

Mighty Change

Capacity Building Training #2: Financials

Presented by: Christine Sullivan, VP, Controller

Agenda

1. General Required Documents
2. Budget Documents
3. Budget Narrative

General Required Documents

To be submitted with Grant Application

General Required Documents

- Prior Year Audited Financial Statements
 - Funder may request to include management letter if a modified opinion was issued and the formal agency response to management letter
- Annual Report if agency does not have Audited Financial Statements
 - Recommended format includes a Balance Sheet and Profit and Loss Statement
- Filed annual 990
 - All forms acceptable that apply to agency: 990-N, 990-EZ, full 990 form, 990-PF
- 501(c) determination letter

**Request for Taxpayer
Identification Number and Certification**

**Give Form to the
requester. Do not
send to the IRS.**

▶ Go to www.irs.gov/FormW9 for instructions and the latest information.

1 Name (as shown on your Income tax return). Name is required on this line; do not leave this line blank.
Sample Company 123

2 Business name/disregarded entity name, if different from above
dba Sample Company

3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.

Individual/sole proprietor or single-member LLC

C Corporation

S Corporation

Partnership

Trust/estate

Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____

Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.

Other (see instructions) ▶ _____

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):

Exempt payee code (if any) _____

Exemption from FATCA reporting code (if any) _____

(Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.) See instructions.
123 West Main Street

6 City, state, and ZIP code
Phoenix, AZ 85018

7 List account number(s) here (optional)

Requester's name and address (optional)

Print or type.
See Specific instructions on page 3.

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number

			-			
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or

Employer identification number

1	2	-	3	4	5	6	7	8	9
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Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here Signature of U.S. person ▶ *John Doe* Date ▶ 01/01/2022

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
 - Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
 - Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
 - Form 1099-S (proceeds from real estate transactions)
 - Form 1099-K (merchant card and third party network transactions)
 - Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
 - Form 1099-C (canceled debt)
 - Form 1099-A (acquisition or abandonment of secured property)
- Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.
- If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.



AUTHORIZATION AGREEMENT FOR AUTOMATIC DEPOSITS (ACH CREDITS)

AGENCY
NAME Sample Company 123 **AGENCY**
FEDERAL ID 12-3456789

I (we) hereby authorize Valley of the Sun United Way, hereinafter called AGENCY, to initiate credit entries to my (our) **Checking** **Savings** account (select one) indicated at the depository named below, hereinafter called DEPOSITORY

DEPOSITORY (BANK)
NAME Wells Fargo Bank **BRANCH** 100 W. Washington St 3rd Floor
CITY Phoenix **STATE** AZ **ZIP** 85003
ROUTING # 122105278 **ACCOUNT #** 0123456789

This authorization is to remain in full force and effect until AGENCY has received written notification from me (or either of us) of its termination in such time and in such manner as to afford AGENCY and DEPOSITORY a reasonable opportunity to act on it.

NAME John Doe
(Please Print)
DATE 01/01/2022 **SIGNED** John Doe

NOTE: ALL WRITTEN CREDIT AUTHORIZATIONS SHOULD PROVIDE THAT THE RECEIVER MAY REVOKE THE AUTHORIZATION ONLY BY NOTIFYING THE ORIGINATOR IN THE MANNER SPECIFIED IN THE AUTHORIZATION.

PLEASE BE SURE TO PROVIDE A COPY OF A VOIDED CHECK FOR VERIFICATION OF ROUTING AND ACCOUNT NUMBER. THE FORM CAN BE EMAILED TO:

Accounts Payable
FINANCE & ADMINISTRATION
Email: accountspayable@vsuw.org

Budget Documents

Budget Documents

- Program Budget
 - Budget developed specifically for program that agency is applying funding for
 - Review grant terms for allowable vs. disallowable costs
 - Remove disallowable costs from budget or show funder will not support these expenses
 - Recommended to include both program revenue and expenses
 - Provide detailed descriptions; strongly encourage to include descriptions for “other” items
 - Spell check!

Program Budget (include name of Program)

Agency Name: Sample Company 123

Program Date: 7/1/22 - 6/30/23

Program Revenue	Total Program Revenue	Description
Corporations	50,000.00	Secured funding from Cardinals Charities
Earned Income	-	
Foundations	-	
Fundraising Events	-	
Government Grants & Contracts	50,000.00	Secured funding from State of Arizona
Individuals	13,400.00	Projected individual donations
In-Kind Support	50,000.00	Secured in-kind donations for new beds
Investment Income	-	
United Way Funding	-	
Other: XYZ Funder*	50,000.00	This Pending request
Total Program Revenue	213,400.00	

Program Expense	Total Program Expense	Funding Amount	Description
Salaries	100,000.00	23,430.00	2.0 FTE direct program personnel
Employee Benefits and Taxes	25,000.00	5,858.00	
Employee Education and Training	-	-	
Professional Fees and Contracts	3,000.00	703.00	
Communications (telephone, web-conferencing)	1,000.00	234.00	
Supplies/Equipment Rental and Maintenance	1,000.00	234.00	
Occupancy (rent, utilities, building, & grounds)	3,500.00	820.00	
Advertising/Printing and Publications	500.00	117.00	
Travel/Meetings/Conferences	-	-	
Membership Dues/Support to Affiliate Org	-	-	
Evaluation	-	-	
Non-Payroll Insurance	-	-	
In-Kind Expenses	-	-	
Specific Assistance for Individuals	-	-	
Other Expenses*	60,000.00	18,604.00	Materials and supplies for beds: mattress, frames, bedding
Administrative Expenses	19,400.00	-	Indirect expenses estimated at 10%
Total Program Expense	213,400.00	50,000.00	

*include detail information for other categories

Budget Documents

- Organizational Budget
 - Not always required, but many funders request
 - Include all revenue and expenses for agency (administrative, program, and fundraising)
 - Include all government revenue and expenses
 - Budget should be based on one full agency year and align to your agency program budget year

Budget Narrative

Budget Narrative

- Narrative should be based on program budget
- Story-telling; align budget narrative to overall program narrative/ grant application
- Include ask amount in budget narrative
- Disclose what funder will be supporting if agency were awarded
- Include details that may not fit within the program budget
- Ensure character or word counts are not exceeded

Additional Financial Questions

- Total program budget amount: amount should match the program budget developed
- Timeline of proposed project: should match what is listed in your program budget
- Sources and percentages of funding that agency receives?
 - 65% government
 - 15% corporate grants
 - 10% individual donations
 - 10% in-kind donations
- What other funders are supporting this program?
- How will program will sustain if not fully awarded?

Questions?