

**Start:** 11/16/2020 **Deadline:** 01/15/2021 **Grace**

**Period:** None

**Application Fee (USD):** \$0.00 ?

**Applications:** 9 in progress

**Share:** <https://impact100westchester.slideroom.com/#/permalink/pr>

## Letter of Inquiry - 2021 Grant Cycle

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Deadline: 01/15/2021

### Forms

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#### ***Start here...***

1. **To help us properly identify this application, the SlideRoom account profile should indicate the organization's name. Before proceeding any further, please confirm that the SlideRoom profile reflects the organization name.**

Contact SlideRoom support at [support@slideroom.com](mailto:support@slideroom.com) if you need help updating your account profile.

2. **Please confirm that you have reviewed our Eligibility Guidelines in detail, which can be found on our website at: <http://impact100westchester.org/eligibility/>**

Choose one of the following:

#### ***Organization***

1. **Legal name of the organization applying for the Impact100 Westchester grant:**

2. **Is your organization applying for this grant under its own 501(c)(3)?**

If you are applying under a fiscal sponsor, answer "No" and explain below.

*\* This question has conditional followup questions.*

3. **Site address where the main activities are located:**

4. **Mailing address, if different from site address:**

5. **Website:**

6. **Executive Director Name:**
7. **Executive Director Email:**
8. **Executive Director Phone:**  
(xxx) xxx-xxxx
9. **Federal Tax ID:**  
Enter the Federal Employer Identification Number (EIN) (##-#####).
10. **When did the organization begin operations?**  
Enter the date (mm/dd/yyyy)  
*\* This question has conditional followup questions.*
11. **Upload your 501(c)(3) Determination Letter confirming you are a charitable organization exempt from Federal Income Taxes.**
12. **Has the organization's 501(c)3 status been in full force and effect throughout the past 3 years?**  
By answering "Yes" to this question, you are confirming that your organization has had uninterrupted 501(c)3 status for at least the past 3 years.  
*\* This question has conditional followup questions.*
13. **When does your Fiscal Year end?**  
Provide your fiscal year end date in 2021 in mm/dd/yyyy, e.g. 06/30/2021
14. **In the past 3 years, has your CPA or auditor expressed any concerns regarding your organization's financial health and/or ability to continue to operate as a going concern?**  
*\* This question has conditional followup questions.*
15. **Has your organization ever received an Impact100 Westchester Project Grant (\$80,000 or greater)**  
Please choose one of the following:  
*\* This question has conditional followup questions.*

## ***Mission/Major Programs***

1. **Provide your organization's mission statement.**  
1000 character limit, including spaces.
2. **Describe the major programs that support your organization's mission.**  
1800 character limit, including spaces.

## ***Covid 19 Questions***

1. **The following questions are specifically related to the impact of Covid-19 on your organization. This section was added this year to provide each applicant the maximum opportunity to explain how the pandemic has impacted its operations and to describe any extraordinary measures the organization has taken to address the unique challenges it faces in light of the pandemic.**  
500 character limit; if there are no changes, state None.
2. **Briefly describe the change, if any, in your operations that took place to manage the effects of Covid 19**  
Please include changes to staffing, facilities, and any other aspects of your operations to manage the effects of Covid 19. 500 character limit; if there are no changes, state None.
3. **Briefly describe any change in senior management or the board as a result of Covid 19?**  
Provide the title/position of the person/s who have left and whether they have been replaced. Are the replacements persons with similar experience? 500 character limit; if there are no changes, state None.
4. **List up to 5 additional costs that your organization has incurred as a result of Covid 19?**  
If none, state None in the first row.
5. **Briefly describe the impact, if any, on your fundraising efforts as a result of Covid 19?**  
Describe near-term and potential long-term effect on fundraising, (incl. amount of any actual or expected reductions?).
6. **Did your organization receive a PPP (Payroll Protection Program) Loan?**  
*\* This question has conditional followup questions.*
7. **Did your organization receive an EIDL (Economic Injury Disaster Loan)?**  
*\* This question has conditional followup questions.*
8. **List any additional grants awarded or received in 2020.**  
Include new and existing sources, renewals and extensions. If none, state None in the first row.
9. **List any additional loans or lines of credit in 2020.**  
Include new and existing sources, renewals and extensions. If none, state None in the first row.
10. **List aggregate Board donations for calendar 2019-2021.**  
Enter aggregate \$ donated. If none, state None in the first row.
11. **During 2020, has your organization raised funds from sources other than PPP, EIDL, Program Revenue, Grants, Loans/Lines-of-Credit and Donations?**  
E.g. Sale of surplus assets  
*\* This question has conditional followup questions.*
12. **Short-term Liquidity - Assuming no additional donations or grants, how many months of unrestricted cash and other liquid funds do you have to cover operating expenses?**  
Provide information on cash on hand and availability under credit facilities. E.g. we have \$xx in cash, \$xx available under our line of credit, and a remaining \$xx available under our term loan. With no additional

donations or grants, these resources are expected to cover operating expenses for x months.

13. **Did you defer payroll taxes?**

*\* This question has conditional followup questions.*

## **Financial Documents- Letter of Inquiry (Covid 19)**

1. **Is your AUDITED or REVIEWED financial statement for fiscal 2020 available?**

Note: this question requires you to upload 3 years of full financial statements, including independent accountant's opinion. The initial question refers to the fiscal year ended during calendar 2020 (eg year ended 6/30/20 or 12/31/20).

*\* This question has conditional followup questions.*

2. **Upload your most recently filed IRS Form 990 together with all supporting schedules.**

Note: SlideRoom has a 10 MB size limit for PDFs; you may need to compress your file before uploading; see Grant FAQs under Apply for a Grant on our website for further information.

3. **What is the Name of the Organization per the uploaded Form 990?**

4. **Does this name exactly match the name of the grant applicant?**

Please refer to Question 1 in the Organization section of this application.

*\* This question has conditional followup questions.*

5. **What is the Year End Date noted at the top of the uploaded Form 990?**

Box A at the top of the Form 990 (mm/dd/yyyy)

*\* This question has conditional followup questions.*

6. **Enter the "Total Revenue for the Current Year", according to the uploaded Form 990 Part 1 Line 12:**

Enter the amount as a whole number without commas.

*\* This question has conditional followup questions.*

7. **Are you able to provide at least one quarter of operating results for fiscal 2021?**

The answer to this question depends on your fiscal year end. For instance, if your fiscal year end is on or before September 30, we would expect you to answer "yes" to this question and to upload your Statement of Activities for fiscal YTD through December 2020 and Statement of Financial Position as of December 31.

Otherwise, we would expect you to answer "No" to this question and advise the date of your fiscal year end in the follow-up question.

*\* This question has conditional followup questions.*

8. **Upload your Operating Budget for the fiscal year ending during 2021.**

If your 2021 Operating Budget has not yet been finalized, upload your 2020 Operating Budget. If you are invited to submit a Full Proposal, you will be required to upload your 2021 Operating Budget at that time.

9. **Upload your Operating Budget for the fiscal year immediately preceding the documents uploaded in the prior question.**

E.g. if you uploaded data for FY 2020 in previous question, you should upload FY 2019 data here.

10. **Financial Contact Person:**

Provide the name of the person we can contact if we have questions regarding financial information or documents included with this application.

11. **Financial Contact Title/Role/Position:**

Provide title/role/position for Financial Contact

12. **Financial contact phone number**

13. **Financial Contact Email:**

## ***Project***

1. **Project Title:**

Enter the title of the project.

2. **What is the nature of this project?**

Choose one of the following:

3. **Project Overview**

Provide a clear description of the project, including specific project goals and objectives with relevant data/metrics, as applicable. 2500 character limit, including spaces.

4. **Describe the project logistics, including timing, key personnel, facilities and other resources required for the project to be successful.**

2500 character limit, including spaces.

5. **Will this project involve other organizations?**

*\* This question has conditional followup questions.*

6. **Describe the target population for this project.**

Please include number served, demographics, target market, residence/location of beneficiaries, etc. 1000 character limit, including spaces.

7. **Describe the unmet needs of the target population and how your project will address those needs.**

Include specific data, solid research or agency experience, if available. 2500 character limit, including spaces.

8. **Where will activities for this project take place?**

Describe the venue/location/facility and specific Westchester location(s). 500 character limit, including spaces.

9. **What percent of the people to be served by this project are Westchester residents? Explain as necessary.**  
Enter number (eg "80%") and optional description
10. **How will this project transform your organization and the target population?**  
1000 character limit, including spaces.
11. **What is your plan for sustaining this project after the funding from Impact100 is over?**  
1000 character limit, including spaces.

## ***Project Budget***

1. **Upload your completed Project Budget Worksheet ("PBW").**  
Your file should be uploaded in Excel format and the filename should match the name of your organization.
2. **Is the total cost of your project greater than the Impact100 Westchester Grant Award amount?**  
*\* This question has conditional followup questions.*
3. **PBW cell D19: Facilities Construction / Renovation**  
Enter the amount as a whole number without commas.  
*\* This question has conditional followup questions.*
4. **PBW cell D20: Supplies / Services**  
Enter the amount as a whole number without commas.
5. **PBW cell D21: Transportation**  
Enter the amount as a whole number without commas.
6. **PBW cell D22: Technology**  
Enter the amount as a whole number without commas.
7. **PBW cell D23: Incremental Staff Expenditures**  
Enter the amount as a whole number without commas.
8. **PBW cell D24: Existing Staff Expenditures**  
Enter the amount as a whole number without commas.  
*\* This question has conditional followup questions.*
9. **PBW cell D25: Organizational Overhead**  
Enter the amount as a whole number without commas.
10. **PBW cell D26: Other**

Enter the amount as a whole number without commas.

## ***Letter of Inquiry Authorization***

### **1. Executive Director Certification:**

By typing the Executive Director's name below, you are certifying that the Executive Director attests to the accuracy and completeness of this Letter of Inquiry.