

STEP 1. ELIGIBILITY CRITERIA**STEP 2. APPLICATION FORM**

Organization Name

We are a 501(c)(3) organization.

We certify

Select the county or counties where your proposal will be implemented: (Select at least one)

Morris Passaic Somerset Sussex Union [list additional counties](#)

Our organization has been in operation for 2 years or longer.

We certify

Our proposal addresses one or more of Impact100 Garden State's focus areas:

- Arts & Culture: Programs that develop, cultivate, or enhance the cultural and artistic climate.
- Children & Families: Programs that strengthen or enhance the lives of children and families.
- Education: Programs that advance or improve learning opportunities for children and/or adults.
- Environment/Preservation/Recreation: Programs that restore, conserve, or improve natural surroundings and resources (including for recreational use); improve the welfare of animals; preserve buildings and structures; or support research, public awareness, or education relating to the environment.
- Health & Wellness: Programs that improve the physical and/or mental well-being of people.

We certify

Certification

- Our CEO/Executive Director (ED) authorizes submission of this proposal.
- Our tax-exempt status under IRS Section 501(c)(3) has not been revoked or modified.
- We acknowledge that Letters of Agreement or Memoranda of Understanding are needed if selected for an Impact100 Garden State site visit for any proposal requiring cooperation from other organizations for things such as: building use, proposal implementation in or participation of schools, hospitals, police departments, etc. or for declared collaborative/joint applications.
- We will be advised in March 2024 if selected for a site visit and will have several weeks to produce these documents. We acknowledge that we should seek these documents in advance of site visit notification.
- We understand that if we are selected to receive a \$100,000 grant, we will be expected to sign a Grant Agreement; we will be required to provide periodic reports documenting funds spent and confirming that the funds were spent solely for the purpose for which the grant was sought; and we will receive incremental disbursements for the duration of our grant period.
- We agree that if we are selected to receive a \$100,000 grant, we will be asked to provide Certificate of Insurance and add Impact100 Garden State and CFNJ as additional insureds for general liability, automobile and worker's compensation insurance.
- We agree that if provided funds from Impact100 Garden State, we will not discriminate against any employee or applicant for services or participation in this proposal based on religion, race, gender, sexual orientation, and/or physical or cognitive disabilities.
- We certify that Impact100 Garden State grant funds, if awarded, will not be used for a faith-based project or program which requires participation in activities of a particular faith, denomination, or religion to benefit from the project or program.
- We certify that, to the best of our knowledge, the statements contained in this application are true, accurate and complete.

Signature of CEO/ED

CONTINUE →



TELL US ABOUT YOUR ORGANIZATION	TELL US ABOUT YOUR PROPOSAL	ACCOUNTABILITY AND OUTCOMES	BUDGET AND STAFFING	INVOLVEMENT OF ANY OTHER ORGANIZATIONS	REQUIRED FINANCIAL INFORMATION	FINALIZE
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I. Tell Us About Your Organization

1. General Information

Organization's legal name	Organization's website	Organization's Address	Organization's Federal Tax ID (...)
Primary contact name	Primary contact title	Primary contact phone	Primary contact email
CEO/ED name	CEO/ED title	CEO/ED phone	CEO/ED email
Financial contact name	Financial contact title	Financial contact phone	Financial contact email

Social Media (optional)

Facebook URL	Instagram URL	X formerly known as Twitter URL	YouTube URL
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2. Mission Statement: 0 of 200 words max

3. List your organization's major accomplishments over the past 2 years: 0 of 200 words max

4. List your organization's major priorities for the next 2 years: 0 of 200 words max

5. Current staffing at your organization:

Number of paid full-time employees	Number of paid part-time employees	Number of volunteers
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6. As an organization, how have you incorporated the community you serve into your work and to advance your commitment to diversity, equity and inclusion? (For example: leadership/Board involvement, staffing, translation services provided, volunteers sought, feedback sought, partnerships sought, etc.)? 0 of 200 words max

7. Specifically in reference to this proposal, what efforts have you made with the proposed recipient community in the planning, programming and/or delivery of services? 0 of 200 words max

STEP 1. ELIGIBILITY CRITERIA 



STEP 2. APPLICATION FORM

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II. Tell Us About Your Proposal

1. Name and brief introduction to your proposal (1 sentence for each topic):

- Where and what is the need in the community? (Please specify the location of this community.)
- What activities will you implement to address this need?
- Who and how many will benefit from the implementation of your proposal?
- What outcomes do you expect will result from the implementation of your proposal?

0 of 100 words max

2. Is your proposal a future expansion of a current program, or is it a new/pilot program?

- Future expansion of a current program New/Pilot program

3. What are you proposing to do and why? Be sure to include the following:

- What is the need in the community and how is this need not met by existing services in the area? (about 75 words)
- Why do you think your organization is positioned to fulfill this need? (about 50 words)
- Describe who and how many will benefit from the implementation of your proposal. And, what is the expected duration of your proposal? (about 75 words)
- Explain exactly what you plan to do to address the needs of the beneficiaries and how you will use the grant funding. (about 400 words)
- What are the expected outcomes for the beneficiaries as a result of the implementation of your proposal? (If the proposal is a future expansion, detail what has happened thus far.) (about 100 words)

0 of 700 words max

4. Where do the beneficiaries of your proposal reside? (select all counties that apply)

- Morris Passaic Somerset Sussex Union [list additional counties](#)

5. At the conclusion of the Impact100 Garden State funding, how many will have benefited from the proposal?

0 of 25 words max

6. Over how many years do you expect to use the Impact100 Garden State funding?

- 1 year 2 years 3 years

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III. Accountability and Outcomes

1. What are the steps to be taken and approximate timeline to implement your proposal if awarded a \$100,000 grant in June 2024?
 (Please enter N/A for any unused fields.)

Year 1	Activities
July 2024 - September 2024	<input type="text"/>
October 2024 - December 2024	<input type="text"/>
January 2025 - March 2025	<input type="text"/>
April 2025 - June 2025	<input type="text"/>

Year 2 (optional)	Activities
July 2025 - September 2025	<input type="text"/>
October 2025 - December 2025	<input type="text"/>
January 2026 - March 2026	<input type="text"/>
April 2026 - June 2026	<input type="text"/>

Year 3 (optional)	Activities
July 2026 - September 2026	<input type="text"/>
October 2026 - December 2026	<input type="text"/>
January 2027 - March 2027	<input type="text"/>
April 2027 - June 2027	<input type="text"/>

2. Describe the plan to measure the expected outcomes for the beneficiaries of your proposal as described in "Tell Us About Your Proposal." If this is an existing service, include the methods used to measure results thus far. 0 of 200 words max

3. How will you use this information/data to determine what will happen following the conclusion of the Impact100 Garden State grant funding (i.e. modification of services for greater success, expansion, future funding, etc.)? 0 of 100 words max



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IV. Budget and Staffing

1. Upload a preliminary budget for the proposal (in PDF format) using the provided **budget template**. Please note, the Excel budget template includes 3 tabs: 1. directions, 2. the template, and 3. a **sample template**.

 Choose File No file chosen

2. Complete the proposed staffing table.

PROPOSED STAFFING

	Name/New Hire	Position/Title	Credentials/Qualifications	% Time spent
1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
4	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
5	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
6	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
7	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
8	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
9	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
10	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>



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V. Involvement of Any Other Organizations

Please note: If this proposal requires the involvement of any other organizations* and you are selected for a site visit, documentation of the relationship will be required to proceed through the selection process. In that case, you will be advised in March 2024 and will have several weeks to produce these documents.

- **Cooperation of Other Organizations:** an organization gives formal approval (via a Letter of Agreement or Memoranda of Understanding) to utilize their space or their resources. (For example: a Principal or Board of Education allows services in a school or referrals of their students to proposed services; a place of worship allows space in their facility to be used; an administrator allows a pamphlet to be distributed in a hospital; a police department provides officers to participate in proposed services, etc.)
- **Collaborative Partnership:** is when two or more 501(c)(3) organizations are joining together to implement the proposal and the applicant organization will receive 100% of the Impact100 Garden State funding, but plans to disburse a portion of the funding to the collaborating organization for their portion of services. The applicant organization is responsible for managing the funds and ensuring the collaborating organization fulfills its portion of the proposal.
- **Joint Application:** is when two or more 501(c)(3) organizations are joining together to implement the proposal and each organization will receive a portion of the Impact100 Garden State funding. Each organization is responsible for managing the funds disbursed to them and ensuring their organization fulfills its portion of the proposal. In this type of application, financial documentation is required from each of the applicants.

1. Will you need the cooperation of any other organizations to implement your proposal? If so, list these organizations and their role. 0 of 100 words max

2. Will you need permits, licenses, or other permissions to complete the proposal? If so, list these items. 0 of 100 words max

3. Is this proposal a Collaborative Partnership or Joint Application?

No Collaborative Partnership Joint Application

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VI. Required Financial Information

Top five funding sources in 2023

	Source of Funding 2023	Amount
1	<input type="text"/>	\$ <input type="text"/>
2	<input type="text"/>	\$ <input type="text"/>
3	<input type="text"/>	\$ <input type="text"/>
4	<input type="text"/>	\$ <input type="text"/>
5	<input type="text"/>	\$ <input type="text"/>

Top five funding sources in 2022

	Source of Funding 2022	Amount
1	<input type="text"/>	\$ <input type="text"/>
2	<input type="text"/>	\$ <input type="text"/>
3	<input type="text"/>	\$ <input type="text"/>
4	<input type="text"/>	\$ <input type="text"/>
5	<input type="text"/>	\$ <input type="text"/>

We require submission of two years of audited or reviewed financial statements and your organization's most recent interim balance sheet, P&L, and cash flow statement. The table below summarizes our financial statement requirements for three common year end dates. Please also note that failure to provide the required financial statements, including complete interim financials (balance sheet, P&L, and cash flow statement) may be cause for disqualification.

Attachment	Fiscal Year End June 30	Fiscal Year End Sept 30	Fiscal Year End Dec 31
First Year Audited/Reviewed	6/30/23 Audited/Reviewed Financials	9/30/23 Audited/Reviewed Financials (If 2023 audit/review is not complete, then 2022)	12/31/22 Audited/Reviewed Financials
Second Year Audited/Reviewed	6/30/22 Audited/Reviewed Financials	9/30/22 Audited/Reviewed Financials (If 2022 audit/review is not complete, then 2021)	12/31/21 Audited/Reviewed Financials
Interim Financials (Unaudited /Unreviewed)	7/1/23 – 12/31/23 Internal Financials	10/1/23 – 12/31/23 Internal Financials (If the 2023 audit/review is not complete, then 10/1/22 to 12/31/23 Internal Financials)	1/1/23 – 12/31/23 Internal Financials

VII. Submission of Required Documentation

Please submit the following in PDF format (no more than 10 MB in size). Save your progress before uploading any attachments. All uploads are mandatory.

- No file chosen **IRS 501(c)(3) determination letter**
- No file chosen **Most recent IRS Form 990, including Schedule A**
- No file chosen **Year 1 of audited or reviewed financial statements**
- No file chosen **Year 2 of audited or reviewed financial statements**
- No file chosen **Most recent Interim Balance Sheet**
- No file chosen **Most recent Interim P&L**
- No file chosen **Most recent Interim Cash Flow Statement**

STEP 1. ELIGIBILITY CRITERIA ✓



STEP 2. APPLICATION FORM

TELL US ABOUT
YOUR
ORGANIZATION

TELL US ABOUT
YOUR PROPOSAL

ACCOUNTABILITY
AND OUTCOMES

BUDGET AND
STAFFING

INVOLVEMENT OF
ANY OTHER
ORGANIZATIONS

REQUIRED
FINANCIAL
INFORMATION

FINALIZE

Before submitting, it is crucial to review your application to ensure accuracy and completeness. Double-check for any missing or incorrectly filled fields or typos. Once your application is submitted, Impact100 Garden State cannot accept re-submissions or corrections to your application.

Impact100 Garden State will send you an email confirming successful submission of your application along with a copy of your completed application. An applicant who receives an error message via email should contact grants@Impact100GardenState.org.

SUBMIT FORM →

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You have **1 hour(s) and 57 minutes** remaining to click the Save Progress button on this form before the system logs you out.

SAVE PROGRESS