

2026 Community Impact Application

Each year United Way provides the opportunity for non-profit organizations providing human services in Lewis, Marion, Monroe, Ralls, or Shelby Counties to apply to become a Community Impact Agency.

Community Impact Agencies benefit financially from the United Way's Annual Campaign, but are also granted a membership into the United Way providing additional publicity opportunities, notoriety, training, and more. This application is to apply for the distinction as a Community Impact Agency from May of 2026 to April of 2027.

In order to be eligible to apply, the work of organizations must align with United Way's areas of focus and priority areas as well as be in line with priorities outlined in the Community Health Improvement Plan. In depth information on those can be found on the United Way website at <http://unitedwaymta.org/community-impact> and <https://unitedwaymta.org/community-needs>

Applications and all required documents are due to United Way by Saturday, February 15th at 11:59pm.

quincycooks@gmail.com [Switch account](#)



The name, email, and photo associated with your Google account will be recorded when you upload files and submit this form

* Indicates required question

Email *

lcook@cacnemo.org

Agency Name

Child Advocacy Center of Northeast Missouri

Your response is too large. Try shortening some answers.

Agency Director

Julie Seymore

Director E-mail

jseymore@cacnemo.org

Agency Address

8965 Highway 36 West

City, St, Zip

Hannibal, MO 63401

Agency Phone Number

636-332-0899

Website

www.cacnemo.org

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EIN

43-1856223

Fiscal Year Start and End Date

July 1 - June 30

Application Contact Name

Laura Cook

Application Contact E-mail Address

lcook@cacnemo.org

Application Contact Phone Number

217-617-7117

I certify I have the authority to submit this application on behalf of the organization.

☒ Yes

[Clear selection](#)

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Organization's Mission Statement

The Child Advocacy Center (CAC) of Northeast Missouri exists to protect children, heal families, and prevent abuse. Our mission is to deliver excellence in child abuse response, offer a path towards healing, and educate the community.

We provide a safe, child-friendly environment where a multidisciplinary team coordinates the investigation, treatment, and prosecution of child abuse cases. The CAC also works to prevent child abuse through school-based and community prevention education programs.

Organization's Vision Statement

A community without child abuse.

Provide a 25-word summary of your organization.

The Child Advocacy Center is a front-line responder to reports of child abuse and provides both crisis intervention services and child abuse prevention education programs.

How many dollars are you applying for from the United Way of the Mark Twain Area?

\$30,000

Are you currently receiving dollars from the United Way of the Mark Twain Area?

☒ Yes

☐ No

Your response is too large. Try shortening some answers.

Have you ever received dollars from the United Way of the Mark Twain Area?

☒ Yes

☐ No

Clear selection

What is your organization applying for funding from United Way for?

☒ Specific Project/Program - dollars will be designated to only be utilized for a specific purpose.

☐ General Support - dollars will be considered general revenue to the organization.

Clear selection

If applying for dollars for a specific project/program, name of the project/program.

Child Advocacy Center - Hannibal Office

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Give a **brief** overview of the program(s) your organization implements. Provide headings above each program.

If applying for specific project/program dollars give the overview of that project/program FIRST

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FORENSIC SERVICES

When abuse is reported, children are referred to the Child Advocacy Center of Northeast Missouri by law enforcement, Children's Division, or Juvenile Court. Staff contact caregivers to schedule the visit, gather background information, and explain what to expect, helping reduce stress before the appointment.

During the visit, we coordinate with investigative partners to ensure the child is interviewed just once whenever possible. Our Multidisciplinary Team collaborates to streamline the process, prevent repeated questioning, and support timely decisions.

Specially trained forensic interviewers use nationally-recognized, non-leading protocols in a child-friendly, trauma-informed setting. Interviews are recorded to preserve the child's statement and minimize re-traumatization.

While the child is interviewed, caregivers meet with a Child and Family Advocate for crisis support, safety planning, education about the investigative process, and referrals for therapy, medical exams, Crime Victims Compensation, and community resources. Advocacy continues throughout the case and beyond.

TRAUMA-FOCUSED MENTAL HEALTH THERAPY

Every child who completes a forensic interview is referred to therapy. Within 48 hours, staff follow up with caregivers to assess needs and readiness. We maintain a structured waitlist and coordinate with contracted providers to reduce delays.

Licensed clinicians provide evidence-based, trauma-focused treatment tailored to each child's needs. Primary treatment models include Trauma Focused - Cognitive Behavior Therapy (TF-CBT) and Eye Movement Desensitization and Reprocessing (EMDR) therapy, along with other specialized approaches as indicated. The average course of treatment is about 24 sessions.

At discharge, clinicians assess ongoing needs and offer booster sessions, referrals, or periodic check-ins. Families may return at any time if new concerns arise.

CHILD ABUSE PREVENTION EDUCATION

We deliver prevention education in public, private, and parochial schools throughout Northeast Missouri, including all five United Way counties. Programs presented in classrooms or assemblies range from 20–60 minutes.

Student curricula address body safety, internet safety, consent, healthy relationships, and sexual abuse prevention using age-appropriate content. Adult programs include caregiver education and mandated reporter training.

When disclosures occur, CAC staff provide immediate support and consultation with school personnel. Prevention staff remain available year-round for referrals and connections to advocacy or therapy.

Your response is too large. Try shortening some answers.

What data shows the work you would do with United Way dollars is needed in our community? Share the correlation between the programs you hope to implement with United Way funds and this data. Share the source of the data.

Data from the 2025 Hannibal Regional Community Health Needs Assessment (CHNA) shows a clear need for child abuse intervention, trauma-informed services, and prevention education across United Way's five-county service area. Mental health was identified as the region's top health concern, with depression, anxiety, suicide risk, and trauma, especially among youth, reported at high levels (Hannibal Regional CHNA, 2025). The CHNA also prioritizes health education and early intervention to reduce long-term harm.

Child abuse and sexual violence are significant contributors to childhood trauma and poor mental health outcomes. National research shows that one in ten children experiences sexual abuse before age 18 (Townsend & Rheingold, 2013). Children in rural communities like those served by United Way face nearly double the risk of victimization (Sedlak et al., 2010, U.S. Department of Justice). These findings align directly with the trauma and behavioral health concerns identified in the CHNA.

Local data confirms sustained need. In 2025, 140 children from United Way's five-county area were referred to the Child Advocacy Center of Northeast Missouri (CAC) for forensic interviews through the Hannibal office. The CAC also provided advocacy services to 210 families and trauma-focused mental health therapy to 53 child victims. These numbers reflect children already in crisis and demonstrate ongoing regional demand.

The CHNA further documents economic stressors that increase vulnerability to abuse. Across the region, 16.5% of children live in poverty and nearly 23% receive SNAP benefits (Missouri Kids Count Data Book; Hannibal Regional CHNA, 2025). Poverty is strongly correlated with increased risk of maltreatment and barriers to care.

United Way dollars directly support programs that respond to these needs. Forensic interviews and coordinated multidisciplinary response reduce re-traumatization. Advocacy provides crisis intervention and connection to resources. Trauma-focused therapy addresses acute and long-term impacts of abuse. School-based prevention education aligns with the CHNA's call for expanded health education and early intervention.

United Way Individuals Served in 2025: Lewis 1,225; Marion 3,761; Monroe 1,503; Ralls 538; Shelby 1,078. Total: 8,105.

How will your organization measure the success of the programs it implements in the community? What kind of change/improvement does your organization anticipate seeing in the community by doing your work?

We measure success through built-in program evaluation, outcome tracking, and continuous quality improvement across all services. Each program includes defined objectives, measurable outcomes, and routine review to ensure services remain effective and responsive to community need.

For prevention education, every curriculum has specific learning goals tied to increased knowledge and protective behaviors. All participants (students, parents, and professionals) complete post-program evaluations. A comprehensive assessment of programs delivered through the Hannibal office during the 2024–2025 school year documented strong outcomes:

- 97.24% of students in the Body Safety program learned the three safety steps: Say No, Get Away, Tell a Trusted Adult (goal 95%).
- 96.47% of students in the Internet Safety program learned how to respond to inappropriate online images or behavior (goal 85%).
- 98.55% of students in grades 6–12 learned to recognize risks of sexual abuse, both online and offline (goal 80%).
- 100% of parents and caregivers increased knowledge of abuse prevention (goal 95%).
- 99.2% of professionals completing Mandated Reporter training learned how to appropriately respond to a child's disclosure (goal 95%).

For forensic interviews and advocacy services, we track timeliness of response, case coordination, referrals made, and service engagement. For mental health therapy, clinicians use standardized assessment tools to measure symptom reduction and functional improvement over time. Client progress, service utilization, and completion rates are documented in our data system and reviewed regularly.

Program directors review outcome data quarterly to identify trends, address gaps, and strengthen service delivery. Feedback from families, partners, and community stakeholders is incorporated into planning and training.

Through this work, we anticipate measurable improvements in child safety, increased protective knowledge among youth and adults, earlier intervention following abuse, reduced trauma symptoms for child victims, and stronger collaboration among multidisciplinary partners.

Are there other organizations in our community addressing the same need and implementing similar programs who serve the same geographic area as your organization?

The Child Advocacy Center (CAC) is one of only two providers of child abuse prevention education in the region and the only organization delivering age-appropriate programming across the full K–12 spectrum. We serve elementary, middle, and high school students, as well as parents and professionals. Established partnerships with every school district in our service area (including the United Way counties of Lewis, Marion, Monroe, Ralls and Shelby) allow us to reach thousands of students each year with consistent, evidence-informed safety education.

The CAC is also the only Child Advocacy Center providing comprehensive crisis intervention services for child victims in United Way counties. This includes forensic interviews, child and family advocacy, and trauma-focused mental health therapy delivered at no cost to families. While other agencies may provide general counseling or social services, no other organization in the region offers a coordinated, multidisciplinary response to child abuse in a child-friendly setting designed to reduce trauma and prevent repeated interviews.

We do not duplicate services; instead, we serve as a central hub within the child protection system. Our team works closely with law enforcement, Children's Division, prosecutors, medical providers, schools, and mental health partners to ensure children receive a streamlined and supportive response.

Many of the families we serve face additional challenges such as poverty, housing instability, transportation barriers, and limited access to healthcare. To address these needs, our advocates maintain strong partnerships with local social service providers, including many United Way agencies. Advocates routinely coordinate referrals for medical care, housing assistance, food support, transportation, clothing, and other basic needs. Caregivers sign an Authorization of Release to allow agencies to collaborate efficiently and avoid duplication of services.

This collaborative model strengthens the overall safety net in our region while ensuring that child abuse victims receive specialized services that would not otherwise be available locally.

Your response is too large. Try shortening some answers.

If your organization would receive United Way funds, which focus area(s) would your work with these dollars align to?

- ☒ Healthy Community
- ☐ Youth Opportunity
- ☐ Financial Security
- ☐ Community Resiliency

Your response is too large. Try shortening some answers.

Explain how your work would align with the selected focus area(s). Please ensure you have reviewed how United Way defines these focus areas.

The Child Advocacy Center aligns directly with United Way's focus on improving community health and strengthening families. Our work addresses both the immediate impact of child abuse and the long-term behavioral health consequences that affect educational success, family stability, and overall well-being.

Children referred to the CAC have often experienced severe trauma, including sexual or physical abuse, exposure to domestic violence, and online exploitation. Many present with anxiety, depression, behavioral dysregulation, school avoidance, and other trauma-related symptoms. These children require structured, evidence-based intervention rather than short-term or generalized support.

Our crisis intervention services stabilize children and connect families to coordinated care. These include forensic interviews, child and family advocacy, and trauma-focused mental health therapy. Therapy helps reduce trauma symptoms, strengthen emotional regulation, and build resilience. By addressing trauma early, we reduce the risk of long-term mental health challenges, substance use, academic failure, and involvement with the juvenile justice system. This supports United Way's goal of improving health outcomes and helping children reach their full potential.

Our work also aligns with United Way's emphasis on prevention and early intervention. We provide child abuse prevention education to students, parents, caregivers, and mandated reporters across our five-county region. These programs teach children personal safety skills, help adults recognize warning signs, and increase appropriate reporting.

Research shows that children who receive school-based sexual abuse prevention education are 3.5 times more likely to disclose abuse than those who do not (Walsh, Zwi, Woolfenden & Shlonsky, 2015). Following school presentations, educators frequently report that students disclose abuse or express concern for a peer. Parents and professionals also increase hotline reporting after learning the signs of abuse.

By combining prevention education with trauma-informed response and treatment, the CAC advances United Way's mission to improve health, strengthen families, and create a more resilient community.

Your response is too large. Try shortening some answers.

If your organization would receive United Way funds, which priority area(s) would your work with these dollars align to?

- ☐ Supporting Critical Services
- ☒ Providing Opportunities for Upward Mobility

Your response is too large. Try shortening some answers.

Explain how your work would align with the selected priority area(s). Please ensure you have reviewed how United Way defines these priority areas.

The Child Advocacy Center's work directly aligns with Priority 1 in the Community Health Improvement Plan (CHIP): Mental Health and Substance Use Disorders. The CHIP identifies stigma, limited access to care, and high rates of substance use and overdose as critical concerns. Our trauma-informed services respond to each of these priorities through early intervention, coordinated care, and family-centered treatment.

Children referred to the CAC have experienced abuse, violence, or exploitation. These events are strongly linked to depression, anxiety, behavioral health disorders, and later substance misuse. At the time of the forensic interview, our Advocates educate caregivers about trauma and the benefits of mental health therapy. Services are provided at no cost to the child, non-offending caregiver, and siblings, reducing financial barriers that often delay care.

Our coordinated forensic interview and advocacy process protects a child's mental health from the outset by reducing re-traumatization, streamlining investigations, and ensuring timely referral to therapy. This aligns with the CHIP's emphasis on improving access to behavioral health services and addressing gaps in early treatment.

Trauma-focused mental health therapy, including evidence-based models such as Trauma-Focused Cognitive Behavioral Therapy (TF-CBT), helps children process traumatic experiences, reduce symptoms, improve emotional regulation, and strengthen daily functioning at home and at school. Caregiver participation is central to treatment. Therapists work with parents to understand trauma responses, manage stress, and build supportive home environments. All these factors have been shown to improve long-term mental health outcomes.

The CHIP also highlights the need to address substance use prevention. Adverse childhood experiences are a well-documented risk factor for later substance misuse and overdose. By stabilizing children early, strengthening coping skills, and improving family support systems, our services interrupt pathways that can lead to future substance use disorders.

Through early identification, stigma reduction, accessible treatment, and coordinated response, the CAC advances the Community Health Improvement Plan's goals of improving behavioral health outcomes and building a more resilient community.

If your organization would receive United Way funds, which priority health need(s) outlined in the Community Health Improvement Plan would your work with these dollars align to if applicable?

- ☒ Mental Health & Substance Use Disorders
- ☐ Access to & Affordability of Care
- ☐ Housing & Homelessness
- ☐ Transportation
- ☐ Chronic Disease Prevention & Management
- ☐ Workforce Development (Health & Social Sectors)

Your response is too large. Try shortening some answers.

Explain how your work would align with the selected priority health need(s).
Correlate your work to what is shared in the Community Health Improvement Plan.

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Describe the demographic makeup of the clients you would serve with funding from United Way. United Way prioritizes the needs of individuals who are marginalized (individuals living in poverty, minorities, children without parental support, etc.).

United Way funding would support children ages 3–18 and their non-offending caregivers across Lewis, Marion, Monroe, Ralls, and Shelby counties. Our wrap-around crisis intervention programs (forensic interviews, child and family advocacy, and mental health therapy) serve children who are suspected victims of abuse and our prevention education programs reach students in K-12 settings.

According to the April 2025 Missouri KIDS COUNT Data Book, 14,096 children live in the five-county United Way service area. These counties are classified as underserved by the Health Resources and Services Administration (HRSA) Rural Health Grants Eligibility Analyzer, meaning children are considered geographically isolated and economically or medically vulnerable.

Economic hardship is significant across the region. On average, 16.5% of children live in poverty and 23.3% live in families receiving SNAP benefits. County-level data shows poverty rates ranging from 14.6% (Ralls) to 19.1% (Shelby), with SNAP participation as high as 29.8% in Marion County. Substantiated child abuse and neglect rates range from 4 to 9 per 1,000 children, further reflecting vulnerability within this population.

Children living in poverty are at increased risk for abuse, limited access to healthcare, transportation barriers, housing instability, and untreated mental health concerns. Many families we serve lack insurance coverage for specialized trauma treatment or face significant travel barriers to access care outside their home county.

In addition to economic marginalization, many of the children we serve experience family disruption, including domestic violence exposure, parental substance use, incarceration, or lack of consistent parental support. Our services prioritize stabilizing children in crisis and strengthening caregivers' ability to provide safe, supportive homes.

United Way funding ensures that geographically isolated, economically vulnerable children have access to trauma-informed intervention and prevention services that would otherwise be unavailable in this rural area.

Dollars from the United Way of the Mark Twain Area can ONLY be used to support programs in Marion, Monroe, Ralls, Lewis, and Shelby Counties in Missouri. If you serve additional counties, how can you prove dollars are only used to support the work of these counties?

The FY26 operating budget for the CAC's Hannibal office is \$444,184. All services are tracked by county of residence. In 2025, 74.3% of children and families served through the Hannibal office resided in Lewis, Marion, Monroe, Ralls, and Shelby counties. The cost of serving these counties is approximately \$330,028.

If fully funded, United Way support would represent about 9.1% of the United Way service area budget and 6.7% of the total Hannibal office budget.

All designated funds are tracked according to agency fiscal policy. Upon award, revenue is entered into the Center's Funding Model spreadsheet and allocated to the specific program, personnel, or expense identified in the grant terms. Expenses are assigned monthly based on grant requirements to ensure funds are used exclusively to support services in the designated counties.

What other revenue streams are utilized to support the program you are applying to the United Way to receive funding for?

In 2025, the CAC received grant funding and donations to support the Hannibal office from Children's Trust Fund; Community Foundation Serving West Central Illinois and Northeastern Missouri; General Mills; George H. Riedel Foundation; Hannibal Early Bird Kiwanis; Missouri Network Against Child Abuse; Missouri Department of Social Services; Rotary Club of Hannibal; Samantha Otte Youth Opportunity Fund; Tri-County Electric Charity Foundation; and the Victims of Crime Act (VOCA).

In addition, unrestricted grants, fundraising event proceeds, and private donations secured through the agency's headquarters in Wentzville provide significant operating support. The CAC continues to diversify revenue sources and expand local funding partnerships to ensure long-term sustainability.

Your response is too large. Try shortening some answers.

Explain the impact funding from United Way will have on the work of your organization if selected to receive funding from May 2026-April 2027.

Funding from United Way for May 2026 through April 2027 will strengthen the CAC's ability to provide trauma-informed, child-focused services across Lewis, Marion, Monroe, Ralls, and Shelby counties. Nearly 65% of those served through our Hannibal office reside in United Way counties, making this partnership essential to sustaining local impact.

United Way support expands access to forensic interviews, child and family advocacy, and trauma-focused mental health therapy, while ensuring prevention education reaches students in public, private, and parochial schools. This investment supports coordinated multidisciplinary response, timely access to care, and reduced trauma for children in crisis.

With United Way funding, the CAC in Hannibal will continue serving more than 10,000 children in Northeast Missouri annually through a combination of crisis intervention and school-based prevention education. Our partnership also increases community awareness, strengthens collaboration with educators and service providers, and ensures children and families receive consistent, high-quality support close to home.

Explain any collaborations with other agencies.

The CAC maintains strong collaborative partnerships across all five counties to ensure coordinated, effective services and avoid duplication.

We have long-standing relationships with school administrators, counselors, teachers, and district leaders who support delivery of our child abuse prevention education programs in public, private, and parochial schools.

Our crisis intervention services operate through multidisciplinary teams (MDTs) that include law enforcement, prosecutors, Children's Division, and Juvenile Offices in Lewis, Marion, Monroe, Ralls, and Shelby counties. Participating agencies include local police departments, county sheriff's offices, prosecuting attorneys, and state child protection staff. This coordinated model streamlines investigations, reduces re-traumatization, and ensures timely decision-making.

We also collaborate with community partners to address the broader needs of families. Organizations such as CASA, Douglass Community Services, Hannibal Regional Hospital, The Salvation Army, and other local nonprofits assist with medical care, housing, food, transportation, and other essential supports.

Your response is too large. Try shortening some answers.

For organizations that have been a United Way Community Impact Agency previously: How has your organization shown that your organization receives funding from United Way and partnered with the United Way organization?

The CAC publicly recognizes United Way of the Mark Twain Area each year in our Annual Report, on our website, in event materials and through social media. We highlight United Way's impact during presentations and community events, emphasizing how funding supports prevention education and trauma-informed services.

Our staff maintain regular communication with United Way leadership and participate in special events and fundraisers, including Charcuterie for Charity. In Fall 2025, Executive Director Julie Seymore hosted tours for United Way business partners. Lead Prevention Education Specialist Marcella Maggio served as a Community Impact Advocate during the 2025 Annual Giving Campaign and participated in both an interview and podcast.

If your organization previously has been a United Way Community Impact Agency, outside of receiving monthly financial support, how else has your organization benefited?

Beyond financial support, United Way has strengthened the CAC's visibility, partnerships, and community engagement.

Our staff regularly participate in outreach opportunities, including the Pinwheel Ceremony recognizing Child Abuse Prevention Month. Hannibal staff also partnered with Benson Financial for the Charcuterie for Charity event, raising nearly \$1,000 for our programs while highlighting our collaboration with United Way.

Through these partnerships, we have expanded community connections, strengthened referral networks, and increased understanding of the services available to children and families in crisis.

Next

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Your response is too large. Try shortening some answers.

PROGRAMS & MISSION:

Is your organization's mission statement able to be found prominently at your organization, on your organization's website, and on printed materials about your organization?

- ☒ Yes
- ☐ No
- ☐ Need more information

Does your organization ensure all programs of your organization align with the mission of the organization?

- ☒ Yes
- ☐ No
- ☐ Need more information

Does your organization have a strategic plan?

- ☒ Yes
- ☐ No
- ☐ Need more information

BOARD:

Does your organization have a board of directors that meets at least once a year to oversee the affairs of the organization?

- ☒ Yes
- ☐ No
- ☐ Need more information

Does your organization have a board of directors made up of a diverse group of people (age, gender, education, background, ethnicity, etc.)?

- ☒ Yes
- ☐ No
- ☐ Need more information

Does your organization have a process to recruit new board members?

- ☒ Yes
- ☐ No
- ☐ Need more information

Does your organization provide training to new board members?

- ☒ Yes
- ☐ No
- ☐ Need more information

Has your organization reviewed its bylaws in the last 12 months?

- ☒ Yes
- ☐ No
- ☐ Need more information

Does your board approve the annual budget?

- ☒ Yes
- ☐ No
- ☐ Need more information

Does your board review financial statements on at least a quarterly basis?

- ☒ Yes
- ☐ No
- ☐ Need more information

Does your board annually disclose conflicts of interest?

- ☒ Yes
- ☐ No
- ☐ Need more information

Does your organization maintain meeting minutes for all board meetings?

- ☒ Yes
- ☐ No
- ☐ Need more information

How frequently does your board meet?

Monthly

Does your organization's bylaws include term limits for board members?

- ☒ Yes
- ☐ No
- ☐ Need more information

Do all of your organization's board members give financially to the organization, or if they are unable to give financially, do they volunteer their time to the organization?

- ☒ Yes
- ☐ No
- ☐ Need more information

EMPLOYER QUESTIONS:

If your organization has employees, do you have an employee handbook?

- ☒ Yes
- ☐ No
- ☐ Need more information
- ☐ N/A

If your organization has employees, are there up to date job descriptions for those employees?

- ☒ Yes
- ☐ No
- ☐ Need more information
- ☐ N/A

If your organization has an Executive Director, is that director evaluated on an annual basis by the board of directors?

- ☒ Yes
- ☐ No
- ☐ Need more information
- ☐ N/A

FINANCE & LEGALITY:

In the last year has there been any government agency led investigations of your organization?

- ☐ Yes
- ☒ No
- ☐ Need more information

Is your organization registered with the Secretary of State's Office and is that registration up to date?

- ☒ Yes
- ☐ No
- ☐ Need more information

Did your organization file the IRS Form 990, 990-EZ, or 990-N in a timely manner (within ten and a half months of your last fiscal year end)?

- ☒ Yes
- ☐ No
- ☐ Need more information

Was a copy of the IRS Form 990 provided to the organization's board of directors before it was filed?

- ☒ Yes
- ☐ No
- ☐ Need more information

Has your organization reviewed its policies and procedures in the last 12 months?

- ☒ Yes
- ☐ No
- ☐ Need more information

Does your organization have a financial policy in place to oversee the paying of invoices?

- ☒ Yes
- ☐ No
- ☐ Need more information

Does your organization have a policy in place to reimburse employees or volunteers for expenses?

- ☒ Yes
- ☐ No
- ☐ Need more information

Does your organization have a policy in place for receiving cash and making deposits?

- ☒ Yes
- ☐ No
- ☐ Need more information

How much does your organization have in operating reserves per your most recent financial statement?

As of 12/31/25: \$447,915 cash; \$353,786 short-term investments; avg. cash \$726,492.

How many months does that operating reserves equate to in regards to average monthly expenses?

Average cash and short-term investments equate to 2.15 months of operating expenses.

Any details you want to share about your organization's operating reserves?

There are three specific funding sources we consider our greatest fiscal risk: federal grants, gala fund-raising event, and third-party fundraisers. Combined these sources account for \$1,140,000 of our annual budget. If we experience as little as a 25% reduction in these areas, we risk losing \$285,000 in annual revenue. Our operating reserves provide a safety net for this potential loss in funding.

File Uploads

Following are the required documents - United Way must receive ALL required documents by Saturday, February 15th in order to be eligible to become a Community Impact Agency.

NUMBER SERVED: Please submit your numbers served using THIS link:

[2026 Number of People Served at the Agency – Fill out form](#)

Number of Individuals Served - USE THIS LINK: [2026 Number of People Served at the Agency – Fill out form](#)

☒ Form Submitted

Organization Budget - Form found on Website or can use own format - Upload as Spreadsheet

 2026-2027 Orga...

 Add file

Program/Project Budget (if applying for program/project dollars) - Form found on Website - Upload as Spreadsheet

 2026-2027 Proje...

 Add file

Most Recent IRS 990

 CAC_990 FY25 - ...

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Federal IRS Determination Letter - Not required for returning applicants

 Add file

For budgets over \$300,000 please upload your most recently completed audit.

 FY2025 Full Audi...

 Add file

For budgets of \$20,000-\$300,000 please upload a Compilation Report prepared by a CPA (or bring a copy to the United Way Office if no full audit).

 Add file

For budgets under \$20,000, please upload most recent approved financial statement.

 Add file

Board Member Listing - Form Found on Website - Upload as Spreadsheet

 CAC_Board Mem...

 Add file

Key Employee Listing - Form Found on Website - Upload as Spreadsheet

 CAC_Key Employ...

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Organization's most recent Annual Report (if applicable)

 2024 Annual Rep...

 Add file

Upload Agency's Bylaws - Required for new applicants, required for returning applicants if any changes have been made in past year.

 CAC_Amended B...

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