

## Community Impact Grant Pre-Application Questions

Must answer YES to the following :

- The organization must meet the IRS standards for nonprofit status 501(c)(3), faith-based organization, or governmental entity.
- The applicant must supply the organization's most recent IRS Form 990 or 990 EZ. Can the organization submit 990 or 990EZ upon request?
- The organization must be chartered prior to January 1, 2023, and operate in the service region.
- The organization must provide services in one or more counties in the three-county service region: Johnson, Pope, Yell.
- The organization must be able to supply the organization's EIN/Tax ID#.
- The organization must be registered and in good standing with the Secretary of State
- RVUW conducts business through the internet and its website. Applicants must be able to send and receive email and access the RVUW website.
- RVUW makes its investment payments through EFT and will request appropriate banking information from organizations receiving funds. Grant recipients must be able to provide banking information.
- The organization must be committed and able to make measurable improvements for clients in one of the focus areas for which United Way will invest funds. Measurable improvements must align with published outcomes and indicators.
- The organization must be willing and able to enter into a Memorandum of Understanding with River Valley United Way regarding participation in the United Way fundraising campaign and the provision of services in compliance with United Way requirements—including submission of beneficiary reports of client demographics, program reports detailing outcomes achieved, and any supporting information as requested by RVUW.

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### Organization Information

Name

IRS Employee Identification Number

Does your organization possess 501(c)(3) status?

Please enter the organization's IRS status code

Website

Street Address

City

State

Zip

Mission Statement

Operating Budget

Agency Description

Agency Changes

Please describe the beneficiaries served by your organization

Number of beneficiaries served annually by your organization

(Optional) Upload one supplemental document that illustrates your organization's mission and/or impact (e.g., a whitepaper, an annual report, an impact report)

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### Grant Proposal Details

Grant Purpose

Amount Requested

Geography (Which counties will this project serve?)

Funding Focus Area (Youth Opportunity, Healthy Community, Financial Security, Community Resiliency)

Grant Designation (e.g., Agency Program, New Pilot, Capacity Building)

### **Short-answer questions:**

Provide a high-level overview of your project/proposal.

What specific challenge(s) or need(s) does your proposal aim to address?

If funded, how are you uniquely positioned to address this challenge or need?

### Primary Contact Information

Salutation

First Name

Last Name

Title

Role

Email

Telephone