

# **Community Partners Grant Funding**

**Information Session Fiscal Year 2022** 

**November 18, 2020** 





### **AGENDA**

- 1 Purpose
- 2 Process & Timeline

- 3 Eligibility & Reporting
- 4 Application Submission
- 5 Questions

## Purpose

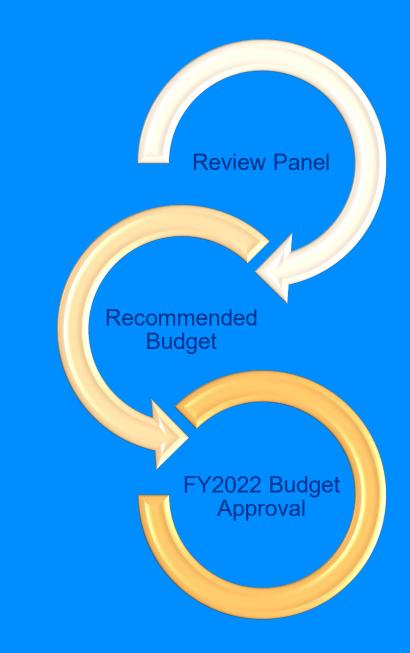
- Community Partner Grants (CPG) provide opportunity for Union County to partner with nonprofit agencies, that serve County residents, to deliver services aligned to the County objectives.
- To create a transparent and fair funding process that is accessible to all local nonprofit agencies.

\*Funding is limited and subject to budget availability.
Applicants (new or previously funded) are not guaranteed to be awarded funds. Successful applications may be funded for less than the amount requested.



### **Process & Timeline**

- Deadline: January 15, 2021 at 5:00 PM
- Review Panel: February/March 2021
- Recommended Budget: May 2021
- Public Hearing BOCC receive comments from public regarding Manager's Recommendation
- Budget Approved (by BOCC): June 2021
- Funding Period: July 1, 2021-June 30, 2022



# **Eligibility & Reporting**

- Serve the residents of Union County
- IRS 501(c)(3) nonprofit designation
- Financial statements audited by independent CPA
- Contribute to one of five strategic objectives
- Documentation supporting a diversified workforce
- Professional membership affiliation to support organizational sustainability
- Registered with Secretary of State and listed as Current/Active

\*Organizations that do not meet criteria can reach out to discuss in further detail.



### **Financial Statements**

- Prepared in accordance with Generally Accepted Accounting Principles (GAAP) and audited by an independent CPA
- CPA must issue clean, unqualified opinion



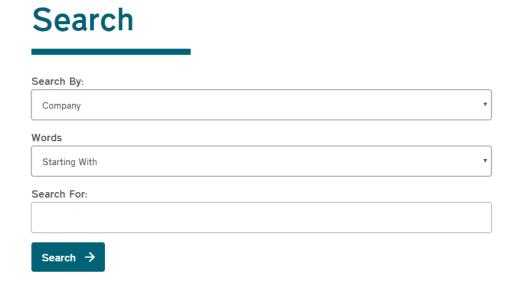
# **Board of County Commissioners Strategic Objectives**



- ❖ <u>Public Safety</u> In concert with our community partners, provide those essential services that protect the public's health, safety, and welfare.
- Community Consensus By developing relationships based on mutual trust and understanding, engage appropriate stakeholders to identify and successfully implement programs and initiatives that reflect the community priorities.
- ❖ <u>Economic Development</u> Through common vision and direction become a more business friendly, economically vibrant and sustainable community by fostering development of a qualified workforce and infrastructure capacity to support current and future economic sustainability and growth.
- Sustainability Through collaboration with community partners, foster an environment that promotes affordability of services, conservation of resources, and preservation of a high quality of life to support and enrich a diverse and productive population.
- Organizational Strengthening Develop and maintain a highly engaged workforce through shared values and clarity of purpose, with the tools, training and resources that support skills development, knowledge sharing and retention, and employee investment.

## Registration with NC Secretary of State

- Status listed as Current/Active
  - No revenue suspensions
  - No overdue taxes



#### Tax Liens Record Search

Records Found: 69
Search Time: 11/5/2019 01:01 PM
Search Certification Date: Search Results Include Filings Through 11/4/2019 12:00:00 AM
Search Type:
Standard
Search Type:
Organization •
Organizational Name:
Printable View: ☐ Search →

https://www.sosnc.gov/online\_services/search/by\_title/\_Business\_Registration

https://www.sosnc.gov/online\_services/search/by\_title/\_Federal\_Tax\_Lien





# **Application Submission**

Deadline: January 15, 2021 - 5:00 PM

www.unioncountync.gov/CommunityPartnerGrants

**Employee Resource** 

Submit to: Adrienne.Rorie@unioncountync.gov

#### UNION COUNTY 2021-2022 COMMUNITY PARTNER GRANT APPLICATION

	SUBMISSION DEADLINE; F	riday, January 1	15, 2021, 5 PM
BY MAIL:	Union County Government 500 N. Main St., Suite # 809 Monroe, NC 28112	BY EMAIL:	Adrienne Rorie, Budget Analyst Adrienne.Rorie@unioncountync.go
ORGAN	IZATION INFORMATION		
Org. Name:		Website:	
Org. Type:		Date of Inc	orporation:
Address: _		Years of O	peration:
		Fiscal Year	End Date:
PRIMARY	CONTACT INFORMATION		
Name:		Phone Nun	nber:
Email:			
DIRECTO	R'S CONTACT INFORMATIO	ON	
Name:		Phone Nun	nber:
Email:			
NONPRO	FIT CREDENTIALS		
EIN:			years org. has been certified as a onprofit:
PROGR	AM INFORMATION	55 ((5)(6) III	

Total Amount of Award Requested:

Program Name:

#### FINANCIAL SUMMARY

#### **AUDITED FINANCIAL STATEMENTS**

Do you have independently CPA-audited financial statements for fiscal/calendar year 2019 or 2020? The most recent audited statements should be included with this application.

	Yes	
	No. The audit will be available at a later date. Provide estimated date:	
$\circ$	No. We do not and will not have an audit.	

#### **AGENCY BUDGET & FUNDING**

What is the agency's total budget for 2020-2021? What is the current fund balance and what do you anticipate it t
be at the close of the current fiscal year (FY2020-2021)? Does Union County already provide any kind of financial
support or in-kind assistance to the agency? (Responses should be limited to 1,075 characters).

PROGRAM	OVERVIEW	

After selecting a Funding Category, please complete each narrative text box below. Insert "N/A" for any question that is not applicable.

#### **FUNDING CATEGORIES**

The following funding categories tie to board objectives within the County and guide decisions during the County's budget process. Please select one of the five priorities below that best aligns to your program.

	Public Safety
Ŏ	Community Consensus
$\bigcirc$	Economic Development

$\bigcirc$	Sustainability
$\supset$	Organizational Strengthening

# PROBLEM STATEMENT **PROGRAM MISSION & GOALS** Describe the identified community need(s) the service proposes to address within the strategic objective. Provide Please provide the mission & vision statement(s) and programming goals of the organization or program. evidence (ie. research or data findings) to support a clearly defined problem. (Responses should be limited to (Responses should be limited to 1,050 characters). 3,175 characters). **SERVICE GEOGRAPHY & POPULATION** Please describe the characteristics of the target populations that benefits directly from the service including the location within Union County where services are provided. This information should include the number of persons served by your agency and how many of those are Union County residents. (Responses should be limited to 1,200 characters).

## SERVICE STRATEGY, DELIVERY, AND PROPOSED RESULTS COLLABORATION AND PARTNERSHIPS Explain the strategy that will be used to address the problem stated above. Describe the service delivery process. If applicable, describe how the service will use collaboration or partnerships to achieve results. Include staff, key activities, and timelines. Describe the results this service will deliver in Fiscal Year 2022 (July 1, (Responses should be limited to 600 characters). 2021-June 30, 2022) and long-term (in the next 2-4 years). As available provide evidence that the strategy will be successful. Include data on past performance and outside research as appropriate. Please include the method for data collection (ie. surveys) and tracking (ie. use of databases or other means). (Responses should be limited to 2,875 characters). PEER REFERENCES Please provide up to three references from peer organizations. Only contact information for the organizations is necessary. (Responses should be limited to 600 characters). PROFESSIONAL ASSOCIATION To what professional association(s) does your organization belong? How does/do the association(s) support your organization's sustainability? (Responses should be limited to 600 characters).

#### **BUDGET & PERFORMANCE**

#### BUDGET

Please complete and submit the budget template.

#### PERFORMANCE

Please complete and submit the performance template.

#### ADDITIONAL DOCUMENTATION

All additional documentation should be included as additional pages or attachments when submitting applications.

An agency that does not have any of the additional documentation should submit, in writing, the reason that documentation does not exist for each request.

#### **FUNDING SOURCES**

Include a spreadsheet of all outside funding for the past three (3) years including whether the source is public/private.

#### IRS DOCUMENTATION

Include copies of IRS Federal Tax Exemption Letter and IRS Form 990.

#### CERTIFICATE OF INSURANCE

Include Certificate of Liability Insurance.

#### **LEADERSHIP & STAFF**

Include a list of agency's Board of Directors and all staff members.

#### SALARY DISCLOSURE

Include documentation displaying the salary and benefits associated with each program position.

#### ARTICLES OF INCORPORATION

Include copies of Articles of Incorporation and Bylaws.

#### PROFESSIONAL AFFILIATIONS

Include confirmation of membership with a professional association.

#### WORKFORCE REPRESENTATION

Include documentation supporting agency's effort to achieve and/or promote a diversified workforce (ie Diversity Policy, EEO Statement, Management Plan, etc.)



# **Budget Template**

#### FY2022 COMMUNITY PARTNER GRANTS

PROPOSAL BUDGET SUMMARY

Please check budget cycle:	Fiscal	Year	Calend	ar					
Total <b>Program</b> Budget for current year:									
Total <b>Organization</b> Budget for current yea	r.			I					
		F	Program Bu	dget					
Organization:			FY21B	udget		FY 2022	FY	22 Budget	
	FY 2020	FY 2021	minus	FY20	FY 2022	Funding	minus FY21		
Program/Service Name:	Actual	Revised Budget	Change	Percent	Total Budget	Request to County	Change	Percer	
REVENUE			•		•				
Union County			\$0			\$0	\$0	0.0%	
Federal/State			\$0				\$0	0.0%	
United Way			\$0				\$0	0.0%	
Private Foundations			\$0				\$0	0.0%	
Memberships			\$0				\$0	0.0%	
Other Grants			\$0				\$0	0.0%	
Donations			\$0				\$0	0.0%	
Fund Balance			\$0				\$0	0.0%	
Miscellaneous Income			\$0				\$0	0.0%	
Other Fees and Earned Income			\$0				. \$0	0%	
Total Revenue	<b>\$0</b>	<b>\$</b> 0	\$0		\$0	<b>\$</b> 0	30	0.0%	
County Revenue as % of Total	0.0%	0.0%	0.0%	0.0%	0.0%	FY 2022	7	0.0%	
EXPENSES	- 1	0		C		County Funded Expenses			
Salaries			\$0				\$0	0.0%	
Fringe and Benefits			\$0				\$0	0.0%	
Professional Fees			\$0				\$0	0.0%	
Communications			\$0				\$0	0.0%	
Rent & Utilities			\$0				\$0	0.0%	
Equipment Rental			\$0				\$0	0.0%	
Maintenance			\$0				\$0	0.0%	
Training & Related Expenses			\$0				\$0	0.0%	
Staff Travel			\$0				\$0	0.0%	
Fundraising & Admin Fees			\$0				\$0	0.0%	
Postage			\$0				\$0	0.0%	
Supplies			\$0				\$0	0.0%	
Programming			\$0				\$0	0.0%	
Other Expenses			\$0				\$0	0.0%	
Other Expenses			\$0				\$0	0.0%	

**\$**0

**\$**0

0.0%

Total Expenses

#### FY2022 Community Partners Grant Proposed Performance Measures

# Performance Template

Please list below your proposed **output** and **outcome** measures for this funding. You may add up to 3-4 output measures to the 2 that are already listed below and up to 3-4 outcome measures as well.

An **output** measure is a count of what is produced through your program (e.g. # of clients served, # lunches served, etc.). An **outcome** measure is the result of a program or service and describes impact. It is often expressed as a percentage or ratio (e.g. % of clients placed in jobs, % of children immunized by age 3, etc.).

_				1125		1120		1122 110	
	Output Measures (Numbers)	Calculation Methodology*	Target	Actual	Target	Actual	Target	Actua	FY22 Target
N	umber of unduplicated individuals served by Union	Count							
\c	ounty Community Partners Grant	Count							
N	umber of unduplicated individuals served by other	Count							
fu	nding sources	Count							
Г			Ľ						
Г	•								
Г									
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		FY19		FY20		FY21 YTD		
Outcome Measures (Percentages)	Calculation Methodology*	Target	Actual	Target	Actual	Target	Actual	FY22 Target

\*Please use the Calculation Methodology column to share how you will use your data to calculate a result. The calculation methodology for most output measures will be a count. The calculation methodology for outcome measures should show how you arrive at the results included in your performance history and proposed target (ie. % of Residents Served = Total # of Residents Served by Program Divided By Total # of Union County Residents).

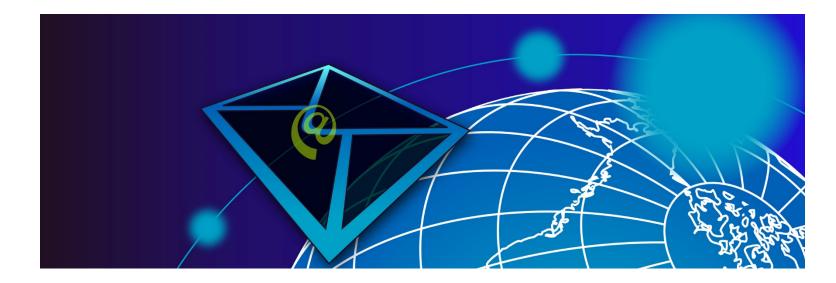
### **Contact Information**

#### **Adrienne Rorie**

**Union County Budget Analyst** 

Email: Adrienne.Rorie@unioncountync.gov

Phone: (704) 283-3608







# Questions

