repay to the Township all such funds not so used, and any interest earned thereon.

14. All provisions of this Agreement concerning the funds provided under this Agreement shall apply to any interest earned on those funds.

15. This Agreement may be terminated by the Township upon a thirty day notice in writing to the Grantee for failure of the Grantee to comply with the covenants and conditions set forth herein.

16. The Grantee will save and hold harmless the Township and any officer or employee or agent of any kind of the Township from and against all actions, claims or demands of any kind or character whatsoever, which may in any way be caused by or arise out of the Grantee's conduct, activities or programs in the performance and completion of promises and functions or in the achievement of goals and objectives pursuant to this Agreement executed by and between the Township and the Grantee.

17. This Agreement may be amended only by an agreement of the parties executed in the same manner in which this Agreement is executed.

18. The foregoing constitutes the entire Agreement and no verbal statement made before, on, or after the date hereof shall be binding on the parties.

IN WITNESS WHEREOF, the parties hereto, pursuant to authority granted by their respective governing bodies, have executed this Agreement by their authorized officers and with their corporate or official seals attached, on the date first set forth above.

CUNNINGHAM TOWNSHIP:

GRANTEE:

Supervisor

Agency Board Chair

Danielle Chynoweth

Printed Name

Printed Name

Date signed

Date signed

ATTEST:

ATTEST:

Township Clerk

Agency Board Secretary

Charles A. Smyth

Printed Name

Printed Name

Date signed

Date signed