

Fact Sheet

Information about your nonprofit and your proposed project



1. Date:
2. Presenter (Name, Phone, Email):
3. Name of Charitable Organization:
4. 501(c)(3) Tax ID Number:
5. Organization Contact Person (Name, phone, e-mail):
6. Organization Address:
7. Organization URL:
8. Date organization started:
9. Did the organization submit a 990 form to the IRS in the past year? Yes / No
10. How would the donated funds be used? [**Note: We sponsor specific projects for Salt Lake County residents. Our donation cannot go to a capital fund for ongoing expenses.** Use of the donation for paying staff is highly discouraged.]
11. Proposed budget for donation [Note that recent Impact Awards have been between \$22,000 and \$25,000]:
12. What are the current sources of funding for the organization?
13. How much money in donations did the organization collect in the past year?
14. What population does the organization serve?
15. How many people will receive services annually (approximately), if known?
16. If chosen, make checks payable to:
17. **This organization agrees not to sell, give, or use individual contact information of members of 100 Women Who Care for additional solicitation of their own or any other organization.** Yes / No

Signature of 100 Women Who Care member: