Pocono Mountains
UNITED WAY

Funding Process Meeting

November 6, 2025

AGENDA

- Welcome and Introductions
- FY 2026-2027 Priority Needs
- Priority Considerations
- Overview of Funding Process
- Online Application Portal
- Common Application Errors
- Performance Measures (Outcomes) Section
- Questions and Answers

WELCOME AND INTRODUCTIONS

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MISSION: Pocono Mountains United Way engages and mobilizes resources to improve lives through accelerated community change.

VISION: A community where everyone has ample opportunities for quality education, good health, and financial stability.

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FY 2026-2027 Priority Needs

Education

Health

Financial Mobility

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FY 2026-2027 Priority Needs

- **Mental Health**

  Innovative solutions including self-help, social support and prevention of mental health disorders
- **Basic Needs**
  - Food
  - Transportation
- **Childcare**
- **Domestic Violence**
- **Housing**
  - Rental assistance, housing/eviction counseling, financial counseling/coaching
  - Other innovative approaches to stabilizing renters
  - Assistance for people experiencing homelessness
  - Addressing at-risk homeowners

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FY 2026-2027 Priority Considerations

- **Address ALICE population**
  - Strategies to reduce benefits cliffs
  - Expansion of programs to serve up to the ALICE Survival Threshold or ALICE Stability Threshold
- **Address disproportionate impacts on People of Color and Socially Disadvantaged households**
- **Address disproportionate impacts on women**

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Overview of Funding Process

January 1, 2026	Application for FY 2025-2026 funding opens
January 31, 2026	Applications due
February 2026	Financial Review Panel meetings
March-April 2026	Program Review Panel Meetings and Site Visits
Late May 2026	PMUW Board of Directors approves panel funding recommendations
Early June 2026	Funding announcements made
August 2026	First quarterly payments made
August 15, 2026	FY 2024-2025 End of Year Reports due
January 2027	FY 2025-2026 Mid-Year Reports due
August 2027	FY 2025-2026 End of Year Reports due

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Overview of Funding Process

Any 501c3 nonprofit serving Monroe County may apply for funding for FY 2026-2027.
Eligibility criteria apply, see Request for Applications (RFA) for full details

- RFA will be released December 1, 2025

- RFA and other details available at
https://poconounitedway.org/resource-investment-process/

Please note:
Minimum funding request of $10,000
Maximum funding request of $40,000
Must have been in operation for 24 continuous months
Must have had annual revenue of at least $20,000 in last fiscal year

See RFA for full eligibility criteria

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Overview of Funding Process

- **Volunteers from our community work on panels to conduct reviews**
  - Financial Reviews
  - Program Reviews
- **The Resource Investment Committee makes funding recommendations to the Board of Directors**
- **Board of Directors approves total available dollars and final funding amounts for each program**

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Overview of Funding Process

“Hybrid Site Visit” Model

- Approximately 1/3 of funded agencies will have an in-person meeting each year
- Remaining agencies will be reviewed by panels alone; questions will be directed to agencies with time for response before final recommendations are made
- If site visits are not possible or your agency has particular restrictions in place, please note that in the application

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Online Grant Portal

e-CImpact

Access at

agency.e-cimpact.com/login.aspx?org=40570U

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Online Grant Portal

Agency Training Manual Available Here

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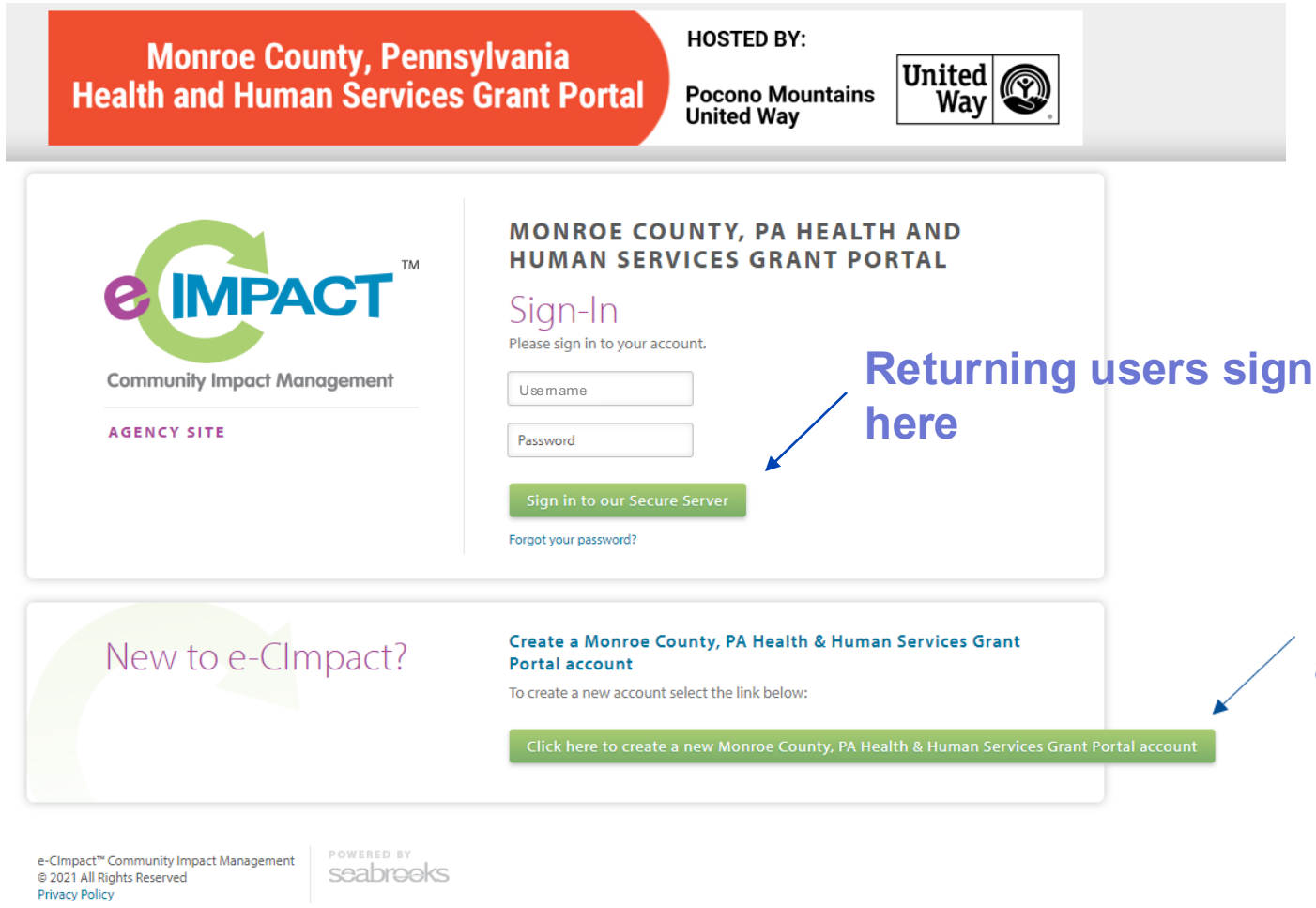
Online Grant Portal



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Agency Information

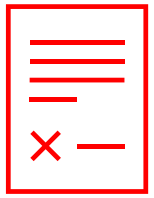
Only required once per agency:

- Agency Status
- Agency Budget
- Agency Fiscal Abstract
- PATRIOT Act Information

Program Information

Required for each program requesting funding:

- Program Overview
- Program Budget
- Program Budget Narrative
- Performance Measures *(Outcomes and Outputs)*
- Optional: Program Success Story



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Required Attachments

- IRS Tax-Exempt Determination Letter
- Most Recent Annual Report
- IRS Form 990 or 990 EZ
- Financial Audit or Review
- Current Certificate of Registration from Department of State, Bureau of Charitable Organizations
- Board of Directors Roster
- Agency Organizational Chart
- Agency Non-Discrimination and Conflict of Interest Policies

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Common Errors: Agency Application

Be sure to provide the correct budget type:

- Agency Budget (also called Operating Budget)*
  - Refers to the budget for the entire organization
  - REMINDER – for agencies with multi-state/national financials, please ONLY provide the local budget information on the Agency Budget Form
- Program Budget
  - Refers to the budget only for the specific program/portion of agency activities seeking funding
- Grant Budget – this is not requested by PMUW
  - Refers to the budget showing only how grant funds will be expended

**we are aware that a few agencies consider the entire organization one program, they will provide the same numbers for Agency and Program Budgets*

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Common Errors: Agency Application

Agency Budget

- For prior year budget, use the last completed budget year, regardless of dates (e.g., fiscal year, calendar year, etc.)
- Line F should include funding received from Pocono Mountains United Way (prior year budget/actual) and funding requested (current budget)
  - We recognize that if the full requested amount is not received, it will change the current budget figures
  - However, if no funds are shown, it will appear that funding from PMUW is creating a surplus
- Check the last line for accurate Surplus/Deficit
  - Volunteers do look at that information and will question large amounts in either direction

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Common Errors: Agency Application

Income

For Prior Year Budget, please provide organization's last full fiscal year budget.

	Prior Year Budget	Prior Year Actual	Prior Year Percent Change	Current Budget	Current Year Percent Change
a. Government	0.00	0.00	0.00	0.00	0.00
b. Foundations / Corporations	525,000.00	525,000.00	0.00	525,000.00	0.00
c. Individual Donations	5,000.00	10,000.00	100.00	10,000.00	0.00
d. Events	0.00	0.00	0.00	0.00	0.00
e. Fees paid by outside sources	0.00	0.00	0.00	0.00	0.00
f. Pocono Mountains United Way	0.00	0.00	0.00	0.00	0.00
g. Other United Way(s)	0.00	0.00	0.00	0.00	0.00
h. Interest / Investments	5,000.00	5,000.00	0.00	5,000.00	0.00
i. Program Fees	0.00	0.00	0.00	0.00	0.00
j. Other - Click Here to Add	0	0	0	0	0
Total Income	535,000.00	540,000.00	0.93	540,000.00	0.00

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Common Errors: Agency Application

Agency Fiscal Abstract – Key Financial Information

- Accurately calculate overhead rate from IRS Form 990

Typically, volunteers are looking for overhead costs to be no more than 25%

Form 990 (2022) Page **10**

Part IX **Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
e All other expenses				
25 **Total functional expenses.** Add lines 1 through 24e	2,815,346.	2,320,559.	168,022.	+ 326,765.
26 **Joint costs.** Complete this line only if the organization				

= 17.6%

2,815,346

Common Errors: Agency Supporting Documents

Ensure all documents are within current timeframes

- Annual Report: FY24-25, CY 2024 or CY2025
- IRS 990 or 990 EZ: 2024 or 2025
- Financial Audit, Review or Compilation: FY 23-24, FY 24-25, CY 2023 or CY 2024
    - View full list of Agency Supporting Documents

Please contact PMUW staff if newer versions are expected after application due date

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Common Errors: Agency Supporting Documents

- Example Document – IRS Tax Exempt Status Determination Letter

IRS Department of the Treasury
Internal Revenue Service
P.O. Box 2508, Room 4010
Cincinnati OH 45201

In reply refer to: 4077383720
Dec. 02, 2019 LTR 4168C 0
24-0797026 000000 00
00025001
BODC: TE

POCONO MOUNTAINS UNITED WAY
301 MCCONNELL ST
STROUDSBURG PA 18360-2577

017691

Employer ID number: 24-0797026
Form 990 required: Yes

Dear Taxpayer:

We're responding to your request dated Oct. 23, 2019, about your tax-exempt status.

We issued you a determination letter in January 1951, recognizing you as tax-exempt under Internal Revenue Code (IRC) Section 501(c)(3).

We also show you're not a private foundation as defined under IRC Section 509(a) because you're described in IRC Sections 509(a)(1) and 170(b)(1)(A)(vi).

Donors can deduct contributions they make to you as provided in IRC Section 170. You're also qualified to receive tax deductible bequests, legacies, devises, transfers, or gifts under IRC Sections 2055, 2106, and 2522.

In the heading of this letter, we indicated whether you must file an annual information return. If you're required to file a return, you must file one of the following by the 15th day of the 5th month after

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Common Errors: Agency Supporting Documents

- Example Document – Certificate of Registration – PA Dept. of State, Bureau of Charitable Organizations (BCO)

Commonwealth of Pennsylvania

Department of State

Bureau of Corporations and Charitable Organizations

Certificate of Registration

No. [redacted]

This is to certify that [redacted] *is registered as a* ***Charitable Organization*** *with the Department of State, Bureau of Corporations and Charitable Organizations under The Solicitation of Funds for Charitable Purposes Act, 10 P.S. § 162.1 et seq., and is authorized to solicit charitable contributions under the conditions and limitations set forth under the Act.*

This certificate issued on ***10/04/2022*** *and expires on* ***05/15/2023****. Expiration date includes 180-day automatic extension.*

This certificate is not to be used as identification nor does it constitute an endorsement.

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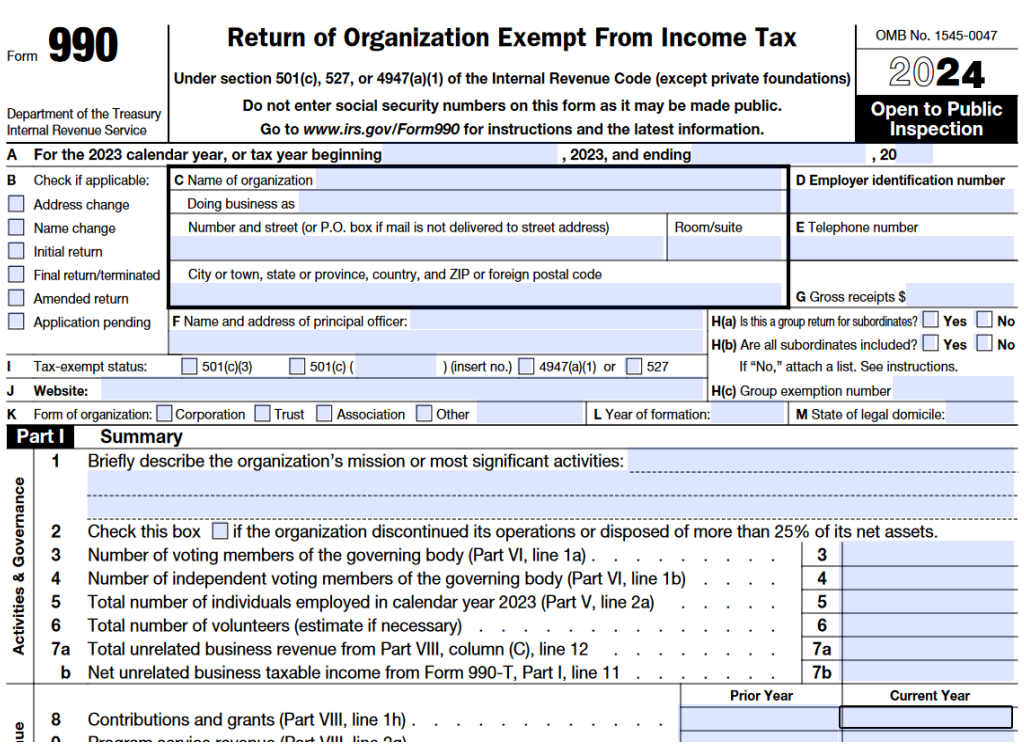
Common Errors: Agency Supporting Documents

- Example Document – IRS 990 or 990 EZ Form



Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
Do not enter social security numbers on this form as it may be made public.
Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No. 1545-0047
2024
Open to Public Inspection

A For the 2023 calendar year, or tax year beginning , 2023, and ending , 20

B Check if applicable:
- Address change
- Name change
- Initial return
- Final return/terminated
- Amended return
- Application pending

C Name of organization
Doing business as
Number and street (or P.O. box if mail is not delivered to street address) | Room/suite
City or town, state or province, country, and ZIP or foreign postal code

D Employer identification number
E Telephone number
G Gross receipts $

F Name and address of principal officer:

H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No
If "No," attach a list. See instructions.
H(c) Group exemption number

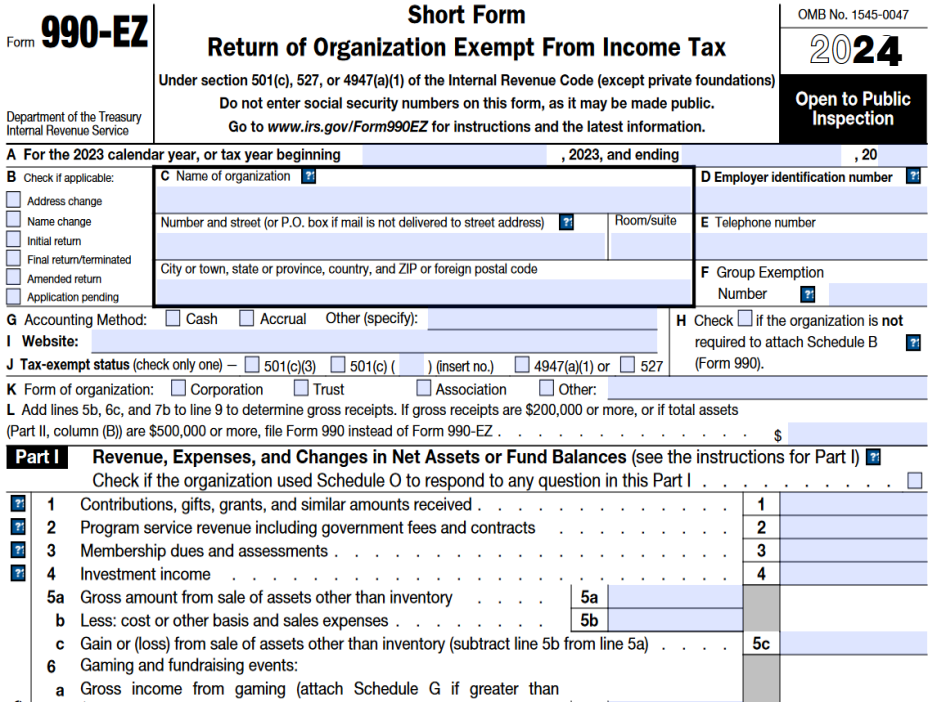
I Tax-exempt status: 501(c)(3) 501(c) ( ) (insert no.) 4947(a)(1) or 527
J Website:
K Form of organization: Corporation Trust Association Other
L Year of formation:
M State of legal domicile:

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities:
2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets.
3 Number of voting members of the governing body (Part VI, line 1a)
4 Number of independent voting members of the governing body (Part VI, line 1b)
5 Total number of individuals employed in calendar year 2023 (Part V, line 2a)
6 Total number of volunteers (estimate if necessary)
7a Total unrelated business revenue from Part VIII, column (C), line 12
b Net unrelated business taxable income from Form 990-T, Part I, line 11

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)		



Form **990-EZ**

Department of the Treasury
Internal Revenue Service

Short Form
Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
Do not enter social security numbers on this form, as it may be made public.
Go to *www.irs.gov/Form990EZ* for instructions and the latest information.

OMB No. 1545-0047
2024
Open to Public Inspection

A For the 2023 calendar year, or tax year beginning , 2023, and ending , 20

B Check if applicable:
- Address change
- Name change
- Initial return
- Final return/terminated
- Amended return
- Application pending

C Name of organization
Number and street (or P.O. box if mail is not delivered to street address) | Room/suite
City or town, state or province, country, and ZIP or foreign postal code

D Employer identification number
E Telephone number
F Group Exemption Number

G Accounting Method: Cash Accrual Other (specify):
I Website:
J Tax-exempt status (check only one) – 501(c)(3) 501(c) ( ) (insert no.) 4947(a)(1) or 527
K Form of organization: Corporation Trust Association Other:

H Check if the organization is **not** required to attach Schedule B (Form 990).

L Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are $200,000 or more, or if total assets (Part II, column (B)) are $500,000 or more, file Form 990 instead of Form 990-EZ $

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)
Check if the organization used Schedule O to respond to any question in this Part I

1	Contributions, gifts, grants, and similar amounts received		1
2	Program service revenue including government fees and contracts		2
3	Membership dues and assessments		3
4	Investment income		4
5a	Gross amount from sale of assets other than inventory	5a	
b	Less: cost or other basis and sales expenses	5b	
c	Gain or (loss) from sale of assets other than inventory (subtract line 5b from line 5a)		5c
6	Gaming and fundraising events:		
a	Gross income from gaming (attach Schedule G if greater than		

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Common Errors: Program Application

Program Budget

- List full amount being requested from PMUW on Line D under Income
- Verify surplus/deficit is accurate at the bottom of the budget
- If a large surplus or deficit is shown, please provide context in the Program Budget Narrative section

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Tips to Improve Applications

- Use bullet points to list the important services that your program provides.
- Shorter and more concise applications are easier for volunteers to understand why your program is beneficial. Focus on the program you are applying for and not everything that your agency provides.
- Provide a video about your program. This video can be a news story, commercial, client testimonial, a video created in house or professionally, or anything that provides more information about your program. This is not required but encouraged.

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Performance Measures (Outcomes) Section

- Agencies are able to "write in" their own outcomes or use standard outcomes (click here for list)
  - If using standard outcomes, please consider if they accurately represent the change in participant status that your program seeks to accomplish

- The outcomes you report on should ultimately answer the question…

"Are participants better off after receiving the service than they were before?"

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Performance Measures (Outcomes) Section

- **1-2 solid outcomes are fine**
  - We understand that it can be a process to determine and track outcomes
  - Our goal is to better capture the impact that PMUW dollars make in the community

- **Remember technical assistance is available!**
  - Contact Maria or Sarah for assistance

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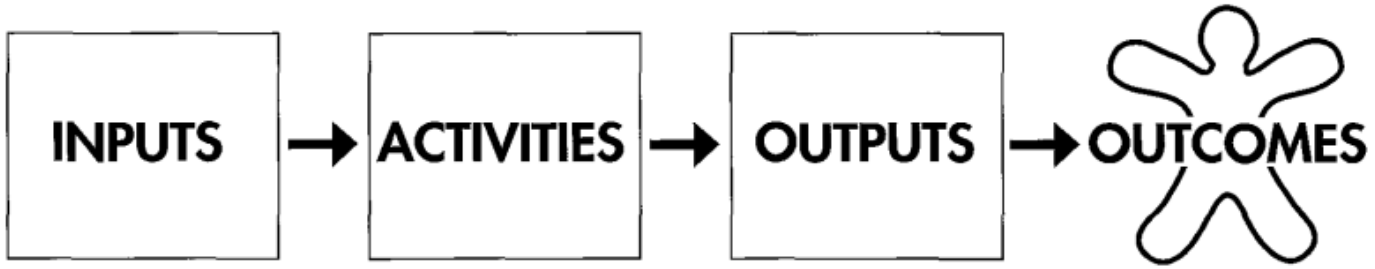
Performance Measures (Outcomes) Section

Summary of Program Outcome Model



Resources dedicated to or consumed by the program

e.g.
- money
- staff and staff time
- volunteers and volunteer time
- facilities
- equipment and supplies

Constraints on the program

e.g.
- laws
- regulations
- funders' requirements

What the program does with the inputs to fulfill its mission

e.g.
- feed and shelter homeless families
- provide job training
- educate the public about signs of child abuse
- counsel pregnant women
- create mentoring relationships for youth

The direct products of program activities

e.g.
- number of classes taught
- number of counseling sessions conducted
- number of educational materials distributed
- number of hours of service delivered
- number of participants served

Benefits for participants during and after program activities

e.g.
- new knowledge
- increased skills
- changed attitudes or values

↓

- modified behavior

↓

- improved condition
- altered status

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Performance Measures Section - How to Enter

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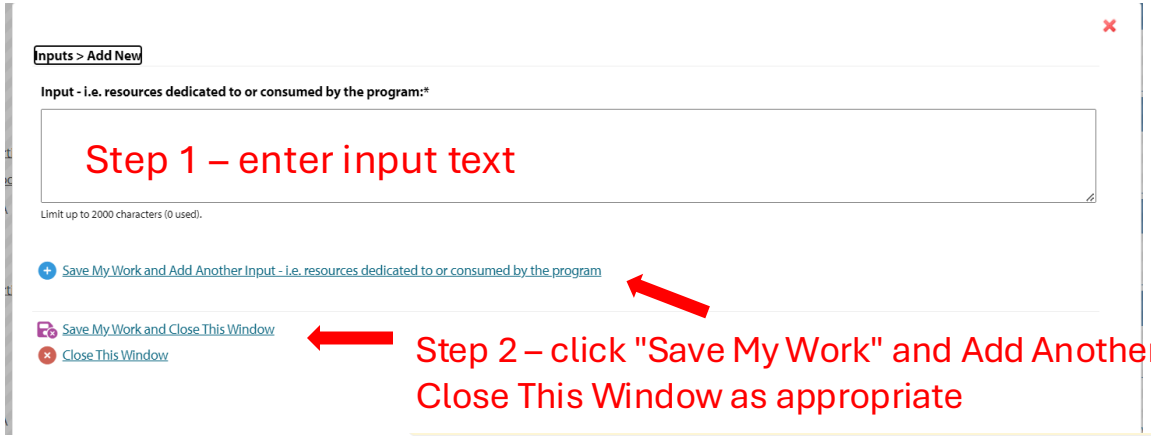
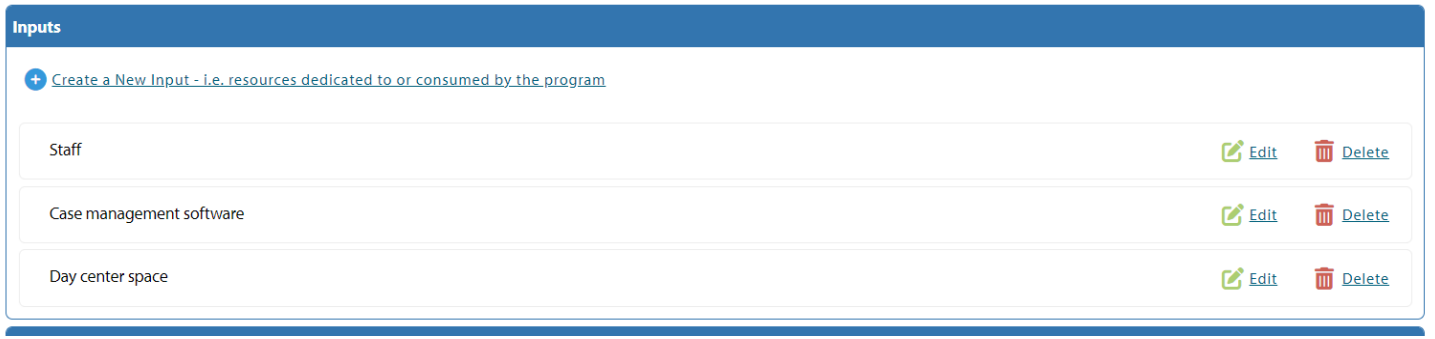
Performance Measures Section - Adding Inputs



Step 2 – click "Save My Work" and Add Another Input **OR**
Close This Window as appropriate



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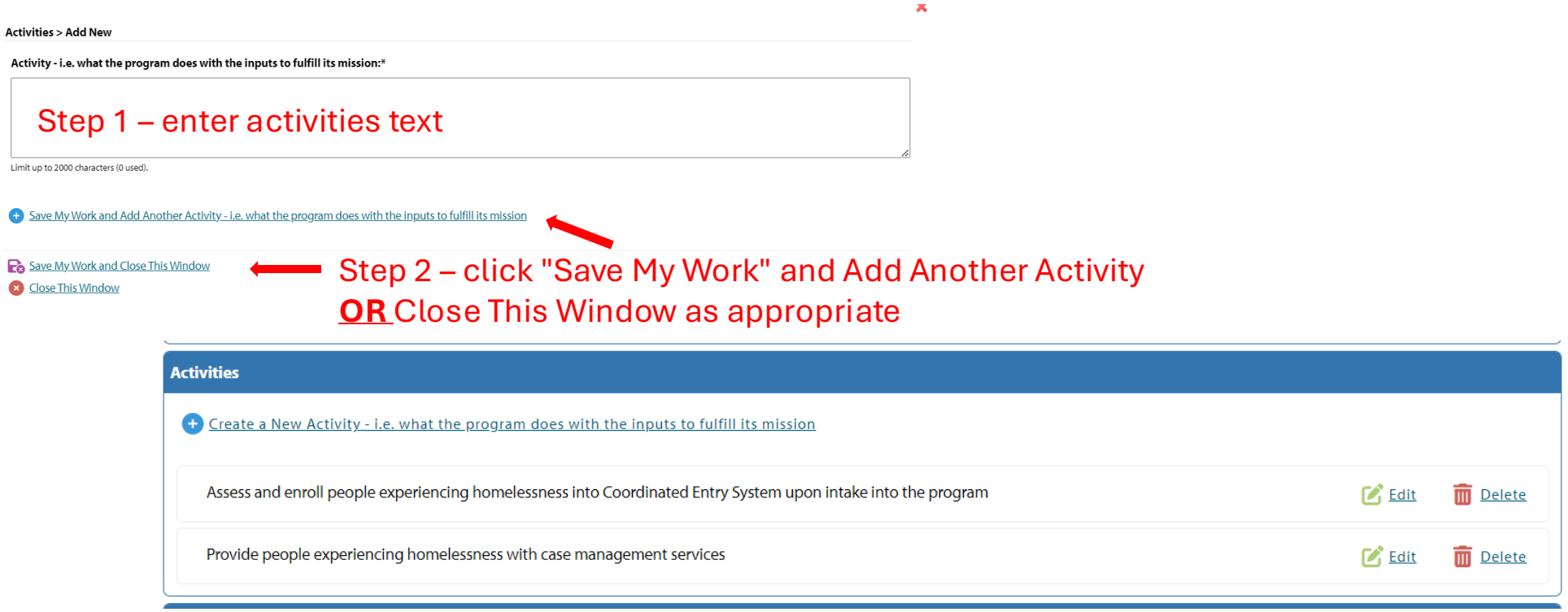
Performance Measures Section - Adding Activities



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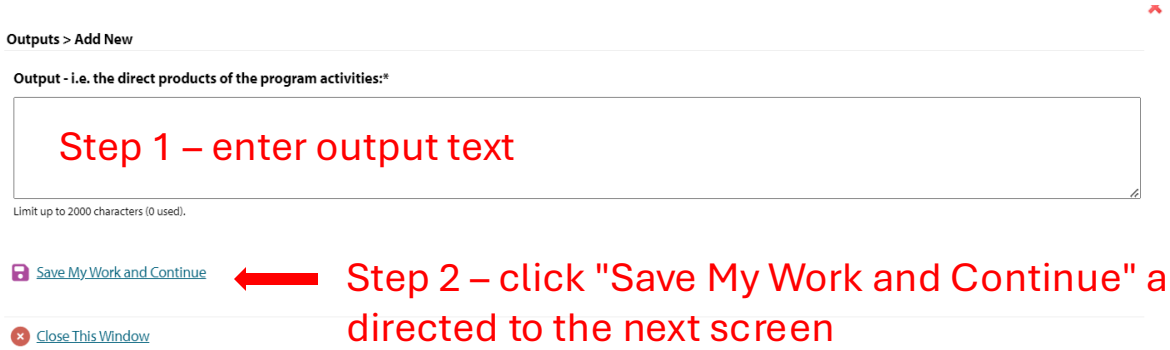
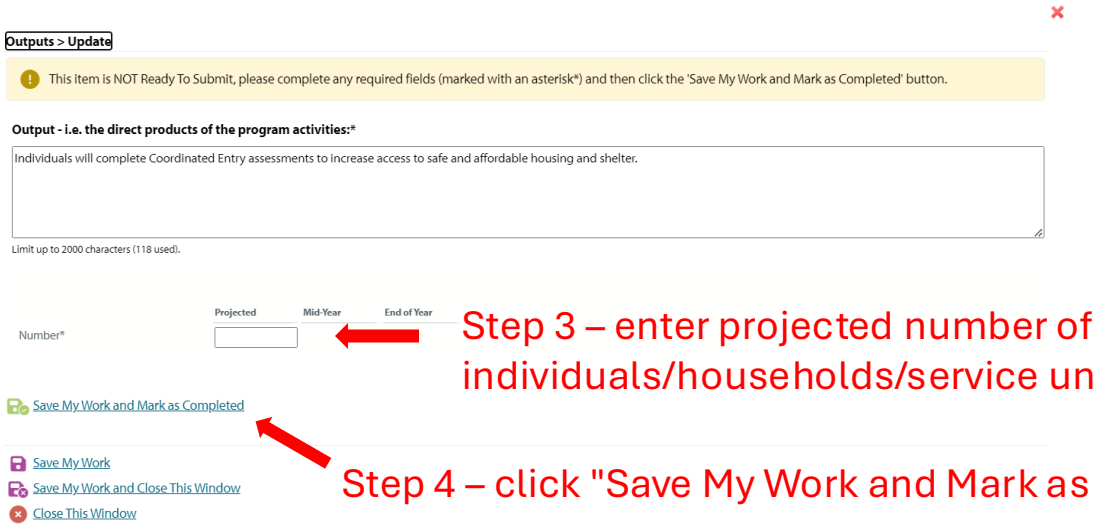
Performance Measures Section - Adding Outputs



Step 2 – click "Save My Work and Continue" and you will be directed to the next screen



Step 3 – enter projected number of individuals/households/service units for the output

Step 4 – click "Save My Work and Mark as Completed"

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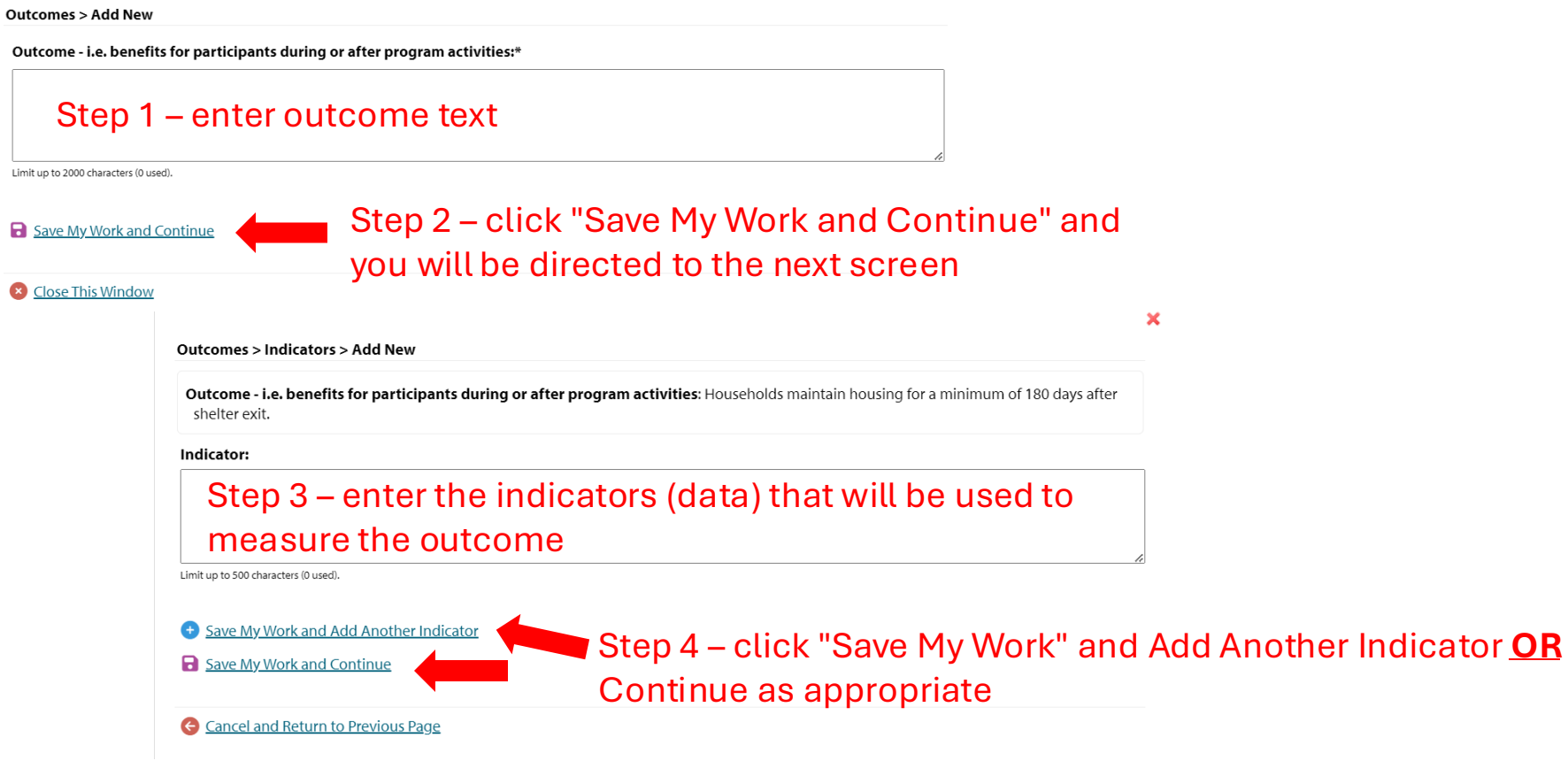
Performance Measures Section - Adding Outcomes



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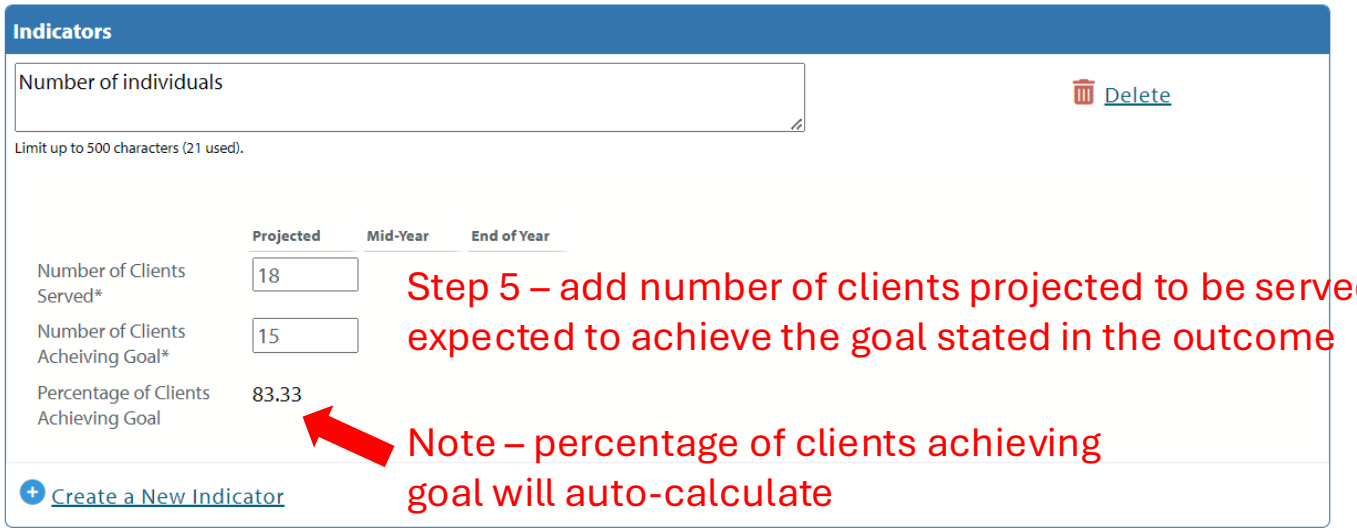
Performance Measures Section - Adding Outcomes



Step 5 – add number of clients projected to be served and number expected to achieve the goal stated in the outcome

Note – percentage of clients achieving goal will auto-calculate

Step 6 – click "Save My Work and Mark as Completed"

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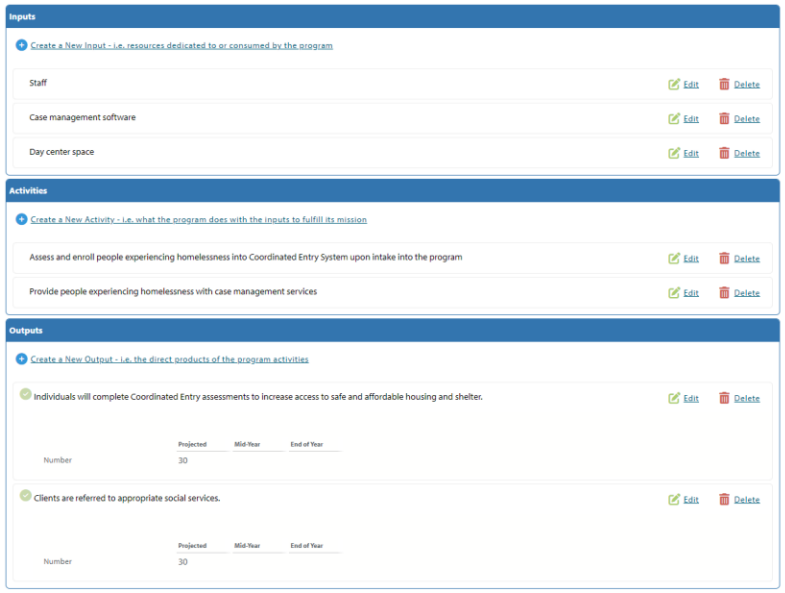
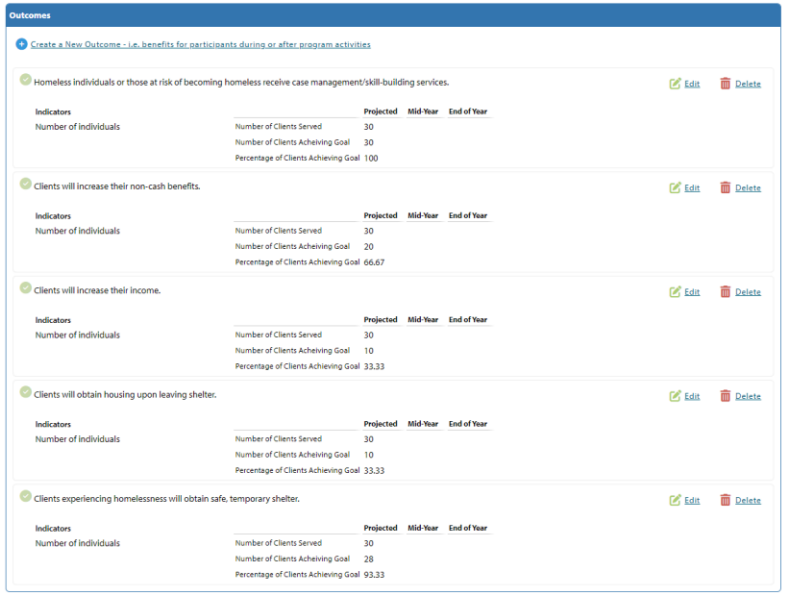
Performance Measures Section - Adding Outcomes



Once completed, you can review all entries on the home screen



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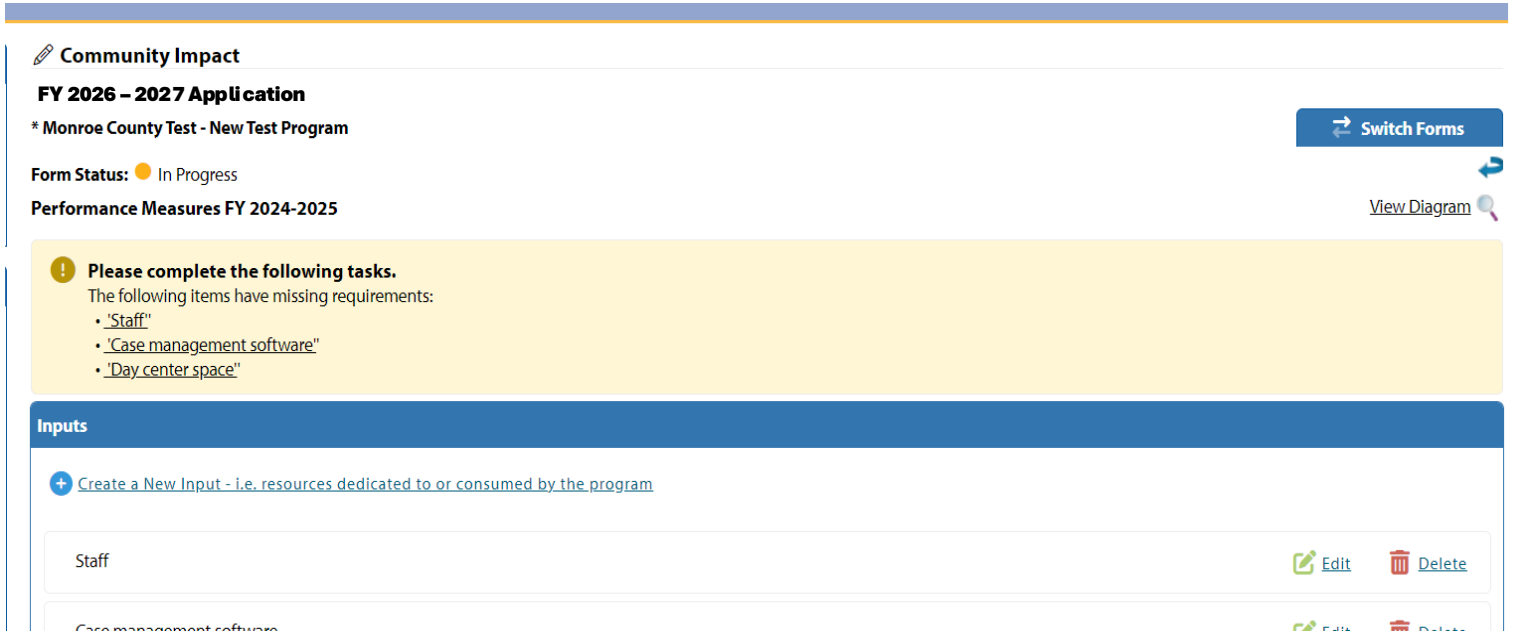
Performance Measures Section - Adding Outcomes



Click "View Diagram"

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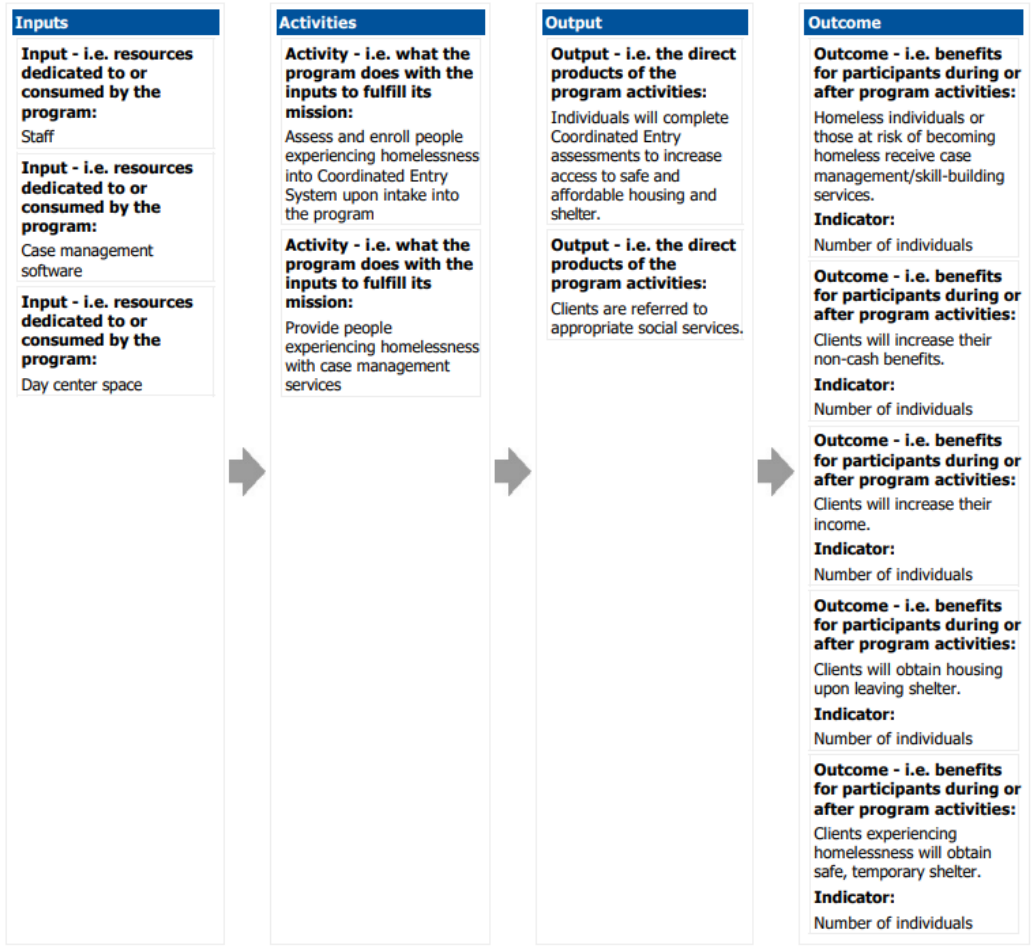
Performance Measures Section - Reviewing the Logic Model

*** Monroe County Test / New Test Program**
Performance Measures



Inputs	Activities	Output	Outcome
Input - i.e. resources dedicated to or consumed by the program: Staff	**Activity - i.e. what the program does with the inputs to fulfill its mission:** Assess and enroll people experiencing homelessness into Coordinated Entry System upon intake into the program	**Output - i.e. the direct products of the program activities:** Individuals will complete Coordinated Entry assessments to increase access to safe and affordable housing and shelter.	**Outcome - i.e. benefits for participants during or after program activities:** Homeless individuals or those at risk of becoming homeless receive case management/skill-building services. **Indicator:** Number of individuals
Input - i.e. resources dedicated to or consumed by the program: Case management software	**Activity - i.e. what the program does with the inputs to fulfill its mission:** Provide people experiencing homelessness with case management services	**Output - i.e. the direct products of the program activities:** Clients are referred to appropriate social services.	**Outcome - i.e. benefits for participants during or after program activities:** Clients will increase their non-cash benefits. **Indicator:** Number of individuals
Input - i.e. resources dedicated to or consumed by the program: Day center space			**Outcome - i.e. benefits for participants during or after program activities:** Clients will increase their income. **Indicator:** Number of individuals
			Outcome - i.e. benefits for participants during or after program activities: Clients will obtain housing upon leaving shelter. **Indicator:** Number of individuals
			Outcome - i.e. benefits for participants during or after program activities: Clients experiencing homelessness will obtain safe, temporary shelter. **Indicator:** Number of individuals

Review all entries in the logic model

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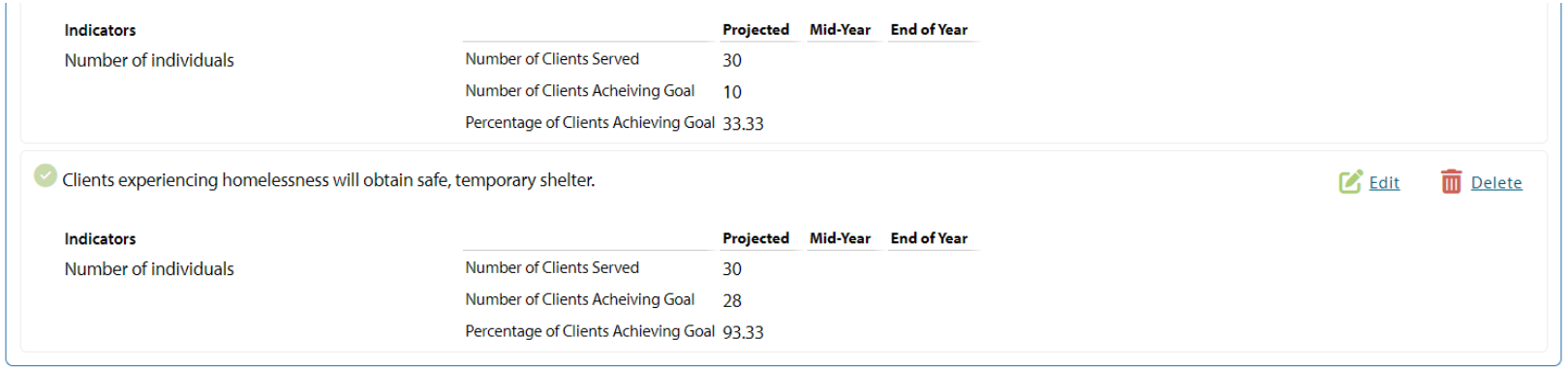
Performance Measures Section - Completing the Section



Indicators		Projected	Mid-Year	End of Year
Number of individuals	Number of Clients Served	30		
	Number of Clients Acheiving Goal	10		
	Percentage of Clients Achieving Goal	33.33		

Clients experiencing homelessness will obtain safe, temporary shelter.

Edit Delete

Indicators		Projected	Mid-Year	End of Year
Number of individuals	Number of Clients Served	30		
	Number of Clients Acheiving Goal	28		
	Percentage of Clients Achieving Goal	93.33		

View Diagram

Return to Overview Page

Close the logic model view, then click "Return to Overview Page" at the bottom of the screen

e-CImpact™ Community Impact Management.
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Congratulations! Your Performance Measures Section is now complete!

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Other Reminders

Site Visits

- This is your opportunity to ”show off” your program
- Consider what aspects of the agency/program will tell your story
  - Staff or volunteer meet and greet
  - Seeing facilities
  - Stories/client interaction (if appropriate and ALWAYS with consent)

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Technical Assistance

PMUW staff is available for technical assistance Monday – Friday, during regular business hours, if you are having trouble with the website or have questions about the application.

- Email any questions to Maria (Maria@PoconoUnitedWay.org) and copy Sarah (Sarah@PoconoUnitedWay.org) to speed up your response time.
- Please do not wait until last minute on Saturday, January 31st, to reach out for assistance..

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Questions and Answers

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THANK YOU

Staff Contacts:

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