2026-2027 Impact100 Greater Milwaukee

Impact100 Greater Milwaukee

Organization Information

Organization Legal Name, if different from above
Character Limit: 250

Year your organization was founded*
Character Limit: 4

Organization's total annual revenue as shown on your 990 (Part 1, line 12)*
Character Limit: 20

Is your organization's Corporate license with the WDFI current/active?*
Your organization's Corporate license with the Wisconsin Department of Financial Institutions (WDFI) must be current (2026) at time of application. See https://apps.dfi.wi.gov/apps/corpsearch/search.aspx

Choices
Yes
No

Is your organization's Charitable license with the WDFI current/active?*
Per WDFI's website there are two separate registrations-the Corporate and the Charitable. Your organization must be current (7/31/2027) at time of application. See https://apps.dfi.wi.gov/ice/berg/registration/organizationcredentialsearch.aspx for verification.

Choices
Yes
No

Has your organization's 501(c)3 status been revoked or modified within the last three years?*
Choices
Yes
No

If yes, please explain
Character Limit: 1000

Does the organization have independently prepared financial statements for the past 3 fiscal years?*

To qualify, the statements must be audited or reviewed by a qualified CPA firm.

Choices

Yes

No

Is your organization a local chapter, member or affiliate of a larger organization?*

Choices

Yes

No

If yes, do you file a separate 990 form?

Choices

Yes

No

Organization Profile

What is your organization's Mission Statement?*

Character Limit: 1000

Please provide a brief history of your organization.*

Describe your organization, including whom you serve, your primary programs, and your most significant accomplishments over the past three years.

Help a reviewer who may be unfamiliar with your organization understand the overall scope of your work and the role your organization plays in the community.

Character Limit: 2000

What distinguishes your organization from others addressing similar issues in your service area?*

Focus on your unique strengths, expertise, partnerships, or approach.

Character Limit: 750

Additional Information

If there is anything else about your organization that you would like us to know, please include it here, otherwise you can leave this answer blank.

Character Limit: 500

Number of Full Time Employees*

Character Limit: 50

Number of Part Time Employees*
Character Limit: 50

Number of Volunteers*
Character Limit: 50

General Project/Program Information

Project/Program Title*
Character Limit: 50

Focus Area Guidance:
Please rank the project/program by its association with the following focus areas with 1 having the greatest connection to the focus area and 5 having the least. Please see a description of each focus area on our website.

Focus Area #1*
Choices
Arts & Culture
Education
Environment & Revitalization
Family
Health & Wellness

Focus Area #2*
Choices
Arts & Culture
Education
Environment & Revitalization
Family
Health & Wellness

Focus Area #3*
Choices
Arts & Culture
Education
Environment & Revitalization
Family
Health & Wellness

Focus Area #4*
Choices
Arts & Culture
Education
Environment & Revitalization

Family
Health & Wellness

Focus Area #5*

Choices

Arts & Culture
Education
Environment & Revitalization
Family
Health & Wellness

Community Need*

Describe the problem or opportunity this proposed project/program addresses. Explain what is happening, who is affected, why it matters, and how you know this need exists. Focus on the need itself.

Character Limit: 1200

Project/Program Summary*

Describe your proposed project/program and how it will address the community need identified above. Explain what you plan to do, how the people or community you serve will benefit, and what Impact100 Greater Milwaukee's $100,000 grant would make possible. Briefly describe what makes this project/program impactful and transformative.

Character Limit: 1500

Population Served*

Who, and how many, will your project/program serve? Please be as specific as possible in your description. Is this a new population for your services or one you have served before?

Character Limit: 500

Sustainability*

Describe how your organization plans to sustain the project/program.

Character Limit: 500

This grant will fund a project/program that is

(check all that apply)

Choices

Existing
Expanding
New

County or Counties impacted by the project/program*

Please check all counties that would be impacted by the proposed project/program.

Choices

Milwaukee County

Ozaukee County
Washington County
Waukesha County
Other

Total cost of proposed project/program*

Character Limit: 20

Total dollars committed to date*

Character Limit: 20

How does Impact100 Greater Milwaukee define collaboration?

Please review the FAQs on our website for details on collaboration.

For Collaborative Project/Programs Only

If your project/program is a collaboration as defined in our FAQ's, please briefly explain why each collaborator is important to the project/program.

Character Limit: 1000

LOI Attachments

Project/Program Budget for Proposed Impact100 Funding*

Please download and use the budget form template. *Once completed, please upload it to the application*. Include **only the budget for the proposed project/program, not your organization's overall operating budget.**

The budget should include, at a minimum, total project/program revenues by source (e.g., grants from public and private sources, donations, program service revenue, etc.) and **detailed expenses** related to the proposed project/program. Please provide specific expense line items whenever possible, such as salaries, employee benefits, equipment, supplies, rent, professional services, and other project/program related costs.

We understand that some expenses may be estimates at the time of application. Please include your best estimate and use the **Budget Narrative** to provide additional explanation or clarify assumptions as needed.

You may **add expense line items to the budget template** to accurately reflect the anticipated costs of your project/program. Please do not remove or alter the formulas incorporated into the template. If applicable, a column is provided for collaborating organizations.

File Size Limit: 4 MB

Your organization's most recently filed IRS 990 form.*

As a reminder, according to our eligibility requirements – Total Revenue (Line12) must be between $500,000 and $7,000,000 for the past three 990 filings.

Please note MiB maximum allowed.

File Size Limit: 15 MB

Your organization's current Wisconsin Department of Financial Institutions Charitable license.*

Please download certificate or online proof of current license.

File Size Limit: 15 MB

Your organization's current Wisconsin Department of Financial Institutions Corporate license.*

Please download certificate or online proof of current license.

File Size Limit: 15 MB

Certification

THANK YOU! You are at the end of the LOI. Click SAVE if you feel you would like to return to the LOI for some reason. Certify, sign and click SUBMIT if you are done and ready to submit.

Once submitted you will receive an email confirmation that your LOI has been received. Once the LOI has been submitted (and received) by Impact100 Greater Milwaukee you will not be able to make changes.

Instructions on printing or saving a completed LOI:

You may print or save an electronic copy of this completed LOI by clicking on the "LOI Packet" button in the upper right corner of the screen (this will appear once you have at least saved your LOI as draft). The "LOI Packet" will convert your entire LOI with the questions and responses to a pdf which you can then download and print or save to your computer.

Certification*

I certify that the information provided in the application is accurate and verifiable.

Choices

Yes

No

Executive Director*

By typing my name below, I certify that I am the Executive Director of the applicant organization and that to the best of my knowledge, the information and statements contained in this application are accurate and complete.

Character Limit: 150