

2022 Impetus Grant Application

Impact100 Sonoma

ELIGIBILITY CHECKLIST

Before you complete this grant application, please ensure that you can answer **YES** to all of the following questions:

- Have you been in operation for at least 24 months?
- Are you (or your fiscal agent) tax-exempt under Article 501(c)(3) of the Internal Revenue Code?
- Is your organization located in and/or does it provide services in Sonoma Valley?*
- Will you expend 100% of funds awarded in Sonoma Valley?*

Notes:

Sonoma Valley is defined as the geographic area between Schellville and Kenwood.

Faith-based organizations may not be the lead agency or the fiscal agent.

Questions marked with a **red asterisk *** are required: if left blank, you will be prompted to complete field.

Number or dollar amount fields may be typed directly into box.

Remember, you will have to provide required financial and/or other documents at the same time or before you submit this application.

These requirements are described and budget and collaborator/partner forms found in step 1 of the Application process, here: <https://impact100sonoma.wildapricot.org/page-18330>

ORGANIZATION PURPOSE AND MISSION

Organization name: *

Legal name of organization (DBA, if applicable): *

Organization website: *



Address Line 1

Address Line 2

City

State

ZIP Code

Contact person: *

First Name

Last Name

Title: *

Email: *

Phone: *

Name of CEO or Executive Director: *

First Name

Last Name

Email: *

Phone: *

Year founded: *

Year registered as 501(c)(3): *



Number of clients/customers served annually: *

Organization's formal mission statement: *

250/250

What programs or services does your organization deliver? *

500/500

Tell us about the segment of our community you serve, including any relevant demographics and the number of people impacted: *

500/500

Please briefly describe any Diversity, Equity and Inclusion (DEI) training, initiatives or strategies that your organization has undertaken and actual or expected outcomes: *

500/500



Please explain briefly what have been your organization's greatest ongoing challenges during COVID, any opportunities you have identified, and how your operations have been altered as a result: *

750/750

PROPOSAL INFORMATION

Proposal title (This name will be used throughout the process; please keep it brief, but descriptive): *

In general, what category does this Proposal fall under? *

Capacity building/infrastructure support

Programmatic needs

Planning initiatives

DEI initiatives

Capital expenditures

Other:

Provide a brief summary of this Proposal: *



What specific need does this Proposal fulfill? *

[Empty text box for proposal need]

500/500

How many people will this Proposal serve directly? *

[Empty text box for number of people]

If this Proposal will have an expected impact beyond those served directly, please explain:

[Empty text box for impact explanation]

Will this Proposal primarily serve residents of Sonoma Valley, the geographic area between Schellville and Kenwood? *

Radio button options: Yes, No

If No, you are not eligible to apply, see Eligibility Requirements.

If you are located outside Sonoma Valley, how will you confirm that these grant funds would be used primarily to serve residents of Sonoma Valley?

[Empty text box for confirmation]

Amount requested from Impact100 Sonoma: *

\$ [Empty text box for amount]

Impetus Grants can be for up to \$25,000.00

Planned Budget Form 2022: *

Choose File Remove File No File Chosen

File uploads may not work on some mobile devices. Note: This form will be found in "Application Process". You will only have to breakdown plan for Impetus Grant funds, and you may round to the nearest dollar.

Tell us briefly about the implementation of this Proposal, including a general timeline, location(s) and personnel involved: *



750/750

List any PARTNERS you may work with to implement this Proposal, and give a short description of their role (eg: provides meeting space):

100/100

PARTNERSHIP: For example, to carry out the proposal the applicant relies on the clients or other resources from other organizations.

List any COLLABORATOR(S) you may work with to implement this Proposal, and briefly explain their role (assuming you are Lead):

100/100

COLLABORATION: Two or more nonprofits share resources and have joint responsibility for managing and carrying out the proposal. In such a case, one participating nonprofit needs to be identified as the lead agency, and is responsible for the financial management of Impact100 Sonoma grant funds.

Upload your signed Partner/Collaborator form(s):

Choose File Remove File No File Chosen

File uploads may not work on some mobile devices. Forms found in Application Process. If you have more than 4 partners or collaborators, please submit additional forms via email

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500/500

In summary, how does this Proposal relate to your core mission and how will it assist you in meeting your goals? *

750/750

Is there anything else that you would like us to know about your organization or this Proposal?

750/750

ORGANIZATIONAL INFORMATION

Own building? *

Yes

No

Lease building/space? *

Yes

No

Expiration date of lease:

Organization's EIN#: *



Directors and Officers Insurance:

Yes

No

General liability insurance:

Yes

No

Current or threatened litigation, or recent judgments, against the organization or any senior staff for the past two years? *

Yes

No

If yes, please explain:

250/250

Total number of paid staff: *

Number of paid F/T equivalents: *

Is anyone on your staff* working in a volunteer capacity? *

Yes

No

If Yes, how many and in what roles?

*People serving in key administrative roles

Estimated in-kind value of this unpaid staff:

\$

When does your fiscal year end? *

Current Operating Budget for fiscal year ending in 2022: *

\$

Total income for fiscal year ending in 2021: *

\$

Total expenses for fiscal year ending in 2021: *

Total assets at the end of fiscal year 2021: *



INCOME SOURCES FOR MOST RECENT FISCAL YEAR 2021

(Provide in percentages, not dollar amounts. The total must equal 100%):

Board member contributions (%) *

Other individual contributions (%) *

Foundations & corporations (%) *

Admissions, dues or service fees (%) *

Investments & interest income (%) *

Government contracts and grants (%) *

Net from special events (%) *

Other (%)

Did your organization receive a PPP loan? *

Yes

No

If yes (PPP), for what amount?

\$

Did your organization receive forgiveness of all or part of the PPP loan?

Yes

No

If yes (PPP), what percentage?

Did your organization receive any other SBA/EIDL program funds? *

Yes

If yes (SBA/EIDL), for what amount?

\$



Did your organization receive forgiveness of all or part of the SBA/EIDL funds?

If yes (SBA/EIDL), what percentage?

Yes

No

SIGNATURE


Signature of CEO or Executive Director: *

[\[clear\]](#)

Our Board of Directors authorizes submission of this grant request to Impact100 Sonoma and authorizes our CEO or Executive Director to sign a grant contract on behalf of the organization should any grant funds be awarded. Our tax-exempt status under IRS Section 501(c)(3) has not been revoked or modified and our certification with the State of California is current. We certify that to the best of our knowledge, the statements and financial information contained in this submission are true, correct and complete and that we will notify Impact100 Sonoma if any qualifying information changes within the grant process period. *

By checking this box, we certify the above statement is true.

Date/Time: *

Oct 24 2021 
02 : 11 PM

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