

Join the Network

Wisconsin Philanthropy Network (WPN), formerly Donors Forum of Wisconsin, is Wisconsin's only professional membership association for grantmakers across the state, including private foundations (family, independent, and corporate), community foundations, corporate giving programs, donor-advised fund holders, higher education foundations, healthcare foundations, and individual donors. Eligibility requirements can be found at www.wiphilanthropy.org.

Organization Name _____

PRIMARY CONTACT

TITLE

EMAIL

ADDRESS

CITY

STATE

ZIP

PHONE

WEBSITE

Grantmaking Activities

TYPE OF GRANTMAKER

- | | |
|---|---|
| <input type="checkbox"/> Community Foundation | <input type="checkbox"/> Individual Philanthropist |
| <input type="checkbox"/> Corporate Foundation | <input type="checkbox"/> Private Family Foundation |
| <input type="checkbox"/> Corporate Giving Program | <input type="checkbox"/> Private Independent Foundation |
| <input type="checkbox"/> Donor-Advised Fund | <input type="checkbox"/> Public Funder (Government) |
| <input type="checkbox"/> Federated Fund | <input type="checkbox"/> Public Foundation |
| <input type="checkbox"/> Healthcare Foundations | <input type="checkbox"/> Supporting Organization |
| <input type="checkbox"/> Higher Education Foundations | |

PLEASE CHECK ALL OF THE FOLLOWING AREAS IN WHICH YOU FUND:

- | | |
|---|--|
| <input type="checkbox"/> Animal-related | <input type="checkbox"/> Human Services |
| <input type="checkbox"/> Arts, Culture, Humanities | <input type="checkbox"/> Individuals |
| <input type="checkbox"/> Education | <input type="checkbox"/> International Affairs |
| <input type="checkbox"/> Environmental | <input type="checkbox"/> Public Society |
| <input type="checkbox"/> Health (and Behavioral Health) | <input type="checkbox"/> Religion |
| | <input type="checkbox"/> Research |

Other _____

DO YOU ACCEPT UNSOLICITED LETTERS OF INTEREST/PROPOSALS?

- Yes No

Membership Dues (over): _____

Check enclosed or mailed to WPN

Payable to Wisconsin Philanthropy Network

Additional Support to advance philanthropy in Wisconsin: _____

Please have WPN send an invoice

Total: _____

Join the only network supporting and promoting effective philanthropy in Wisconsin.

Calculating Membership Dues

BY GRANTS PAID IN WISCONSIN -

Charitable Trusts, Private Foundation, Corporate Foundations/Giving Programs, Family Foundation, Independent Foundations, Government-Funded Grantmaking Entity, Religious Grantmaking Institution, Public Foundation

GRANTS PAID (LAST FISCAL YEAR)	MEMBERSHIP DUES
Over \$20 million	\$ 13,000
\$15 million to 19.9 million	\$ 11,000
\$10 to 14.9 million	\$ 7,000
\$5 to 9.9 million	\$ 6,000
\$3 to 4.9 million	\$ 4,100
\$2 to 2.9 million	\$ 3,500
\$1.25 to 1.9 million	\$ 3,000
\$750 thousand to 1.24 million	\$ 2,500
\$600 to 749 thousand	\$ 2,000
\$400 to 599 thousand	\$ 1,500
\$250 to 399 thousand	\$ 1,200
\$150 to 249 thousand	\$ 975
\$75 to \$150 thousand	\$ 750
Under \$75 thousand	\$ 375

BY ASSETS -

Community Foundations
Higher Education & Health Care Foundations - Assets dedicated to philanthropic endeavors, i.e. scholarships, grants, and sponsorships

ASSET RANGE (LAST FISCAL YEAR)	MEMBERSHIP DUES
Over \$250 million	\$ 10,000
\$100 million to 249.9 million	\$ 6,500
\$50 to 99.9 million	\$ 4,500
\$25 to 49.9 million	\$ 3,000
\$10 to 24.9 million	\$ 2,000
\$5 to 9.9 million	\$ 1,000
\$2 to 4.9 million	\$ 750
\$1 to 1.9 million	\$ 500

WPN is proud to support you and Wisconsin's philanthropic sector!

BY FUNDING GROUP -

For specific funding groups, choose the following membership dues level for the corresponding funding group below:

FUNDING GROUP	MEMBERSHIP DUES
Federated Fund	\$ 1,000
Public Funder	\$ 750
Individual giving \$25,000 or more	\$ 700
Donor-Advised Fund	\$ 500
Supporting Organizations	\$ 500
Retiree of a member organization	\$ 50

MATERIALS TO ACCOMPANY THIS APPLICATION

1. Include a list of staff members who should receive regular communications from WPN and website access. Include, name, title, program area, phone, and email.
2. Include a list of your board or trustees, including mailing addresses. Indicate which trustees should receive regular communications from us.

MEMBERSHIP DATE

Membership is based on your organization's anniversary date. Membership begins when payment is received, and expires one year later.

NON-SOLICITATION POLICY

WPN meetings and activities are not to be used to solicit grants, to solicit for professional services, or to promote any products, services, or events. This ensures a comfortable, respectful atmosphere in which professional relationships can be maintained. Members or guests who violate this non-solicitation policy will be excluded from future WPN events and may not qualify for membership renewal.

SUBMISSION

Submit the completed application to:
MStClair@wiphilanthropy.org.

QUESTIONS

Contact Michelle St. Clair at:
MStClair@wiphilanthropy.org