



## 2019 United Way of the Lewis and Clark Area New Partner Application

### **ABOUT UNITED WAY OF THE LEWIS & CLARK AREA**

United Way of the Lewis & Clark Area (UWLCA), a 501(c)3 nonprofit organization headquartered in Helena, Montana, believes *all people should have the opportunity to be educate, engaged, prosperous, and healthy*. One of the ways that it carries out this mission is to help fund local health and human service organizations, projects, and programs that improve the health, prosperity, and education of all people in the tri-county area.

### **ABOUT THE UWLCA PARTNER AGENCY NETWORK**

UWLCA partner agencies value collaboration and actively seek ways to work together to avoid the duplication of services. UWLCA partners:

- ✓ Receive donor designated funds through the annual community-wide charitable giving campaign. These funds are unrestricted.
- ✓ Are included in the UWLCA federation in the State of Montana Employee Charitable Giving Campaign (SECGC). All SECGC fees for our partner agencies are covered by United Way of the Lewis & Clark Area, and no fundraising or administrative costs are withheld.
- ✓ Are eligible for Global Corporate Leader (GCL) company campaigns through Costco, Macy’s, Target, US Bank, Wells Fargo, etc. These organizations will send checks directly to the partner through a third-party vendor (Truist, Benevity, YourCause, etc.).

UWLCA partner agencies will be provided a pledged funding amount by United Way in the month of March 2020. The following table provides you with dates that you will receive your funds. Payment amounts will be based on the donation received by United Way, rather than the pledged amount. In the past, UWLCA paid out on the pledged amount rather than the amount received, causing an increased risk to our organization. UWLCA recommends partners allow for a rate of 4-6% uncollectible from your total pledged amount in your budget to adjust for people retiring and/or otherwise leaving the workplace who do not fulfil their full pledge. Please also note that as a member of Association of Fundraising Professionals (AFP), UWLCA does not release the names of donors.

| <b>Donor Choice United Way Campaign</b>                     | <b>State Employee Charitable Giving Campaign</b>          |
|---|---|
| April: All Cash/Credit Card and Payroll Deduction Collected | May: All Cash/Credit Card and Payroll Deduction Collected |
| July: Payroll Deduction Collected                           | August: Payroll Deduction Collected                       |
| October: Payroll Deduction Collected                        | November: Payroll Deduction Collected                     |
| January: Payroll Deduction Collected                        | March: Payroll Deduction Collected                        |

**This is a proposed timeline for 2020, but it is not guaranteed at this time.**

## PERIOD OF PARTNERSHIP

This partnership is ongoing until either United Way or the partner agency chooses to terminate this agreement.

## ELIGIBLE APPLICANTS

Eligible applicants include 501(c)3 nonprofit organizations in good standing with the IRS that have an established oversight board. Entities must operate programs and/or deliver services in Lewis and Clark, Jefferson, and/or Broadwater counties. Please note that organizational activities must align with the UWLCA mission and focus areas of Alleviating Poverty, Increasing Prosperity, Enhancing Education and Bolstering Health.

## ELIGIBLE USE OF FUNDS

These dollars are unrestricted, except that funds must be expended to serve people in Lewis and Clark, Broadwater, and/or Jefferson counties.

## STATEMENT OF AGREEMENT

Please see the *Attachment 1: Statement of Agreement* to review additional UWLCA partner agency requirements.

## SUBMISSION DEADLINE

The application is due to the UWLCA by **Tuesday, April 30, 2019, by 5:00pm MST**. Applicants must submit an electronic version (Word doc or pdf) via email to [info@unitedwaylca.org](mailto:info@unitedwaylca.org).

## QUESTIONS?

If you have questions regarding the application or would like technical assistance, please contact UWLCA. Contact UWLCA via email at [info@unitedwaylca.org](mailto:info@unitedwaylca.org) or by phone at 406-442-4360.

|   |   |
|---|---|
| <b>Application Released</b>                 | April 1, 2019                                   |
| <b>2019 United Way Application Deadline</b> | Tuesday April 30 <sup>th</sup> by 5:00 p.m. MST |

## APPLICATION CHECKLIST

- 2019 United Way Application
- IRS Determination Letter (per Section 1)
- Most recently approved Financial Statements (per Section 3)
- IRS Form 990 (per Section 4)
- Attachment 1: *Statement of Agreement*
- Attachment 2: *VolunteerHelena.org Agreement*
- Attachment 3: *Counterterrorism Compliance*

# LIVE UNITED



of the Lewis & Clark Area

## **2019 United Way New Agency Application**

Submission Deadline: **Tuesday April 30<sup>th</sup> at 5:00 p.m. MST**

**Applicant Agency Name:**

**United Way of the Lewis and Clark Area**

**(406) 442-4360**

**75 E. Lyndale**

**Helena, MT 59601**

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**Part 1: Agency Information (2 pts.)**

1. Agency Name:
2. Mailing Address:
3. Physical Address:
4. City:
5. State:
6. Zip Code:
7. Tax ID (EIN):
8. IRS Determination Letter – **attached**
9. Website:
10. Facebook: Yes  No
11. Executive Director Name:
12. Executive Director Email:
13. Executive Director Phone:
14. SECGC Contact:
15. SECGC Contact Email:
16. SECGC Contact Phone:
17. Description of Services (**25 words or less**. This will be used by UWLCA to complete your SECGC application.)
18. Available Times for Agency Interview (select all that apply). You will be required to work with the volunteers participating in the citizen review process to determine a mutually agreeable time during the month of April.  
Weekdays: Lunch Hour   
Weekdays: Late Afternoon   
Weekdays: Early Evening

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Executive Director Printed Name

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Executive Director Signature

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**Part 2: Governance & Organizational Capacity (5 pts.)**

1. **Board of Directors:** Please list officers, board members, positions, and city of residence. Please attach on separate piece of paper if more room is needed.

| <b>Board Member Name</b> | <b>Position</b> | <b>City of Residence</b> |
|--------------------------|-----------------|--------------------------|
|--------------------------|-----------------|--------------------------|

**Management:**

2. Is your agency all volunteer-run? Yes  No
3. Is your agency governed by a volunteer policy-making board of directors? Yes  No
4. How often does the board meet?
5. Does your agency keep attendance records and minutes of board meetings? Yes  No
6. Does your Board of Directors make decisions regarding Executive Director compensation?  
Yes  No
- If not, why not?
7. Do 100% of Board members donate financially to the organization? Yes  No
8. Does your agency have a system for rotation of board members? Yes  No
- If not, why not?
9. Does your board participate in regular board trainings? Yes  No

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If not, why not?

10. Does your organization have at least one board member with a strong financial background?  
Yes  No  Name: \_\_\_\_\_
11. Does your organization present a prepared financial report at Board meetings on at least a quarterly basis? Yes  No

### Part 3: Most Recently Approve Financial Statements (5 pts.)

(Please attach)

### Part 4: Fiscal Capacity and Finances (5 pts.)

1. **Please attach** your most recent IRS Form 990 (required for all applicants).
2. Did agency's gross revenue exceed \$100,000 in your most recent 990? Yes  No

In what year was your most recent IRS Form 990 filed?

3. Has your agency completed an independent audit (if your revenue exceeded \$250,000) or audit review (if revenue was between \$100,000 - \$249,999)? Yes  No

If not, why not?

4. Did your audit or audit review receive a clean opinion? Yes  No
5. Is your most recent audit available online? Yes  No

**Please attach** a copy of the auditor's report as well as the official corrective action plan and any follow-up documentation provided by the independent auditor.

*Please note that even though your full audit is not required as part of this application, the UWLCA may ask that you submit a full audit at the request of the citizen review committee ahead of your agency interview.*

6. What was your agency's 2018 total operating budget? \$ \_\_\_\_\_
7. What is the balance of your agency's reserve funds? \$ \_\_\_\_\_
8. If your agency has reserve funds, what portion is set aside and designated by your board for a specific purpose? \_\_\_\_\_ % or \$ \_\_\_\_\_

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**Part 5: Activities and Impact (5 pts.)**

1. Why do you want to become a United Way of the Lewis and Clark Area partner (**in 500 words or less**)?
2. Please describe what your agency does, including the services and programs provided, **in 500 words or less**.
3. What unmet community needs does your organization provide?
4. Please indicate in which counties your agency provides **direct services**. Important: please only indicate in what areas your agency is physically located and/or provides direct services. *For example, Rocky Mountain Development Council's Head Start Program operates a classroom in Boulder, Jefferson County.*

- Broadwater
- Jefferson
- Lewis and Clark

5. Do other agencies and/or groups currently provide similar services to those provided by your organization? Yes  No

If yes, please describe why it is important that multiple agencies and/or groups currently do the work? *For example, ABC organization provides winter coats for kids in East Helena and Helena, and our organization provides coats for kids in Townsend and Boulder.*

If yes, please discuss how you work with these other agencies and/or groups to further your mission and provide effective services for your shared clients.

6. Please share an agency success story. This will help us communicate the impact of the work that you do. If an individual's real name is used, please also include a signed release. The story should be clear and concise.
7. Additional comments and information?

**2019 United Way of the Lewis and Clark Area  
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**Attachment 1  
2018 Partner Agency Funding Application**

Statement of Agreement

Between  
United Way of the Lewis & Clark Area (UWLCA)  
and  
(Agency Name) \_\_\_\_\_

The parties in this Agreement believe that consolidated fundraising is an effective way to raise community dollars for human services and that the community's interest is best served by working together to develop and maintain a system of effective, efficient and needed human services.

**United Way agrees to:**

|                                     |  |
|-------------------------------------|--|
| <input checked="" type="checkbox"/> | Maintain status as 501(c)(3) or public tax-exempt, nonprofit organization in compliance with federal, state and local laws as well as current registration with the Montana Secretary of State.  |
| <input checked="" type="checkbox"/> | Maintain a responsible and representative governing board of directors, who serve without compensation, exercise best practices to assure effective administrative control, and meet at least quarterly.   |
| <input checked="" type="checkbox"/> | Prohibit the sale or lease of contributor lists.   |
| <input checked="" type="checkbox"/> | Conduct publicity and promotional activities based upon its actual programs or operations.   |
| <input checked="" type="checkbox"/> | Effectively use the funds contributed by corporate workplace donors.   |
| <input checked="" type="checkbox"/> | Elect at least one board member with a strong financial background.  |
| <input checked="" type="checkbox"/> | Represent the duties of the Board treasurer in its bylaws.   |
| <input checked="" type="checkbox"/> | Present a prepared financial report at Board meetings on at least a quarterly basis.   |
| <input checked="" type="checkbox"/> | Conduct an annual independent audit.   |
| <input checked="" type="checkbox"/> | Forbid the use of illegal drugs and/or the illegal use of legal drugs in its programs and on your property.  |
| <input checked="" type="checkbox"/> | Conduct an annual area-wide fundraising campaign.  |
| <input checked="" type="checkbox"/> | Generate community support for the campaign through effective communications and marketing.  |
| <input checked="" type="checkbox"/> | Publicly promote and point out the accomplishments of partner agencies as appropriate.   |
| <input checked="" type="checkbox"/> | Allocate contributed funds through the annual citizen review process, donor-designated pledges and the Board of Directors.   |
| <input checked="" type="checkbox"/> | Respect the participating agency's autonomy and right to determine its own programs.   |
| <input checked="" type="checkbox"/> | Operate without discrimination and carry out affirmative programs to assure equal employment opportunity. This policy applies to persons served by the agencies, to the staff of the agencies, and to membership on their governing boards. Operating without discrimination means: <ul style="list-style-type: none"> <li>a. No person is excluded from service because of race, ethnic origin, religion, or sex.</li> <li>b. There is no discrimination on the basis of race, ethnic origin, religion, or sex in hiring, assignment promotion, or other conditions of staff employment or in membership on the agency's governing board.</li> <li>c. The agency is undertaking positive action to achieve equal employment opportunities for all persons.</li> </ul> |



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**The Agency agrees to (please check boxes):**

|                          |  |
|--------------------------|--|
| <input type="checkbox"/> | Maintain status as 501(c)(3) or public tax-exempt, nonprofit organization in compliance with federal, state and local laws as well as current registration with the Montana Secretary of State.  |
| <input type="checkbox"/> | Maintain a responsible and representative governing board of directors, who serve without compensation, exercise best practices to assure effective administrative control, and meet at least quarterly.   |
| <input type="checkbox"/> | Prohibit the sale or lease of contributor lists.   |
| <input type="checkbox"/> | Conduct publicity and promotional activities based upon its actual programs or operations.   |
| <input type="checkbox"/> | Effectively use the funds contributed by corporate workplace donors.   |
| <input type="checkbox"/> | Elect at least one board member with a strong financial background.  |
| <input type="checkbox"/> | Represent the duties of the Board treasurer in its bylaws.   |
| <input type="checkbox"/> | Present a prepared financial report at Board meetings on at least a quarterly basis.   |
| <input type="checkbox"/> | Conduct an annual financial review (if between \$100,000 and \$249,999) or an independent audit if the organization's budget is \$250,000 or more.   |
| <input type="checkbox"/> | Forbid the use of illegal drugs and/or the illegal use of legal drugs in its programs and property.  |
| <input type="checkbox"/> | Coordinate and give support to the UWLCA throughout the year and during the annual campaign through volunteer and professional leadership.   |
| <input type="checkbox"/> | Belong only to the United Way Federation, in order to provide accountability to our supporters.  |
| <input type="checkbox"/> | Participate without reservation in the annual citizen's review process. This may include the submission of additional information as requested.  |
| <input type="checkbox"/> | Recognize UWLCA's financial support by, for example, using the UWLCA logo according to guidelines, hanging window clings, using tabletop signs at events, placing the logo on your website and in annual reports. Basically, use the UWLCA logo and recognize contributions where it makes sense for your organization.  |
| <input type="checkbox"/> | Operate without discrimination and carry out affirmative programs to assure equal employment opportunity. This policy applies to persons served by the agencies, to the staff of the agencies, and to membership on their governing boards. Operating without discrimination means: <ul style="list-style-type: none"> <li>a. No person is excluded from service because of race, ethnic origin, religion, or sex.</li> <li>b. There is no discrimination on the basis of race, ethnic origin, religion, or sex in hiring, assignment promotion, or other conditions of staff employment or in membership on the agency's governing board.</li> <li>c. The agency is undertaking positive action to achieve equal employment opportunities for all persons.</li> </ul> |

The undersigned certify that the above conditions have been met.

\_\_\_\_\_  
United Way Interim CEO Signature

\_\_\_\_\_  
Agency Executive Director Signature

\_\_\_\_\_  
United Way Board President Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

**2019 United Way of the Lewis and Clark Area  
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**Attachment 2  
2019 Donor Choice-Only Funding Application  
VolunteerHelena.org Agreement**

**The United Way of the Lewis and Clark Area agrees to:**

- Advertise the agency needs for volunteers via [www.volunteerhelena.org](http://www.volunteerhelena.org). The website will be advertised in the local newspaper, radio, TV, Internet, and newsletters.

**The Agency agrees to:**

- Update the website with a current agency profile and ongoing with volunteer opportunities.
- Assure adequate health and safety provisions for the protection of the volunteer.
- Screen and review volunteer background as appropriate.
- Provide volunteer with orientation, instruction, supervision and recognition.
- Agency will comply with provisions of Title VI of the Civil Rights Act of 1964 and will act in accordance with the American Disabilities Act.

I understand that VolunteerHelena.org refers prospective volunteers; however my agency is ultimately responsible for screening, interviewing, accepting and training the volunteer. I understand that VolunteerHelena.org is a referral source only. The agency agrees to release, indemnify, and hold harmless the VolunteerHelena.org and/or United Way of the Lewis & Clark Area from any liability or claim of liability of any nature whatsoever, resulting from the referral of, or the use of referred volunteers.

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Executive Director Signature

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Date

## 2019 United Way of the Lewis and Clark Area New Agency Application

### Attachment 3 Counterterrorism Compliance

In compliance with the spirit and intent of the USA PATRIOT Act and other counterterrorism laws, the United Way of the Lewis & Clark Area requests that each funded agency (“Organization”) certify that it is in compliance with the United Way of the Lewis & Clark Area and the United Way of America’s (“UWLCAA”) compliance program. Organization Name \_\_\_\_\_

| <b>Check the Appropriate Box to Indicate Your Compliance With Each of the Following:</b>   | <b>Comply</b>            | <b>Do Not Comply</b>     |
|--|--------------------------|--------------------------|
| This Organization is not on any federal terrorism “watch lists,” including the list in Executive Order 13224, the master list of specially designated nationals and blocked persons maintained by the Treasury Department, <a href="http://www.treas.gov/offices/enforcement/ofac/sdn/">www.treas.gov/offices/enforcement/ofac/sdn/</a> and the list of Foreign Terrorist Organizations maintained by the State Department, <a href="http://www.state.gov/s/cf/4291.htm">www.state.gov/s/cf/4291.htm</a> . | <input type="checkbox"/> | <input type="checkbox"/> |
| This Organization does not, will not and has not knowingly provided financial, technical, in-kind or other material support or resources* to any individual or entity that is a terrorist or terrorist organization, or that supports or funds terrorism.  | <input type="checkbox"/> | <input type="checkbox"/> |
| This Organization does not, will not and has not knowingly provided or collected funds or provided material support or resources (*) with the intention that such funds or material support or resources be used to carry out acts of terrorism.   | <input type="checkbox"/> | <input type="checkbox"/> |
| This Organization does not, will not and has not knowingly provided financial or material support or resources to any entity that has knowingly concealed the source of funds used to carry out terrorism or to support Foreign Terrorist Organizations.   | <input type="checkbox"/> | <input type="checkbox"/> |
| This Organization does not re-grant to organizations, individuals, programs and /or projects outside of the United States of America with out compliance with IRS guidelines.  | <input type="checkbox"/> | <input type="checkbox"/> |
| This Organization takes reasonable, affirmative steps to ensure that any funds or resources distributed or processed to not fund terrorism or terrorist organizations.   | <input type="checkbox"/> | <input type="checkbox"/> |
| This Organization takes reasonable steps to certify against fraud with respect to the provision of financial, technical, in-kind or other material support or resources to terrorists and terrorist organizations.   | <input type="checkbox"/> | <input type="checkbox"/> |

\* In this form, “material support and resources” means currency or monetary instruments or financial securities, financial services, lodging, training, expert advice or assistance, safehouses, false documentation or identification, communications equipment, facilities, weapons, lethal substances, explosives, personnel, transportation, and other physical assets, except medicine or religious materials.

I certify on behalf of the Organization listed above that the foregoing is true.

Print Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_