

## **2018 Community Investment Timeline**

<u>Task</u>	<u>Timetable</u>	
Allocation application available online	Wednesday	11/1/17
Application due at the UW office	Monday	1/15/18 (12pm)
Application processing & review (UW office)	Monday	1/16/18-2/25/18
Allocation committee meeting (lunch)	Monday	2/26/18
Agencies present to Allocation Committee	Monday (p.m.)	3/5/18
United Way Board action	Wednesday	3/14/18
Funding cycle begins	Tuesday	3/31/18



#### 2018 Impact Agenda

#### EDUCATION: Helping children and youth achieve their potential through education

- 1. Children enter school developmentally on track and ready to succeed.
- 2. Elementary students are prepared to succeed in later grades.
- 3. Increase high school graduation rates.
- 4. Young adults make a successful transition from high school to advance education.

#### FINANCIAL STABILITY: Helping families become financially stable and independent

- 1. Families move toward financial independence.
- 2. Increase income levels.
- 3. Working families have savings or checking accounts and money saved for emergencies.
- 4. Working families build appreciating assets.
- 5. Resource access through 2-1-1 service and FamilyWize.

#### HEALTH: Reducing child abuse, domestic violence, and increasing health education & preventive care

- 1. Maternal health and infant well-being.
- 2. Reduce and prevent child abuse and neglect.
- 3. Access to basic health care and prevention programs.
- 4. Reduction of risky behaviors for both youth and adults.



#### **2018 Program Funding Checklist**

Please return completed signed application packets by 12pm on Monday, January 15, 2018.

No grant applications will be considered if submitted after deadline.

If all fields/questions are not completed, the application is considered incomplete and will not be considered for funding.

Mail to: Morrison County United Way, 107 2<sup>nd</sup> St. SE #200, Little Falls, MN 56345

Age	ncy Name:	Phone:
Sub	mitted by:Email	:
Plea	ase submit <u>one copy</u> of the following: (unstapled, 2-sided	)
<ol> <li>2.</li> <li>4.</li> <li>6.</li> <li>7.</li> <li>8.</li> </ol>	Agency Information form with signatures 501(c) 3 Letter with Federal ID number (or Tax Exempt let Current Board Roster Formal policy of non-discrimination Copy of By-laws and/or Constitution Unbound copy of Audit or financial review Copy of most current IRS 990* Agency Budget (use attached 2018 Organizational Budget 2018 Agency Agreement	
Plea	se submit <u>10 copies</u> of the following: (unstapled, 2-sided	)
(3-h	ole punched on white paper in the order listed below)	
	Annual Program Allocation Application Information for each program applying for funding	
3.	Program Budget (use attached Actual 2018 Organizationa	l Budget)

In addition to turning in your application, up to two representatives from your organization will be called upon to present the details of your program(s) to our Allocation Committee. This panel will meet during the evening of March 5, 2018. Exact time and location will be determined at a later date.

\*If you are not required to file a 990, you are still required to fill out the front page of the form and submit it with your application packet in order to be considered for funding by the United Way of Morrison County.



### **2018** Agency Information

The Mission of Morrison County United Way is to increase the organized capacity of people to care or one another.

Agency	Name: Federal Tax	ID#:
Mailin	g Address:	
Street	Address:	
	ate/Zip:	
Directo	or's Name:	
	or's Title:	
	·	
Email:		
	Agency Summary Application Form	
A.	Agency mission statement (found in your bylaws, articles of adopted mission statements):	incorporation or subsequent boar
В.	Funding application summary information	
	Program Title	Funding Request
		\$

C. <u>General description agency services</u> (be brief and include geographic area served):



## **2018 Agency Information (continued)**

D.	management and general, that portion of you asked, be able to explain it. If applying for expenses directly from your 990. If you are not asked.	expressed as percent of total budget — also known as our expenses not dedicated solely to program or services. If United Way funding, you must figure the administrative not required by law to submit a 990, you must still prepare to United Way. This is a requirement for receiving funds paign as well.)
E.		describe other agencies which you share or cosponsor staff, facilities, equipment or program materials.):
F.	agency's board of directors):	president signatures are both required, authorized by the omit this application was properly provided by the agency's
	Executive Director	Board President
	Date	Date
G.	County requires that each agency certify the "I hereby certify on behalf of	(name of grantee) that all ed in compliance with all applicable anti-terrorist financing e orders."





Complete this portion for the program for which you seeking funding.

Agency Name:	Program Name:
The United Way of Morrison County will be assessing one of the identified priorities in the Community Impa	programs with regard to their unique value in addressing ect Agenda. (See attached)
What is the objective?	
What is the plan to reach this objective?	
How will this program be affected if United Way fund	ds cannot be provided as requested?
	n Morrison County United Way? If yes, please specify
sources and amounts.	



#### **Annual Program Allocation Application (continued)**

	Total Program Cost:	
	Requested Funds:	
	Number of Units Served:	
	Cost Per Unit:	
	Number of Clients Served:	
Sta	ffing:	
	Full Time Equivalent (FTE):	
	Volunteer Hours:	

<u>Service Statistics for United Way funded program(s):</u>

<u>What difference did this program make</u>: To Society? To families? To individual clients? Choose one of the program's outcomes that you want to illustrate in a success story. State this outcome below as you would want it communicated to the public. Please include actual data. Provide a success story to be used in public media messages.

Example: An addiction recovery center where 50 clients were assisted in leading a drug or alcohol-free life. They received an understanding of their addiction, increased self-esteem, a philosophy to live by and a support group. Families experienced less economic deprivation, increased safety when with clients, and reduced domestic violence. Employers received less drug-related illness, more accuracy and better attitude. Society as a whole benefited from all of the above. Be as clear and concise as possible. Services and programs are not fundable unless there are identifiable benefits.

## United Way of Morrison County

#### **2018 Agency Agreement**

#### THE AGENCY AGREES TO:

- Promote and assist in the United Way annual fundraising campaign.
- Make use of the United Way logo on all written forms of communication, social media, websites, print advertising letterheads, and in all of its public functions whenever feasible. We will forward our logo in a .jpg format as soon as we receive your signed agreement.
- Cooperate with other agencies and coordinate services to best meet the needs of the community.
- Show support for and partnership with United Way by participating in community events.
- Welcome United Way staff, Board Members, Community Investment Committee Members, and other United Way volunteers if they request to tour the agency.
- Collaborate and share needs assessment results with United Way.
- Grant United Way permission to use the information contained in the agency allocation application materials for media releases, promotional materials, campaign brochures, electronic communications, and United Way website.
- Conduct an annual United Way campaign each fall among its employees and Board members, encourage the participation of its constituency and members in such activities, with a focus on meeting overall community needs.
- Refrain from initiating or participating in any non-United Way organized solicitation of employees at the
  workplace at any time in service area. An organized solicitation is a federated campaign in the
  workplace, organized with the support of the employer, through which monetary contributions are
  solicited from employees.
- Use funds as explicitly described in the Allocation Application and inform United Way of any changes in program criteria or operations that would influence how United Way funds are used. Any funds allocated to the agency that may no longer be used for their program intended purposes will be returned to United Way.
- Not conduct any direct fundraising during the period of <u>September 15<sup>th</sup> October 15<sup>th</sup></u>. Fundraising limitations include, but are not limited to, large fundraising campaigns and large promotional events. Fundraising limitations do not include small events such as bake sales, food drives, wreath sales, etc. This time frame is the busiest time for the United Way annual pledge drive and United Way appreciates your ongoing cooperation and assistance during this time to help us insure a successful pledge drive. (If you already have an established event during this timeframe, please notify the Morrison County United Way office. You may still have your event, but your sponsorship and donation requests must be completed and secured by September 15<sup>th</sup>.)
- Provide a mid-year status report by July 1<sup>st</sup>. The report should include a description of the impact of the funded program and at least one photo of individuals impacted by the program. Photos may be used by United Way in promotional materials so please obtain appropriate permissions.
- Be familiar with this agreement and communicate the agreement to its Board of Directors, employees, volunteers, and community supporters. By abiding by this agreement, United Way believes that together we can most effectively meet community needs and strengthen the community we serve.
- Provide 5 hours of volunteer time to Morrison County United Way for events and fundraising efforts.
- Accept a decrease in fourth quarter payments if all pledges are not fulfilled.
- Accept a 10% decrease in allocation payments if agency is found in violation of this agreement.



#### **2018 Agency Agreement (continued)**

#### **MORRISON COUNTY UNITED WAY AGREES TO:**

- Develop objectives for the annual fundraising campaign with regard to the requirements of participating agencies, fundraising realities and other pertinent considerations.
- Use its best efforts to achieve the campaign objectives.
- Act as a responsible steward of funds contributed to the United Way by fully informing contributors of the allocations and use of such funds.
- Submit financial records for review by an independent accountant.
- Raise awareness of United Way of Morrison County Partner Agencies and build the public's understanding of the valuable services and results achieved.
- Maintain ongoing communication with Partner Agencies and inform them of significant changes.

# United Way of Morrison County

#### **2018 Agency Agreement (continued)**

#### **Partner Agency certifies that:**

- 1. This agency prepares and makes available to the public an annual report that includes a full description of the organization's activities and supporting services and identifies its directors/governing body and chief administrative personnel.
- 2. This agency is directed by an active and responsible governing body whose members have no material conflict of interest and a majority of which serve without compensation.
- 3. This agency accounts for its funds in accordance with generally accepted accounting principles, submits IRS 990 form and/or was audited in accordance with generally accepted auditing principles by an independent certified public accountant in the past year.
- 4. The fundraising and administrative expenses are \_\_\_\_\_\_\_% of the total support and revenue. I further certify that these expenses are reasonable under all circumstances.
- 5. This agency is organized under the laws of the State of Minnesota.
- 6. This agency is a governmental agency or an agency which is recognized by the Internal Revenue Service as tax exempt under 26 U.S.C.501 (c) (3) and to which contributions are tax deductible pursuant to 16 U.S.C. 170.
- 7. Any lobbying activities of the agency to influence voting or legislation at the local, state or federal level would classify it as a tax-exempt agency under 26 U.S.C.501 (h).
- 8. This agency's fundraising practices protect against unauthorized use of its CFC contributor listing: permit no general telephone solicitations of the public, permit no payment of commissions, finder's fees, percentages, bonuses or similar practices in connection with its fundraising.
- 9. The publicity and promotional activities of the agency are based upon its actual program and operations. I further certify that they are truthful and non-deceptive, include all material facts and make no exaggerated or misleading claims.
- 10. Funds contributed by Federal personnel are effectively used for the announced purpose of the agency.
- 11. This agency received at least 50 percent of its total support and revenues from sources other than the Federal government or at least 20 percent of its total support and revenue from voluntary contributions from the general public.

Agency Executive:			
	Name (Print)		Title
Signature:		Date:	

This Agreement is in effect until December 31, 2018.



## 2018 Organization Budget

INCOME	
Source	<u>Amount</u>
Support	
Government grants	\$
Foundations	\$
Corporations	\$
United Way or other federated campaigns	
Individual contributions	<u>\$</u>
Fundraising events and products	\$
Membership income	\$
In-kind support	\$
Investment income	\$
Revenue	
<b>Government contracts</b>	\$
Earned income	\$
Other (specify)	\$
	<u>\$</u>
	\$
	\$
Total Income	\$
EXPENSES	
EXPENSES Item	Amount
<u>Item</u>	
Item Salaries and wages	\$
Salaries and wages Insurance, benefits and other related taxes	<u>\$</u> \$
Item Salaries and wages Insurance, benefits and other related taxes Consultants and professional fees	<u>\$</u> \$
Item Salaries and wages Insurance, benefits and other related taxes Consultants and professional fees Travel	<u>\$</u> \$
Item Salaries and wages Insurance, benefits and other related taxes Consultants and professional fees	\$ \$ \$ \$
Item Salaries and wages Insurance, benefits and other related taxes Consultants and professional fees Travel Equipment Supplies	\$ \$ \$ \$ \$
Item Salaries and wages Insurance, benefits and other related taxes Consultants and professional fees Travel Equipment	\$ \$ \$ \$ \$ \$ \$
Salaries and wages Insurance, benefits and other related taxes Consultants and professional fees Travel Equipment Supplies Printing and copying Telephone and fax	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
Salaries and wages Insurance, benefits and other related taxes Consultants and professional fees Travel Equipment Supplies Printing and copying	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
Salaries and wages Insurance, benefits and other related taxes Consultants and professional fees Travel Equipment Supplies Printing and copying Telephone and fax	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
Salaries and wages Insurance, benefits and other related taxes Consultants and professional fees Travel Equipment Supplies Printing and copying Telephone and fax Postage and delivery	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
Salaries and wages Insurance, benefits and other related taxes Consultants and professional fees Travel Equipment Supplies Printing and copying Telephone and fax Postage and delivery Rent and utilities	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
Item  Salaries and wages Insurance, benefits and other related taxes Consultants and professional fees Travel Equipment Supplies Printing and copying Telephone and fax Postage and delivery Rent and utilities In-kind expenses	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
Salaries and wages Insurance, benefits and other related taxes Consultants and professional fees Travel Equipment Supplies Printing and copying Telephone and fax Postage and delivery Rent and utilities In-kind expenses Depreciation	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
Salaries and wages Insurance, benefits and other related taxes Consultants and professional fees Travel Equipment Supplies Printing and copying Telephone and fax Postage and delivery Rent and utilities In-kind expenses Depreciation	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
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## 2018 Program Budget

INCOME	
Source	<b>Amount</b>
Sunnart	
Support Government grants	\$
Foundations	<u>\$</u>
Corporations	\$ \$
United Way or other federated campaigns	\$ \$
Individual contributions	<u>\$</u>
Fundraising events and products	\$ \$
Membership income	\$
	<u>\$</u>
In-kind support Investment income	<u> </u>
investment income	<b>D</b>
Revenue	
Government contracts	\$
Earned income	\$
Other (specify)	\$
Other (specify)	\$
	<u>\$</u>
	\$ \$
Total Income	\$
Total Income	\$
Total Income	\$
Total Income  EXPENSES	\$
	\$ Amount
EXPENSES	
EXPENSES  Item  Salaries and wages	<u>Amount</u> \$
<u>EXPENSES</u> <u>Item</u>	Amount  \$ \$
EXPENSES  Item  Salaries and wages	Amount  S  S  S
EXPENSES  Item  Salaries and wages  Insurance, benefits and other related taxes	Amount  S S S S
EXPENSES  Item  Salaries and wages  Insurance, benefits and other related taxes  Consultants and professional fees	Amount  \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
EXPENSES  Item  Salaries and wages  Insurance, benefits and other related taxes  Consultants and professional fees  Travel	Amount  S S S S
EXPENSES  Item  Salaries and wages  Insurance, benefits and other related taxes  Consultants and professional fees  Travel  Equipment	Amount  \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
EXPENSES  Item  Salaries and wages Insurance, benefits and other related taxes Consultants and professional fees Travel Equipment Supplies	Amount  \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
EXPENSES  Item  Salaries and wages Insurance, benefits and other related taxes  Consultants and professional fees  Travel  Equipment  Supplies  Printing and copying	Amount  \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
EXPENSES  Item  Salaries and wages Insurance, benefits and other related taxes  Consultants and professional fees  Travel  Equipment  Supplies  Printing and copying  Telephone and fax	Amount  \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
EXPENSES  Item  Salaries and wages Insurance, benefits and other related taxes Consultants and professional fees Travel Equipment Supplies Printing and copying Telephone and fax Postage and delivery Rent and utilities	Amount  \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
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