ORGANISATION INFORMATION

* indicates a required field

IMPACT Philanthropy Application Program Guidelines 2024

*   ☐   I confirm that I have read and understood the guidelines (above) prior to completing this form.

1. Organisation details

Organisation *   Organisation Name

ABN *

The ABN provided will be used to look up the following information. Click Lookup above to check that you have entered the ABN correctly.

Information from the Australian Business Register	
ABN	
Entity name	
ABN status	
Entity type	
Goods & Services Tax (GST)	
DGR Endorsed	
ATO Charity Type	More information
ACNC Registration	
Tax Concessions	
Main business location	

Please ensure your ABN and details listed above are correct as we will use this information to confirm your eligibility, including your charitable tax status and ACNC registration. Perpetual will not be responsible for any incorrect data.

Street Address *   Address

Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required.

Phone (business hours) *

Must be an Australian phone number.

General email *

Must be an email address.

Website *

Must be a URL.

1.1 Head of organisation details (CEO, Head of Department / School, Director of Institute etc)

Name *

Title	First Name	Last Name

Position *

Email *

Gender: How do you identify? *

1.2 Chair details

Name *

Title	First Name	Last Name

Email *

Gender: How do you identify? *

1.3 Chief Finance Officer details

Name *

Title	First Name	Last Name

Email *

Gender: How do you identify? *

1.4 Applicant details

Name *

Title	First Name	Last Name

Position *

Phone (business hours) *

Email *

Gender: How do you identify? *

1.5 What is the organisation's mission statement? *

Word count:
Word limit of 50 words.

I confirm the organisation is a going concern (can continue to operate on a financially viable basis into the foreseeable future). *

☐ Yes ☐ No

I confirm the organisation is not under administration. *

Responding No will make the application ineligible.

What is the gender composition of your organisation's Board?

% Female *

% Male *

% Gender diverse / Non-binary *

Total (must equal 100%) *

This number/amount is calculated.

Resourcing Insights

Perpetual does not assess the data provided below. This will be used to provide useful insights into the sector. For the first five questions/figures if unsure of any amount, please leave blank.

What is the annual revenue generated by the organisation?

$

As per financial statements.

Fundraising Income

$

Must be a dollar amount.

Fundraising Expenditure

$

Must be a dollar amount.
Enter as a positive amount.

Total Expenses

$

Must be a dollar amount.
Enter as a positive amount.

Total Profit or Loss

$

Must be a dollar amount.
Use minus (-) sign for negative amounts.

Provide a percentage breakdown of how revenue is generated (must equal 100%)

(If an error occurs, please remove the % sign)

Government % *

Philanthropic trusts % *

Corporate / Sponsorship % *

Direct fundraising % *

Membership fees % *

Investment income % *

Bequests % *

Other % *

Total %

This number/amount is calculated.

What types of fundraising programs are you currently operating?

☐ Direct marketing ☐ Events (in person) ☐ Bequests

☐ Digital (ie social media) ☐ Events (virtual) ☐ Capital campaigns

☐ Face to face ☐ Community ☐ Trusts and Foundations

☐ Telephone ☐ Major gifts ☐ Other:

No more than 3 choices may be selected.
These should reflect your top 3 programs.

What is your charity size? *
☐ Small ☐ Medium ☐ Large
As classified by the ACNC.

How many people work within the organisation (paid)? *

Include part-time & casual staff.

How many people work within the organisation (active volunteers)? *

Has the number of active volunteers within the organisation increased or decreased over the last 3 years? *

ORGANISATION INFORMATION CONT'D

* indicates a required field

The organisation works within which sector? *

Is the organisation a university, hospital or medical research institution? *
☐ Yes ☐ No

If yes, which department

The organisation or department primarily assists people of the following group *

1.6 What is the primary objective of the organisation? *

Word count:
Word limit of 100 words.

1.7 Provide a brief overview of your organisation's top strategic priorities for 2024 - 2025 *

Word count:
Word limit of 100 words.

1.8 List between three and five key performance indicators (KPIs) that your organisation uses to measure the efficient use of its resources? *

Word count:
Word limit of 150 words. Provide targets or goals to demonstrate how you measure each of your efficiency KPIs.

1.9 Demonstrate how your organisation is performing against the key performance indicators listed above. *

Word count:
Word limit of 150 words.

1.10. List between three and five key performance indicators (KPIs) that your organisation uses to measure how effective it is at achieving its mission *

Word count:
Word limit of 150 words. Include targets and measures used to demonstrate performance against KPIs. Must be relevant to mission and/or strategic priorities.

1.11 Demonstrate how your organisation is performing against the key performance indicators listed above. *

Word limit of 150 words.

1.12 Provide three to five external forces or trends that are presenting challenges to your organisation. List them first, then provide further detail in the box below.

A minimum of 3 are required. These should be high level statements (2-3 words).

1. *

2. *

3. *

4.

5.

Describe why each external force or trend is presenting a challenge to your organisation. *

Word limit of 250 words.

1.13 Provide three to five risks that affect your organisation. List them first, then describe and provide mitigation strategies in the box below.

A minimum of 3 are required. These should be high level statements (2-3 words).

1. *

2. *

3. *

4.

5.

[   ]

Describe each risk and accompanying strategies to mitigate each risk. *

[   ]

Word count:
Word limit of 250 words.

PROJECT INFORMATION

* indicates a required field

2.1 Project Title *

[   ]

Start date *

[   ]

Funding is received in June 2024. The earliest your project can start is July 2024.

End date *

[   ]

Expenditure of funds for standard grants should be completed within one year.

Project Location
Address

[   ]

[   ]

Enter the head office location here, if more than one, and list all locations (or National) at 2.2. Project Description.

Country of activity *

[   ]

The application primarily seeks to address issues in which geographic area? *

[   ]

Is it specific to one of these areas? *

[   ]

Select 'None of the above' if multiple locations or National.

Is this application for Health and Medical Research? *
☐ Yes ☐ No
If yes, complete Section 3 of this form.

What are the primary areas of focus for this project/program? *

No more than 5 choices may be selected.
Required for ACNC classification. You can select items from any area of the list – all have equal value. Only select sub-categories if you want to be more specific. In this question we want to know about the field of work (e.g. arts, sport, health), rather than the types of people it will affect (e.g. young people, refugees).

Total project cost *

$

Must be a whole dollar amount (no cents).

Type of project *

The following will not be considered for funding: retrospective funding, fundraising appeals (incl. general capital appeals), or funding direct to individuals.

2.2 Project description. *

Word count:
Must be no more than 150 words

2.3 Project rationale and context *

Word count:
Word limit of 300 words.

2.4 Project activities *

Word count:
Word limit of 150 words.

The project for which the organisation is seeking funding is *
☐   A new activity ☐   An existing activity

Age of individuals the project in this application primarily aims to assist *

The project in this application primarily assists people with the following conditions *

☐ Alzheimer's disease	☐ Cardiovascular disease	☐ Heart Disease	☐ Multiple sclerosis
☐ Arthritis/ Osteoporosis	☐ Cerebral palsy	☐ Kidney disease	☐ Myeloproliferative diseases
☐ Asthma	☐ Cystic Fibrosis	☐ Lupus	☐ Parkinson's disease

☐ Autism spectrum disorder ☐ Deafness or hearing impairment ☐ Mental health disorders ☐ Not applicable

☐ Blindness or vision impairment ☐ Diabetes ☐ Motor Neurone disease ☐ Other: _____

☐ Cancer ☐ Eating disorders

Select no more than 2 options. If your application does not fit into one of the available options, please select 'not applicable' or 'other'. Selecting 'not applicable' or 'other' will not make your application ineligible.

The most relevant condition to this application is? *

[   ]

Which of the following groups does your project primarily aim to benefit?

Please select up to two, and list them in order of affiliation (1 being most closely aligned).

1. *

[   ]

2.

[   ]

If your application does not fit into one of the available options, please select the option/s that most closely align.

The demographics of the group that the project in this application relates to *

[   ]

Is the organisation Aboriginal or Torres Strait Islander led?
☐ Yes ☐ No

Only required if Aboriginal and Torres Strait Islander peoples selected in demographics question above.

Is your organisation strategy led by people with lived experience?
☐ Yes ☐ No

If yes to the above, please select level of representation.
☐ Board ☐ Senior leadership ☐ Program strategy

The project in this application primarily aims to assist *
☐ Women and girls ☐ Men and boys ☐ Gender Diverse Individuals ☐ Not specific to any one group ☐ Not applicable

No more than 1 choice may be selected.

Have you applied a gender lens / analysis to the project? *
☐ Yes ☐ No ☐ Don't know

Answer Yes if your project is specifically designed to improve opportunities for women and girls, or you think this may occur as a side benefit to your activity. If your project does not address gender inequity, please select No. This will NOT make your application ineligible.

If yes to the above, please provide details.

Word count:
Word limit of 150 words. What will you do to address gender inequity and what changes do you expect will occur as a result?

How are you measuring against the gender lens/analysis?

Word count:
Word limit of 150 words.

Does your project align with any of the Sustainable Development Goals? *
☐ Yes ☐ No ☐ Not Sure
Select based on your project and not the organisation's mission and/or strategic priorities.

Which Sustainable Development Goals does your project best align with?

Please select up to three and list them in order of affiliation (1 being most closely aligned)

List of Sustainable Development Goals

1. *

2.

3.

2.5 Indicate the approximate number of end beneficiaries (and intermediary beneficiaries) of the project

Applicant Instructions (Please read)

2.5.1 Number of end beneficiaries (not staff or volunteers) *

For example number of students, patients, youth, elderly.

2.5.2 Number of intermediary beneficiaries (organisational or non-organisational staff/volunteers)

For example number of teachers, doctors, youth workers, volunteers, charity staff, researchers.

2.5.3 Please provide details about the end beneficiary count estimation (2.5.1)

Word count:
Word limit of 150 words. Who are the end beneficiaries, statistical justifications etc.

2.6 For the end beneficiaries above (2.5.1), what is the likelihood that any given beneficiary will be significantly influenced by the project, with respect to the underlying problem? *
☐   It is virtually certain that any given beneficiary will be significantly influenced
☐   There is a high probability that any given beneficiary will be significantly influenced
☐   There is a moderate probability that any given beneficiary will be significantly influenced
☐   It is possible that any given beneficiary will be significantly influenced
Choose one option. See Applicant Instructions hyperlink above for the definition of the Underlying Problem; educational deficits, incarceration, addiction, mental illness, disability, financial disadvantage, medical condition/illness, crime, disaster, violence, homelessness, unemployment, war/its effects, or other (note carefully that the underlying problem is general not specific).

2.7 For those significantly influenced end beneficiaries above (2.6), what level of relief is expected to be experienced with respect to the underlying problem *
☐   The intervention offered will effectively eliminate the underlying problem
☐   The intervention offered will greatly reduce the underlying problem
☐   The intervention offered will help reduce the underlying problem
☐   The intervention offered will improve quality of life
Choose one option. See Applicant Instructions hyperlink above for the definition of the Underlying Problem; educational deficits, incarceration, addiction, mental illness, disability, financial disadvantage, medical condition/illness, crime, disaster, violence, homelessness, unemployment, war/its effects, or other (note carefully that the underlying problem is general not specific).

2.8 List your project's expected outcomes and provide details on how you will measure these. Leave blank any fields that do not apply to your project.

Outcomes are the changes that will occur for the beneficiaries of your project. Generally outcomes can be framed as an increase or decrease in one or more of the following:

- Skills, knowledge, confidence, aspiration, motivation, (these are generally **immediate** or short-term outcomes)
- Actions, behaviour, change in policy (these are generally **intermediate** or medium term outcomes)
- Social, financial, environmental, physical conditions (these are generally **long-term** outcomes)

Refer to our website for further assistance on how to answer this question.

Intended outcome	Expected timeframe	Indicator	Measurement tool
Word limit of 80 words.	See description above.	Word limit of 80 words. What will you use to measure this outcome, e.g. 'change in number of students completing high school from x to y'.	Word limit of 80 words. For example surveys, interviews, focus groups.

2.9 There are risks associated with any project. List a minimum of 3 risks and accompanying mitigation strategies. *

Word count:
Word limit of 150 words.

FINANCIAL DETAILS

* indicates a required field

2.10 Funding sought

Amount requested *

$

The maximum amount is $120,000 per application (unless otherwise advised). Applications above this amount may be marked ineligible.

Have you received funding for an IPAP project in the last three years? *   ☐ Yes ☐ No

Would your organisation be open to partial funding? *   ☐ Yes ☐ No

If your organisation was invited to apply for funding, please include the following:

Organisations who are invited to apply for funding from a specific trust receive a separate email. If you did not receive an email invitation, this question does not apply to you.

Trust Name

Amount

Must be a dollar amount.

Reference Number

10 digit code provided in the invite email.

Was the invitation for single or multi-year funding?

Amount Requested Year 1

$

What is the amount (in dollars only) of the total requested funds in the first year?

Amount Requested Year 2

$

What is the amount (in dollars only) of the total requested funds in the second year?

Amount Requested Year 3

$

What is the amount (in dollars only) of the total requested funds in the third year?

2.11 Income

Income refers to all funding confirmed, unconfirmed and in kind, for the project/program you are applying for. **Please note total income must equal total expenditure.**

Confirmed Funding	Confirmed $
	Must be a dollar amount.

Unconfirmed Funding	Unconfirmed $
Unconfirmed funding is the shortfall amount your organisation is seeking, including the amount being requested from Perpetual's IPAP.	Must be a dollar amount

Total income *

This number/amount is calculated.

2.12 Expenditure

Provide detail of expenditure for the project you are applying for. **Please note total income must equal total expenditure.**

Provide detail of expenditure	Expenditure $

Total expenditure *

This number/amount is calculated.

HEALTH AND MEDICAL RESEARCH ONLY

* indicates a required field

3. Health and Medical Research

Please complete this section if your organisation is in the Health or Medical Research sector and you responded 'yes' to the question 'Is this application for Health and Medical Research' in the Project Information section of the application form.

Has this application been authorised by your central research or fundraising office? *   ○ Yes   ○ No

Research Subsector *

Is funding being sought for a randomised clinical trial? *   ○ Yes   ○ No

Chief Investigator 1

We only require details for two chief investigators. If there are more than two, please list the most senior only.

Name of Chief Investigator *	Title	First Name	Last Name

Phone (business hours) *

Email *

Gender: How do you identify? *

Institution *

Current appointment *

Department *

Academic qualifications of Chief Investigator 1

Qualifications - Chief Investigator	Institution - Chief Investigator	Year - Chief Investigator

Recent and relevant publications — Chief Investigator 1

Publication 1

Publication 2

Publication 3

Publication 4

Publication 5

Chief Investigator 2

Name of Chief Investigator	Title	First Name	Last Name

Phone (business hours)

Email

Gender: How do you identify?

Institution

Current appointment

Department

Academic qualifications of Chief Investigator 2

Qualifications - Chief Investigator	Institution - Chief Investigator	Year - Chief Investigator

Recent and relevant publications — Chief Investigator 2

Publication 1

Publication 2

Publication 3

Publication 4

Publication 5

Provide a brief description of the research in non-technical terms including why it is unique, the impact it will have on society and how it will be evaluated or measured. *

Word count:
Word limit of 250 words.

Provide a description of the research in technical terms under the following headings:

Specific aims *

Word count:
Word limit of 350 words.

Methods *

Word count:
Word limit of 350 words.

Pilot data *

Word count:
Word limit of 350 words.

Ethical and hazardous implications of the project:

Ethical — human *

Ethical — animals *

Ethical — carcinogens *

Ethical — radiation *

Ethical — DNA *

If you have ticked yes to any of the above, please confirm approval from the Ethics Committee.

BANK ACCOUNT DETAILS

* indicates a required field

Provide bank details below. If your application is successful, funds will be transferred by EFT into the nominated bank account.

Bank Account *
Account Name

BSB Number   Account Number

Must be a valid Australian bank account format.
Please double check these details before submitting.

Accounts receivable contact *
Title   First Name   Last Name

Email *

Phone (business hours) *

USE OF INFORMATION AND CERTIFICATION

* indicates a required field

The information in this application form is collected by Perpetual Trustee Company Limited (PTCo), ABN 42 000 001 007, AFSL 236643 to assess your application for suitability to receive funding from trusts and endowments we manage or to assess whether your application may be suitable to disclose to an external organisation that approaches PTCo for potential projects or organisations to fund. If you do not provide information in the required fields your application may be deemed ineligible to receive funding from a trust or endowment we manage or contain insufficient information to be passed on to an external organisation. We may also use **aggregate and unidentifiable** application responses to determine sector trends, which we may share publicly.

The questions in the BANK ACCOUNT DETAILS section are designed to collect banking information for a Company. This information is collected to ensure payments are made to the correct bank accounts. We will be unable to make payment to your requested bank account unless you answer the questions correctly and completely.

We may disclose your personal information to outsourced providers supporting Perpetual's operations. You are entitled to access all personal information that the Perpetual Group holds about you.

We collect, use and disclose your personal information in accordance with our Privacy Policy, which includes details about how you may request access to and correct the information that we hold about you. Our policy also outlines our privacy complaints process. To review Perpetual's Privacy Policy please visit https://www.perpetual.com.au/privacy-policy. You

can contact Perpetual's philanthropic services team via philanthropy@perpetual.com.au for more information.

Trustee companies such as Perpetual are regulated by the Commonwealth Corporations Act and supervised by the Australian Securities and Investments Commission. As a result, we are required to disclose certain information to our clients (such as beneficiaries of charitable trusts) about our services in a [Financial Services Guide (FSG).](#)

Organisation Name *

[   ]

I/we agree to the delivery of disclosure documents, such as the FSG, electronically including via electronic mail or Perpetual's website please visit https://www.perpetual.com.au/Privacy-Policy/Financial-Services-Guide *
○

I/we consent to the information in this application being disclosed to an external organisation for the purposes of consideration for potential funding to the applicant *
○

I/we give permission for Perpetual to provide all documents electronically including via email & understand that Perpetual will not accept any responsibility or liability for any unauthorised access or interference after transmission, or for any delay or non-delivery of any document *
○

I confirm and agree that the information provided within this application form is accurate, true and correct, at the time of compilation and will be used for the purposes set out in the 'Use of Information and Certification' contained in this application form. *

[   ]

I give consent to be contacted from time to time by Perpetual to share sector insights (including findings and insights from this application process), articles, event invitations and surveys? *

[   ]

You can opt out from receiving any of the above communications at any time.