Organization Profile: Disabilities Fund 2025

The Disabilities Fund is committed to accessibility. If you prefer to respond to the questions below through a call with Trust staff, please reach out to disabilitiesfund@cct.org.

# ORGANIZATION INFORMATION

1. Legal Name (required)
2. Organization Doing Business As (DBA) Name
3. Nickname or Acronym (25 characters or less, required if legal name is longer than 40 characters)
4. EIN (required)
5. Organization Signatory (required)
6. NTEE Code

*The National Taxonomy of Exempt Entities (NTEE) system is used by the IRS to classify nonprofit organizations. To find the code that classifies your organization, visit*[*The Urban Institute's listing of IRS activity codes.*](https://urbaninstitute.github.io/nccs-legacy/ntee/ntee.html) *If your organization aligns with multiple NTEE codes, select the primary code relevant to your organization.*

* 1. Major Category
	2. Subcategory
	3. Detail Code
1. Address (Street, City, State, Zip, Country) (required)
2. Year Established (required)
3. If you provided in-person, onsite services at a location(s) other than your mailing address in the last year, please list the addresses (street, city, state, zip).
4. Is your organization tax-exempt? (required)
	1. If not tax-exempt, is your organization – select one below (required):
		1. For-Profit Entity
		2. Sponsored Organization
	2. If tax-exempt, is your organization – select one below (required)
		1. 501(c)(3) Public Charity
		2. 501(c)(3) Private Non-Operating Foundation
		3. 501(c)(3) Private Operating Foundation
		4. 501(c)(4) Social Welfare Organization
		5. 501(c)(5) Labor, Agricultural and Horticultural Organization
		6. 501(c)(6) Business Leagues, etc.
		7. 501(c)(7) Social Club
		8. 501(c)(8) Fraternal Beneficiary Society
		9. 501(c)(9) Employees Associations
		10. 501(c)(10) Domestic Fraternal Society
		11. 501(c)(19) Post or Organization of Past or Present Members of the Armed Forces
		12. 501(c)(23) Veterans Organization (created before 1880)
		13. Municipality (non-501c3)
		14. Public Educational Institution (non-501c3)
		15. Religious Institution (non-501c3)
5. Facebook (please enter full URL)
6. Twitter (please enter full URL)
7. YouTube Page (please enter full URL
8. Website (please enter full URL)
9. Are you interested in applying for a grant, serving only as a fiscal sponsor, or both? Select one below (required):
	1. Applying Organization
	2. Applying Organization and Fiscal Sponsor
	3. Fiscal Sponsor
10. Fiscal Sponsor

*If you are a non-501c3 organization that uses a fiscal sponsor to receive grants, please enter the name of your fiscal sponsor organization in the search bar for this question. If your fiscal sponsor does not have an organization profile in GrantCentral they must create one in order for you to submit a grant application and receive grant funding. Contact your fiscal sponsor to ask them to create a profile as soon as possible.*

*﻿If your fiscal sponsor already has an organization profile in GrantCentral, but they are not showing in the search results, they need to update their organization profile to indicate that they are an Applying Organization and a Fiscal Sponsor. Specifically, they need to go to the Organization Information section of their organization profile, and update the field that asks: Are you interested in applying for a grant, serving only as a fiscal sponsor, or both? They should indicate that they are an Applying Organization and Fiscal Sponsor.*

# COMMUNITIES SERVED

1. Does your organization primarily…
	1. Provide direct services?
		1. If yes, in your most recent fiscal year, how many individuals did your organization serve?
	2. Conduct policy and advocacy efforts?
	3. If your organization conducts policy and advocacy efforts, in what areas? Select all that apply.
		1. Consumer Financial Services
		2. Economic Development
		3. Entrepreneurship
		4. Housing
		5. Immigration
		6. State/Local Budget
		7. Transportation
		8. Criminal Justice
		9. Education
		10. Health
		11. Human Services
		12. Income Security
		13. Tax
		14. Workforce Development
		15. Other
	4. If your organization conducts policy and advocacy efforts, at what level of government are you advocating? Select all that apply:
		1. City
		2. County
		3. State
		4. Federal

# COMMUNITY DEMOGRAPHICS

*Complete this section only if your organization provides direct services. If your organization primarily conducts research and/or policy and advocacy work at the city, regional, state or national level, please indicate "We do not collect this data" for each table below, and proceed to the next section of the Organization Profile.*

1. Race and Ethnicity

| Population  | Number Served |
| --- | --- |
| American Indian or Alaskan Native |  |
| Asian |  |
| Black or African American |  |
| Hispanic or Latine |  |
| Middle Eastern |  |
| Multiracial |  |
| Native Hawaiian or Other Pacific Islander |  |
| White |  |
| Prefer not to disclose race and ethnicity |  |

If you do not have complete or up-to-date data, please describe your beneficiary population relevant to race and ethnicity.

1. Gender

| Population  | Number Served |
| --- | --- |
| Men, including trans masculine |  |
| Women, including trans feminine |  |
| TGNC (Trans/transgender and gender non-conforming) |  |
| Prefer not to disclose gender |  |

If you do not have complete or up-to-date data, please describe your beneficiary population relevant to gender.

1. Sexual Orientation

| Population  | Number Served |
| --- | --- |
| Lesbian, Gay, Bisexual, Questioning, Asexual, Pansexual, or Queer |  |
| Straight/Heterosexual |  |
| Other sexual identity not listed |  |
| Prefer not to disclose sexual orientation |  |

If you do not have complete or up-to-date data, please describe your beneficiary population relevant to sexual orientation.

1. Disability

| Population  | Number Served |
| --- | --- |
| Do not self-identify as having a disability |  |
| Self-identify as having a disability |  |
| Prefer not to disclose disability status |  |

If you do not have complete or up-to-date data, please describe your beneficiary population relevant to disability.

1. Veteran Status

| Population  | Number Served |
| --- | --- |
| Veteran Status |  |
| No Veteran Status |  |
| Prefer not to disclose veteran status |  |

If you do not have complete or up-to-date data, please describe your beneficiary population relevant to veteran status.

# FOCUS POPULATIONS SERVED

1. Primary Demographics Served

| Population  | Primarily Serve This Demographic? |
| --- | --- |
| American Indian or Alaskan Native |  |
| Asian |  |
| Black or African American |  |
| Hispanic or Latinx |  |
| Middle Eastern |  |
| Multiracial |  |
| Native Hawaiian or Other Pacific Islander |  |
| White |  |
| Prefer not to disclose race and ethnicity |  |

1. Please indicate Yes/No for all primary constituents or populations that your organization serves. If you select “Other,” please list below.

| Population  | Yes/No |
| --- | --- |
| Activists  |  |
| Adults |  |
| Artists and performers  |  |
| Asylum Seekers  |  |
| Children |  |
| Community Organizers  |  |
| Domestic Workers |  |
| Economically disadvantaged people |  |
| Educators |  |
| Emergency Responders |  |
| Entrepreneurs |  |
| Families  |  |
| Farmers |  |
| Immigrants and migrants  |  |
| Indigenous peoples  |  |
| Military Personnel |  |
| Non-profit leadership and staff  |  |
| Other |  |
| Parents and Caregivers |  |
| People experiencing homelessness  |  |
| People experiencing housing instability |  |
| People experiencing hunger and/or food insecurity |  |
| People involved with justice system  |  |
| People living with mental health issues  |  |
| People living with substance misuse |  |
| People who are survivors (crime and abuse, disaster, conflict and war)  |  |
| People who are underemployed |  |
| People who are unemployed |  |
| People who identify as LGBTQ+ |  |
| People who identify with a particular race(s)  |  |
| People with disabilities |  |
| People with diseases and illnesses  |  |
| Policymakers |  |
| Pregnant people  |  |
| Refugees  |  |
| Religious groups  |  |
| Retired people  |  |
| Returning Citizens |  |
| Self-employed people |  |
| Sex workers |  |
| Students |  |
| Transgender and gender Non-conforming (TGNC)  |  |
| Veterans |  |
| Widows and widowers |  |
| Young adults who are out of work and school  |  |
| Youth |  |
| Youth who are out of work and school |  |

1. Other focus population(s) served:

# ORGANIZATION HISTORY

1. Provide your organization mission and vision statement. (required – recommended under 1,000 characters)
2. The Trust's vision is a thriving, equitable and connected Chicago region where people of all races, places and identities have the opportunity to reach their potential. Please describe how your organization's mission, activities, and outcomes contribute to that vision. (required – recommended under 1,500 characters)
3. Provide a brief summary of your organization's history, including brief description of recent significant accomplishments or milestones (within the last five years). (required – recommended under 3,000 characters)
4. Describe any internal and external efforts your organization is currently undertaking or plans to undertake to incorporate diversity, equity, and/or inclusion (DEI) into its policies, practices, and programs. (required – recommended under 1,500 characters)
5. Describe how your organization engages community members and incorporates the perspective and lived experience of the community and/or individuals that you serve. Include discussion on the strengths of the community/beneficiaries that your organization serves and explain how those strengths might contribute to the success of your organization and its programs. (required – recommended under 1,500 characters)

*•=*

1. *For fiscal sponsor organizations*: Briefly describe your organization's fiscal sponsorship practices to ensure good stewardship of funds. (required - recommended under 1,500 characters)
2. *For fiscal sponsor organizations*: Is this your first time serving as a fiscal sponsor? (required)

# LEADERSHIP/STAFF

1. Total number of senior leadership (Executive Director + senior staff)
2. Total number of full-time staff (excluding senior leadership)
3. Total number of part-time staff
4. Total number of board members
5. Total number of volunteers
6. Race and Ethnicity

| Population Name | Executive Director | Senior Staff | Staff (full-time + part-time) | Board |
| --- | --- | --- | --- | --- |
| American Indian or Alaskan Native |  |  |  |  |
| Asian |  |  |  |  |
| Black or African American |  |  |  |  |
| Hispanic or Latinx |  |  |  |  |
| Middle Eastern |  |  |  |  |
| Multiracial |  |  |  |  |
| Native Hawaiian or Other Pacific Islander |  |  |  |  |
| White |  |  |  |  |
| Prefer not to disclose race and ethnicity  |  |  |  |  |

1. Gender

| Population Name | Executive Director | Senior Staff | Staff (full-time + part-time) | Board |
| --- | --- | --- | --- | --- |
| Men, including trans masculine |  |  |  |  |
| Women, including trans feminine |  |  |  |  |
| TGNC (Trans/Transgender and gender non-conforming) |  |  |  |  |
| Prefer not to disclose gender |  |  |  |  |

1. Sexual Orientation

| Population Name | Executive Director | Senior Staff | Staff (full-time + part-time) | Board |
| --- | --- | --- | --- | --- |
| Lesbian, Gay, Bisexual, Questioning, Asexual, Pansexual |  |  |  |  |
| Straight/Heterosexual |  |  |  |  |
| Other sexual identity not listed |  |  |  |  |
| Prefer not to disclose sexual orientation |  |  |  |  |

1. Disability

| Population Name | Executive Director | Senior Staff | Staff (full-time + part-time) | Board |
| --- | --- | --- | --- | --- |
| Do not self-identify as having a disability |  |  |  |  |
| Self-identify as having a disability |  |  |  |  |
| Prefer not to disclose disability status |  |  |  |  |

1. Veteran

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Population Name | Executive Director | Senior Staff | Staff (full-time + part-time) | Board |
| Veteran Status |  |  |  |  |
| No Veteran Status |  |  |  |  |
| Prefer not to disclose veteran status  |  |  |  |  |

1. Describe your Board and the role it plays in planning, fundraising, and financial oversight. How are decisions made?

# FINANCIALS

1. Current Years Operating Budget (required)
2. Organization budget from your three most recent audits or Forms 990

| Year | Revenue | Expenses | Net Assets | Audited? | Surplus/Deficit |
| --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

1. If there is a deficit or other major changes over the past three years, please explain why. (recommended under 1,000 characters)
2. For the previous year, please list the names and dollar amounts of up to five sources of funding for your organization, including government contracts, foundations, corporations, individuals donors, and earned income.

| Funder | Year | Amount |
| --- | --- | --- |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

1. Has your organization had any instances of fraud, malfeasance, or financial mismanagement within the last five years? If yes, describe how it was managed (recommended under 1,500 characters)

# GEOGRAPHIC AREAS

We recognize that organizations serve different geographic areas and that the benefits of your organizational efforts are felt across communities and neighborhoods. When identifying the geographic reach for your organization, please consider the primary communities of focus.

Click here for maps of the [City of Chicago](https://trust360.my.salesforce.com/sfc/p/#80000000a1PO/a/8a000000gqkm/W7zPWKsq7H4iWp_u02CBWYjRyaxrdaVTmBk8dgff3lM) and [Cook County](https://trust360.my.salesforce.com/sfc/p/#80000000a1PO/a/8a000000gqkr/anW8wNmjJ_R6SXIcxvYuLVvBKOGbior8McLoXVUAVtY) that show community areas and municipalities combined into regions. The regions were constructed by The Chicago Community Trust using a geographic and demographic lens to determine neighborhood clusters based on variables including racial and ethnic composition and a number of economic factors.

1. Select Broad Geographic Areas
	1. City of Chicago
		1. Downtown
			1. Loop
			2. Near North Side
			3. Near South Side
			4. Near West Side
		2. Far North Lakefront
			1. Edgewater
			2. Lincoln Square
			3. Rogers Park
			4. Uptown
			5. West Ridge
		3. Far Northwest Side
			1. Edison Park
			2. Forest Glen
			3. Jefferson Park
			4. North Park
			5. Norwood Park
			6. O’Hare
		4. Far South Side
			1. Avalon Park
			2. Burnside
			3. Calumet Heights
			4. East Side
			5. Hegewisch
			6. Pullman
			7. Riverdale
			8. Roseland
			9. South Chicago
			10. South Deering
			11. West Pullman
		5. Far Southwest Side
			1. Ashburn
			2. Beverly
			3. Morgan Park
			4. Mount Greenwood
			5. Washington Heights
		6. Mid-South Side
			1. Armour Square
			2. Bridgeport
			3. Douglas
			4. Fuller Park
			5. Grand Boulevard
			6. Hyde Park
			7. Kenwood
			8. Oakland
			9. Washington Park
			10. Woodlawn
		7. North Side
			1. Avondale
			2. Lakeview
			3. Lincoln Park
			4. Logan Square
			5. North Center
			6. West Town
		8. Northwest Side
			1. Albany Park
			2. Belmont Cragin
			3. Dunning
			4. Hermosa
			5. Irving Park
			6. Montclare
			7. Portage Park
		9. South Side
			1. Auburn Gresham
			2. Chatham
			3. Englewood
			4. Greater Grand Crossing
			5. South Shore
			6. West Englewood
		10. Southwest Side
			1. Archer Heights
			2. Brighton Park
			3. Chicago Lawn
			4. Clearing
			5. Gage Park
			6. Garfield Ridge
			7. Lower West Side
			8. McKinley Park
			9. New City
			10. South Lawndale
			11. West Elsdon
			12. West Lawn
		11. West Side
			1. Austin
			2. East Garfield Park
			3. Humboldt Park
			4. North Lawndale
			5. West Garfield Park
	2. Cook County
		1. Barrington
			1. Barrington
			2. Barrington Hills
			3. Hoffman Estates
			4. Iverness
		2. Bloom
			1. Chicago Heights
			2. Crete
			3. Flossmoor
			4. Ford Heights
			5. Glenwood
			6. Homewood
			7. Lansing
			8. Lynwood
			9. Olympia Fields
			10. Park Forest
			11. Sauk Village
			12. South Chicago Heights
			13. Steger
		3. Bremen
			1. Blue Island
			2. Crestwood
			3. Harvey
			4. Markham
			5. Midlothian
			6. Oak Forest
			7. Posen
			8. Robbins
		4. Cicero-Oak Park-Berwyn
			1. Berwyn
			2. Cicero
			3. Forest Park
			4. Maywood
			5. North Riverside
			6. Oak Park
			7. River Forest
		5. Elk Grove
			1. Arlington Heights
			2. Des Plaines
			3. Elk Grove Village
			4. Mount Prospect
		6. Evanston – New Trier
			1. Evanston
		7. Hanover
			1. Hanover
			2. Hanover Park
			3. Streamwood
		8. Lemont
			1. Goodings Grove
			2. Lemont
			3. Willow Springs
			4. Woodridge
		9. Leyden
			1. Bensenville
			2. Elmwood Park
			3. River Grove
			4. Schiller Park
		10. Lyons
			1. Brookfield
			2. Countryside
			3. Hodgkins
			4. Indian Head Park
			5. La Grange
			6. La Grange Park
			7. Lyons
			8. McCook
			9. Riverside
			10. Western Springs
		11. Maine
			1. Glenview
			2. Morton Grove
			3. Park Ridge
			4. Rosemont
		12. Niles
			1. Golf
			2. Lincolnwood
			3. Niles
			4. Skokie
		13. Northfield
			1. Deerfield
			2. Glencoe
			3. Highland Park
			4. Kenilworth
			5. Northfield
			6. Wilmette
			7. Winnetka
		14. Norwood Park
			1. Harwood Heights
			2. Norridge
		15. Orland
			1. Mokena
			2. Orland Hills
			3. Orland Park
			4. Palos Heights
			5. Palos Park
		16. Palatine
			1. Deer Park
			2. Long Grove
			3. Palatine
		17. Palos
			1. Hickory Hills
			2. Justice
		18. Proviso
			1. Bellwood
			2. Berkeley
			3. Broadview
			4. Hillside
			5. Northlake
			6. Stone Park
			7. Westchester
		19. Rich
			1. Country Club Hills
			2. Frankfort
			3. Frankfort Square
			4. Hazel Crest
			5. Matteson
			6. Richton Park
			7. Tinley Park
			8. University Park
		20. Schaumburg
			1. Itasca
			2. Rolling Meadows
			3. Roselle
			4. Schaumburg
		21. Stickney
			1. Bedford Park
			2. Burbank
			3. Forest View
			4. Stickney
			5. Summit
		22. Thornton
			1. Burnham
			2. Calumet City
			3. Dixmoor
			4. Dolton
			5. East Hazel Crest
			6. Phoenix
			7. Riverdale
			8. South Holland
			9. Thornton
		23. Wheeling
			1. Buffalo Grove
			2. Northbrook
			3. Prospect Heights
			4. Riverwood
			5. Wheeling
		24. Worth
			1. Alsip
			2. Bridgeview
			3. Calumet Park
			4. Chicago Ridge
			5. Hometown
			6. Merrionette Park
			7. Metamora
			8. Oak Lawn
			9. Palos Hills
			10. Worth
	3. Dupage County
		1. Addison
		2. Aurora
		3. Batavia
		4. Bensenville
		5. Bloomingdale
		6. Bolingbrook
		7. Burr Ridge
		8. Carol Stream
		9. Claredon Hills
		10. Countywide
		11. Darien
		12. Downers Grove
		13. Glen Ellyn
		14. Glendale Heights
		15. Itasca
		16. Lisle
		17. Lombard
		18. Naperville
		19. Oakbrook Terrace
		20. St. Charles
		21. Villa Park
		22. Warrenville
		23. Wayne
		24. West Chicago
		25. Westmount
		26. Wheaton
		27. Willowbrook
		28. Winfield
		29. Wood Dale
		30. Woodridge
	4. Kane County
		1. Algonquin
		2. Barrington Hills
		3. Bartlett
		4. Big Rock
		5. Burlington
		6. Campton Hills
		7. Carpentersville
		8. East Dundee
		9. Elburn
		10. Elgin
		11. Geneva
		12. Gilberts
		13. Hampshire
		14. Hoffman
		15. Huntley
		16. Kaneville
		17. Lily Lake
		18. Maple Park
		19. Montgomery
		20. North Aurora
		21. Pingree Grove
		22. Sleepy Hollow
		23. South Elgin
		24. Sugar Grove
		25. Virgil
		26. West Dundee
	5. Kendall County
		1. Joliet
		2. Lisbon
		3. Millbrook
		4. Millington
		5. Newark
		6. Oswego
		7. Plainfield
		8. Plano
		9. Plattville
		10. Yorkville
	6. Lake County
		1. Antioch
		2. Bannockburn
		3. Beach Park
		4. Fox Lake
		5. Fox River Grove
		6. Grayslake
		7. Green Oaks
		8. Gurnee
		9. Hainesville
		10. Haworth Woods
		11. Highland Park
		12. Highwood
		13. Indian Creek
		14. Island Lake
		15. Kildeer
		16. Lake Barrington
		17. Lake Bluff
		18. Lake Forest
		19. Lake Villa
		20. Lake Zurich
		21. Lakemoor
		22. Libertyville
		23. Lincolnshire
		24. Lindenhurst
		25. Long Grove
		26. Mettawa
		27. Mundelein
		28. North Barrington
		29. North Chicago
		30. Old Mill Creek
		31. Park City
		32. Port Barrington
		33. Riverwoods
		34. Round Lake
		35. Round Lake Beach
		36. Round Lake Heights
		37. Round Lake Park
		38. Third lake
		39. Tower Lakes
		40. Vernon Hills
		41. Volo
		42. Wadsworth
		43. Wauconda
		44. Waukegan
		45. Winthrop Harbor
		46. Zion
	7. McHenry County
		1. Bull Valley
		2. Cary
		3. Crystal Lake
		4. Greenwood
		5. Harvard
		6. Hebron
		7. Holiday Hills
		8. Johnsburg
		9. Lake in the Hills
		10. Lakewood
		11. Marengo
		12. McCullom Lake
		13. McHenry
		14. Oakwood Hills
		15. Prairie Grove
		16. Richmond
		17. Ringwood
		18. Spring Grove
		19. Trout Valley
		20. Union
		21. Wonder Lake
		22. Woodstock
	8. Will County
		1. Beecher
		2. Braidwood
		3. Channahon
		4. Crest Hill
		5. Crete
		6. Elwood
		7. Homer Glen
		8. Lockport
		9. Manhattan
		10. Mokena
		11. Monee
		12. New Lenox
		13. Peotone
		14. Rockdale Romeoville
		15. Shorewood
		16. Symerton
		17. Willow Springs
		18. Wilmington
	9. Midwest
	10. Nationwide
	11. Illinois
	12. International

**ADDITIONAL DOCUMENTS**

*Please upload a file for each of the requested documents listed. If your organization does not have one or more of the files listed, or if they are not applicable to your organization, please upload files that explain why the requested information is not applicable.*

1. Please send the following documents for your organization:
	1. Summary of your organization's current programs and activities (e.g., annual report, progress report prepared for another foundation, a Board summary memo, a slide deck presentation, etc.)
	2. Brief bios of the executive director and senior leadership team (e.g., information pulled from your website, annual report, a document prepared for another foundation, etc.)
	3. Board list (e.g., list the members of your Board, their role on the Board, and their city and state of residence)
	4. Current Year's Operating Budget, including both projected expenses and revenues
	5. Audited Financials (3 most recent years)
	6. Most current IRS Form 990
	7. Final financial statement for the year just completed, if not yet audited
	8. Fiscal Sponsor Letter of Agreement or Memorandum of Understanding (required for Sponsored Organizations that use a fiscal sponsor to receive grants)