

## United Way Quad Cities | African American Leadership Society (AALS) Strategic Grants

United Way Quad Cities will provide one-time funding for organizations working to address needs in the African American community and become part of the solution with an emphasis on education, income, and health. Requests for Proposals will be accepted from local organizations serving Rock Island County, IL and/or Scott County, IA who align their work to support one of the following impact strategies:

AALS Impact Strategies		Examples:
1.	Provide timely community-based academic supports that keep Black, Indigenous, People of Color (BIPOC) K-12 students academically on track.	<ul style="list-style-type: none"> <li>○ Tutoring</li> <li>○ Mentoring</li> <li>○ Homework Assistance</li> </ul>
2.	Increase Black, Indigenous, People of Color (BIPOC) student access to career exploration, activities and awareness.	<ul style="list-style-type: none"> <li>○ Career Day</li> <li>○ Career Presentations</li> <li>○ Career -related field trips</li> </ul>
3.	Provide Black, Indigenous, People of Color (BIPOC) high school and college students with timely supports and services to ensure college access, persistence and completion.	<ul style="list-style-type: none"> <li>○ Mentoring</li> <li>○ College Visits</li> <li>○ College Applications</li> <li>○ Financial Coaching</li> <li>○ FAFSA Completion</li> </ul>

### Who can apply?

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- **Grassroots Organization:** A community-based organization or organized group of individuals who has identified a specific issue/problem and is working collectively towards a solution.
  - **Social Entrepreneur or Innovator:** An individual, company or aspiring nonprofit with a **novel solution to a social problem.**
  - **501(c)(3) or 170 Organizations**
    - **501(C)(3) Organization** - Section **501(c)(3)** is a portion of the U.S. Internal Revenue Code (IRC) and a specific tax category for nonprofit organizations. Organizations must be registered with the IRS as a Section **501(c)(3)** nonprofit.
    - **170 Organization** - An **organization** which is allowed to receive charitable contributions under Section **170(b)(1)(A)**. These include:
      - Churches and church associations
      - Educational institutions
      - Hospitals and medical research facilities
      - Other public institutions which receive a substantial amount of their funding from federal, state, or local government.

All applicants must have made arrangements for fiscal agency. The fiscal agent will be the entity that handles all finances (both grant payments and expenses) for the funded project.

Agencies with established 501(c)(3) or 170 status may serve as their own fiscal agents. Agencies without nonprofit status are still allowed to apply, so long as they have an agreement with an established 501(c)(3) or 170 organization who is willing to serve in the fiscal agent role.

If these agencies cannot secure a fiscal agent before they submit their application, then they – along with any individuals, social entrepreneurs, companies and grassroots organizations – can apply for investments only up to \$4,999. For these partners, United Way Quad Cities will serve as fiscal agent for the project. The applicant must agree to the following conditions:

- UWQC will serve as fiscal agent for the project, either by paying expenses associated to the project directly to the vendor/provider or reimbursing the partner agency for covered expenses of the project.
- UWQC will be listed as funding sponsor or partner on the awarded project.

## Required Documentation

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Applicants must be able to provide the following documents appropriate to the amount of their funding request.

### **Requests less than \$5,000 (Social Entrepreneurs or Grassroot Organizations)**

1. Mission statement
2. A United Way Fiscal Agency agreement form (see attached)
3. Patriot Act Anti-Terrorism Compliance Form (see attached)

### **Requests less than \$5,000 (501(c)(3) or 170 organizations)**

1. Proof of nonprofit status (provide one of the following):
  - a. Your IRS 501(c)(3) determination letter
  - b. A completed 170 status form (see attached)
  - c. A signed Memorandum of Understanding from a partner nonprofit or public institution who has agreed to serve as fiscal agent for the project and a copy of their IRS 501(c)(3) determination letter or 170 status form (see attached), or
  - d. A United Way Fiscal Agency agreement form (see attached)
2. Organization mission statement
3. Board of Directors roster, with Officers listed if applicable.
4. Patriot Act Anti-Terrorism Compliance Form (see attached)

### **Requests between \$5,000 - \$25,000**

1. Proof of nonprofit status (provide one of the following):

- a. Your IRS 501(c)(3) determination letter
  - b. A completed 170 status form (see attached)
  - c. A signed Memorandum of Understanding from a partner nonprofit or public institution who has agreed to serve as fiscal agent for the project, or
  - d. A United Way Fiscal Agency agreement form (see attached)
2. Tax ID or EIN number
  3. Organization mission statement
  4. Board of Directors roster, with Officers listed
  5. Annual IRS Form 990:
    - a. 990 must be filed in a timely fashion according to IRS guidelines.
    - b. Applicant must complete the 990 appropriate for their annual revenue level.
    - c. Applicant must provide 990 to UWQC, along with proof of filing status/date.
  6. Balance Sheet and Income Statement for the most recent completed fiscal year.
  7. Patriot Act Anti-Terrorism Compliance Form (see attached)

### **Requests greater than \$25,000**

1. Proof of nonprofit status (provide one of the following):
  - Your IRS 501(c)(3) determination letter
  - A completed 170 status form (see attached)
  - A signed Memorandum of Understanding from a partner nonprofit or public institution who has agreed to serve as fiscal agent for the project, or
  - A United Way Fiscal Agency agreement form (see attached)
2. Tax ID or EIN number
3. Organization mission statement
4. Board of Directors roster, with Officers listed
5. Annual IRS Form 990:
  - 990 must be filed in a timely fashion according to IRS guidelines.
  - Applicant must complete the 990 appropriate for their annual revenue level.
  - Applicant must provide 990 to UWQC, along with proof of filing status/date.
6. Annual audited financial statements
  - Agencies with annual budgets of up to \$249,999 must submit a financial review prepared by a CPA
  - Agencies with annual budgets of \$250,000 and higher must submit a CPA-prepared independent audit, including a CPA opinion letter
7. Patriot Act Anti-Terrorism Compliance Form (see attached)

NOTE: UWQC may use Charity Navigator, GuideStar, Department of Treasury or IRS to further evaluate the eligibility of the organization.

## Evaluation

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Proposals under consideration are evaluated under the following criteria:

- Equity & Inclusion (20%)
- Community Need (20%)
- Collaboration, Capacity, & Efficient Resource Management (20%)
- Community Impact (20%)
- Results (20%)

## Awards

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A total of \$100,000 will be awarded

## Timeline

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10/5/23	Request for Proposals (RFP) released to community
10/31/23	RFP due to UWQC by 4:30 p.m. Central Time
11/3/23	AALS Investment Committee volunteers receive RFPs to review
11/14/23	Evaluations due from reviewers
11/16/23	AALS Investment Recommendation Meeting
12/5/23	Funding recommendations reviewed/approved by AALS Advisory Committee
12/13/23	Funding recommendations reviewed/approved by UWQC Executive Committee
12/19/23	Award Announcements

## Reporting

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Applicants who receive an award will be required to submit two reports describing the impact of the investment:

**1) Interim Report**

Due: July 15, 2024

Describes services conducted between January 1, 2024 – June 30, 2024

**2) Final Report**

Due January 15, 2025

Describes services conducted between July 1, 2024 – December 31, 2024

Report Questions (\* *Indicates required question*):

**Section 1: Utilization of Granted Funds: \***

How has your organization utilized the dollars granted to date?

**Section 2: Impact of the Grant: \***

Briefly describe the impact this grant has had on the services you provide and your ability to serve marginalized populations.

**Section 3: Outcome Tracking: \***

Please state the outcome(s) you are tracking and let us know your progress to date. Include:

Number of people served between:

- January 1, 2024 – June 30, 2024 (Interim Report)
- July 1, 2024 – December 31, 2024 (Final Report)

Number of people who achieved the outcome between:

- January 1, 2024 – June 30, 2024 (Interim Report)
- July 1, 2024 – December 31, 2024 (Final Report)

*For example: 50 BIPOC students attended an after-school tutoring program in the Spring semester (Number Served). 40 of those students improved their performance in math after attending the tutoring program (Outcome).*

**Section 4: Service Model Changes:**

Has anything changed about your proposed service model since your initial application? If so:

What changes have been made and why?

What impact is the adjustment having on the services you are providing?

**Section 5: Strategies for Impact Enhancement: \***

What resources, services, or partnerships would help increase the impact – in quantity and/or quality – of your strategy?

**Section 6: Community Impact Example: \***

Please share a recent example of how your strategy has had an impact in the community. This could be presented as:

- A simple paragraph
- A scan of a letter from a client
- Testimonial video recorded on a smartphone
- Name and contact information of a former client willing to speak on behalf of your organization

## Organization Registration

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If you are a new user with United Way Quad Cities' grant portal, you will need to Create a New Account. The following questions are included in User and Organization Registration. This information will be saved if you apply for other grants from United Way Quad Cities in the future.

### Organization Information

Organization Name: \*  
EIN/Tax ID (##-#####)\*:  
Telephone Number (###-###-####)\*:  
Address 1\*:  
Address 2:  
City: \*  
State\*:  
Postal Code\*:

### **User Information**

First Name\*:  
Last Name\*:  
Title\*:  
Email/Username\*:  
Preferred Contact Number (###-###-####)\*:

### **Executive Officer Information (if different from User)**

First Name\*:  
Last Name\*:  
Title\*:  
Email\*:  
Preferred Contact Number (###-###-####)\*:

## **Application Questions**

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*\* Indicates required question*

### **Project/Program Name\***

Name of Project or Program\*:

### **Organization Overview**

Board Chair Contact Information:

Board Chair Name\*:  
Board Chair Company/Employer\*:  
Board Chair Email\*:  
Board Chair Phone Number\*:

Organization Primary Contact Information (if different from Executive Director):

Primary Contact Name:  
Primary Contact Email:  
Primary Contact Phone Number:

**Nonprofit Status\***

What is the status of your nonprofit\*? (choose one)

- Grassroots
- Social Entrepreneur or Innovator
- 501(c)(3) Organization
- 170 Organization

**Length of Existence\***

How long has your organization been in existence? (years)

**Funding Priority/Requested Amount**

Please indicate which of the following priorities you are applying for funding under (select only one)\*:

*Note: BIPOC stands for Black, Indigenous, People of Color*

- Provide timely community-based academic supports that keep K-12 students academically on track.
- Increase BIPOC student access to career exploration, activities and awareness.
- Provide support for BIPOC high school/college students for college access, persistence or completion.

Amount Requested \$\* \_\_\_\_\_

Enter the amount of funding requested\*

*Note: The total budget for this grant opportunity is \$100,000*

**NARRATIVE:**

Instructions: Provide only as much information as you need to answer each question. You do not need to use up the maximum amount of characters. Simple answers can be as short as one or two sentences; more complex answers may require many paragraphs. (10,000 character limit for all non-numerical responses)

### **Organization**

- 1) What counties does your organization serve? \*

*Note: Only organizations serving Rock Island County, IL and/or Scott County, IA are eligible to apply*

- Rock Island County, IL  
 Scott County, IA  
 Both

- 2) Provide a brief history of your organization. What motivates you (and your team, if applicable) to do this work? How and why did you get started? \*
- 3) Provide an overview of your organization's mission and services. \*
- 4) Describe the ethnic and racial diversity of your staff and board. What measures do you have in place to ensure that your staff and board align with the overall diversity of the Quad Cities? \*

### **Program/Project**

- 5) What specific need or issue is your program/project designed to address? \*
- 6) Describe the program/project. What services or supports do you plan to provide and how will they address this need? \*
- 7) In your approach to services, how is your organization considering the disproportionate impact on Black, Latinx and other Communities of Color in the Quad Cities? \*
- 8) What community partners (i.e., churches, neighborhood groups, businesses, non-profits, schools) will help you provide the services or supports proposed? Specify whether these are new or existing partnerships and what each partner will be providing for the project/program. \*
- 9) What is the timeline for your program/project? What are the major milestones you plan to achieve, and by when? \*
- 10) What specifically will you spend United Way funding on? Outline all major budget items, including costs. \*
- 11) How will you adjust your plans if your request is not fully funded? \*

### **Population Served**

- 12) Estimate the number of individuals you plan to serve with United Way funding (number only) \*:  
\_\_\_\_\_
- 13) What is the target community for this program/project (e.g., who will benefit, who is helped, what specific neighborhoods or regions will you serve)? \*
- 14) Describe how you will identify who to serve with your project/program's services or supports. How will you ensure the ethnic and racial diversity of the people served? \*



15) How will your program/project support increased equity and/or inclusion for specific racial and/or ethnic groups in the Quad Cities? \*

**Outcomes**

16) How do you, or how will you, measure the success of this work? What will you be able to present to United Way at the end of the grant term that measures the impact your services or supports have had at addressing this need? What successes have been achieved already (if any)? \*

If you have any questions, please contact **Trisha Piekarczyk**, Data & Research Manager, at **563.344.0339** or **trisha@unitedwayqc.org**