



Nonprofit Organization Nomination Form

Nonprofit Name: _____

Website: _____

Nonprofit Address: _____

Contact Name: _____

Contact Email: _____

Contact Phone: _____

Mission Statement: _____

Year nonprofit attained 501(c)(3) or 501(c)(19) status: _____ Number of Volunteers: _____

Approximately how many people receive your services on an annual basis? _____

Geographic area served by nonprofit: _____

What need does your organization strive to fill? How is the Pierce/St. Croix area impacted by your organization? _____

How would the Impact Award be used locally? _____

What percent of your budget is spent on overhead/salaries/administrative fees? _____

If selected, do you agree to present at our next meeting to describe the impact of the donation? _____

Do you agree that your organization will NOT sell, give, or use Power of 100 Women - River Falls contact information for solicitations by themselves or other organizations? _____

Do you agree to provide charitable tax receipts to all members? _____

If selected, to whom should checks be payable? _____

Please attach the following documents: (incomplete applications will not be considered)

- Recent Annual Report
- Current year **AND** previous year budget
- Current year Income/Expenses
- IRS 501(c)(3) or IRS 501(c)(19) status verification

All information must be received **45 days** before the selected impact meeting. The spring 2026 entry deadline is February 17, 2026, and the fall 2026 entry deadline is August 18, 2026.

Impact meetings are held on the first Thursdays in April and in October.

Email completed applications to: powerof100riverfalls@gmail.com

OR mail to: Power of 100 Women – River Falls

Attn: Nancy Foley, 2051 Greenwood Valley Dr., River Falls, WI 54022

Member of Power of 100 Women - River Falls making nomination: _____