



UNITED WAY
Johnson &
Washington Counties



**North
Liberty**

FY28-FY29 Joint Funding Application E-CImpact Technical Training



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Application Timeline and Funding Cycle

Key dates, deadlines, and the timeline of the funding cycle

Application Open: **September 4, 2026**

Application Deadline: **October 19, 2026**



Funding Cycle: Funds awarded through this application will support programs from July 1, 2027, to June 30, 2029, across all participating funding entities.

Application Timeline

September 4,
2026

Application
Released

October 19,
2026

Applications
Due by 5:00
pm

Late Applications

- To ensure fairness to all applicants and to accommodate the needs of all involved funders, late applications cannot be accepted through this system.
- For extension inquiries with specific funders, please contact the funder directly. Note that extensions are not guaranteed, and deadlines are generally upheld.



UNITED WAY
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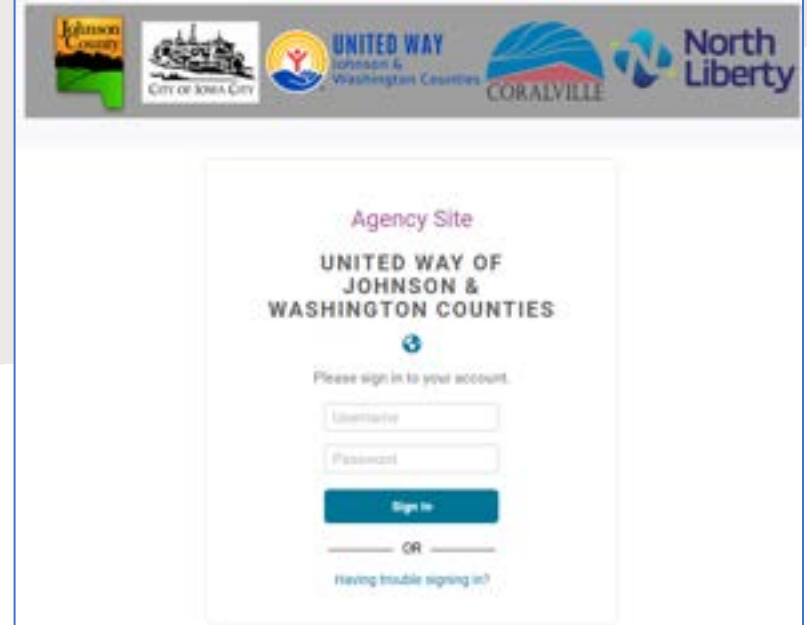


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E-CImpact Basics

Introduction to the platform and how to access the application.

Accessing the Joint Funding Application via e-CImpact



To access the e-CImpact platform for the Joint Funding Application, visit:

<https://agency.e-cimpact.com/login.aspx?org=17300U>

- You must use this link, and not the link from a general e-CImpact google search to access the correct site associated with the United Way of Johnson and Washington Counties.
- Though the admin for this site is UWJWC, this is the correct link to access the application for all funders involved in the joint application.

Logging in

To log in, go to: <https://agency.e-cimpact.com/login.aspx?org=17300U>

If you already have an agency account, enter your username and password to login.

If you do not remember your password, click the “Having trouble signing in?” link to reset.

If you do not have an agency account, use the “New to e-Cimpact?” box to create an agency account.

If you need assistance with logging in or creating an account, please contact Wendy Nolan 319-338-7823 or wendy.nolan@unitedwayjwc.org.

The screenshot shows the login interface for the United Way of Johnson & Washington Counties. At the top, there is a banner with logos for Johnson County, City of Iowa City, United Way Johnson & Washington Counties, Coralville, and North Liberty. The main content area is divided into two sections. The top section, titled 'Agency Site' and 'UNITED WAY OF JOHNSON & WASHINGTON COUNTIES', contains a sign-in form. It asks the user to 'Please sign in to your account.' and provides fields for 'Username' and 'Password'. Below these fields is a 'Sign in' button. Underneath the button is an 'OR' separator and a link that says 'Having trouble signing in?'. The bottom section, titled 'New to e-Cimpact?', contains a link that says 'Create an e-Cimpact account'. Below this link, it says 'To create a new agency account select the link below:' and provides a button that says 'Click here to create a new e-Cimpact agency account'. Three blue arrows point from the instructional text on the left to the corresponding elements on the login page: the first arrow points to the 'Sign in' button, the second arrow points to the 'Having trouble signing in?' link, and the third arrow points to the 'Create an e-Cimpact account' link.

Additional Help Text Available

- For more information on certain questions, look for items marked with a blue and white question mark.
- Simply hover over the question mark to view additional details.

The screenshot shows a portion of a form with several input fields. On the left, there is a list of categories, each preceded by a blue circle containing a white question mark. The categories are: 'Grants - Federal, State, Foundation*', 'Fees for Services*', 'Fun', and 'Annual Endowment Draw'. The 'Fees for Services*' category is circled in green. A blue arrow points from the title 'Additional Help Text Available' to the question mark icon of 'Fees for Services*'. A yellow tooltip box is open, displaying the title 'Fees for Services' with a lightbulb icon, followed by the text: 'This represents revenue earned from providing services for which fees are charged. It includes Income from service contracts, program fees, client charges, and any other payments received for specific services rendered by the organization.'

?	Grants - Federal, State, Foundation*			
?	Fees for Services*			
?	Fun			
?	Annual Endowment Draw			

Fees for Services

This represents revenue earned from providing services for which fees are charged. It includes Income from service contracts, program fees, client charges, and any other payments received for specific services rendered by the organization.

Character Limits

- Each section has a character limit identified.
- As you enter information, you can view how many characters you have used, and how many are remaining.

Hello, Big Outcomes [My User Profile](#) [Change Password](#)

Grant Narratives - Funder Requests

Please complete the narratives below for each funder from whom you are requesting funding. Enter 'N/A' in the corresponding field.

You can find eligibility details and contact information for each funding entity by hovering over the funder name.

1. United Way JWC Funding Narrative: Tell us about your services to Johnson and/or Washington County residents. If your agency serves a larger regional area, please provide the percent of overall clients that are Johnson and Washington County clients.

Limit up to 3000 characters (0 used).

2. Johnson County Funding Narrative: Johnson County prioritizes funding for organizations that address the needs and outcomes for Johnson County residents. Tell us about your services that address any or all of these needs. If your agency serves a larger regional area, please provide the percent of overall clients that are Johnson County residents.

Limit up to 3000 characters (0 used).

3. City of Iowa City Funding Narrative: Tell us about how your services to Iowa City residents address the needs and outcomes for Iowa City residents. Tell us about your shelter services, food insecurity, healthcare (including behavioral health), childcare and youth services.

Limit up to 3000 characters (0 used).

4. City of Coralville Funding Narrative: How do your services specifically address needs and outcomes for Coralville residents? If your request is program specific, please provide details.

Limit up to 3000 characters (0 used).

Navigating Between Application Forms

- You will navigate to the forms in the application from your FY28-FY29 homepage by accessing the link for each form.

Application Status

[View Printable Version of this Entire Application](#)

① Not Started ——— ② In Progress ——— ③ Ready To Submit ——— ④ Submitted

Item (* indicates Required Item)	Last Updated	Status	Options
★ 28 Test		Not Started	Print
FY28-FY29 Joint Funding Application*	←	● Not Started	
FY28-FY29 Funding Requests*	←	● Not Started	
FY28-FY29 Agency Demographics*	←	● Not Started	
FY28-FY29 Agency Budget*	←	● Not Started	
FY28-FY29 Agency Salaries & Benefits*	←	● Not Started	
FY28-FY29 Performance Measures*	←	● Not Started	
Supporting Documents	←	● Not Started	

- If you are working in a specific form, you will use the “Switch Forms” button on the top right portion of the form screen to access a different form.

FY28-29 - Joint Application

28 Test

Status: ● Not Started

FY28-FY29 Agency Demographics

[Switch Forms](#)

Saving Your Work

- The system will save your work each time you complete a field when you move to the next field.
- If you are working on a longer narrative question and step away from the application, with the curser still in the narrative question field, the system could time out and your work would not be saved.
- Use the “Save” icons on the bottom of each report.
- Use the “View Printable Version” tab at any time to create a PDF of a report for reviewing, printing or saving.

Save My Work



Save My Work and Mark as Completed

View Printable Version

[Return To Overview Page](#)



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Established Agency Accounts

Established Agency Accounts

If your agency already has an account with e-CImpact, follow these instructions to log in and access the application

1. Log in using your username and password

2. Locate “FY28-FY29 Joint Funding Application” on the left-hand navigation panel.

3. If you have any problems locating the application, please reach out to Wendy Nolan for assistance at 319-338-7823 or: wendy.nolan@unitedwayjwc.org

Agency Site

UNITED WAY OF
JOHNSON &
WASHINGTON COUNTIES

Please sign in to your account.

Username

Password

Sign In

OR

[Having trouble signing in?](#)

 **Event Schedule**

[Site Visit Archive \(2\)](#)

 **FY28-FY29 Joint Funding Application**

Log in for Established Agency Accounts

1. Log in using your username and password

- If you have forgotten your password, click the “Having trouble signing in?” link to reset it.
- If you are a new user at an existing agency, please ask your agency admin to add you as a user or contact United Way for assistance if needed.

Agency Site

**UNITED WAY OF
JOHNSON &
WASHINGTON COUNTIES**



Please sign in to your account.

Sign In

OR

[Having trouble signing in?](#)

Locate the Application

2. Locate “FY28-FY29 Joint Funding Application” on the left-hand navigation panel.

- From here, you can also view all applications and reports previously associated with your account
- Click on the Joint Funding Application link listed under FY28-FY29

 **Event Schedule**

[Site Visit Archive \(2\)](#)

 **FY28-FY29 Joint Funding Application**

[FY28-FY29 Joint Funding Application](#)

Accessing the Application

You will be directed to a page to review information and timelines for the FY28-FY29 application cycle.

Click “Continue” at the bottom of the page to complete a Joint Application Qualifying question.

Community Impact Funding

FY28-29



Joint Application

The FY28-FY29 Joint Funding Application is a cooperative application for organizations providing services to request funding from **United Way of Johnson & Washington Counties, Johnson County, City of Iowa City, City of Coralville, and City of North Liberty.**

Organizations will be able to request funding and provide supporting information for each of the local funders through one application.

[Continue](#)

Accessing the Application

Complete the Qualifying Question with “Yes” or “No”. Only an answer of “Yes” will allow you to proceed with the application process.

Click “Next” to proceed to the application.

FY28-FY29 Joint Application Qualification

Is your group a nonprofit organization that serves Johnson or Washington Counties?

Yes

Previous

Next

Review and complete the application registration by clicking on “Complete Registration”.

FY28-FY29 Joint Application Qualification

Is your group a nonprofit organization that serves Johnson or Washington Counties?

Yes

Previous

Complete Registration

Accessing the Application

A confirmation page will be displayed and you will click “Continue” on the bottom of the page to access the application.

Successfully Submitted On: 9/20/2026 3:16:55 PM

Status: Approved

Confirmation Number: 578010

FY28-FY29 Joint Application Qualification

Is your group a nonprofit organization that serves Johnson or Washington Counties?

Yes

Continue



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Agency Registration

New Agency Accounts

For agencies that have not previously applied for funding through the Joint Funding Application in e-CImpact.

1. If your agency has not previously applied for funding through the Joint Application in e-CImpact, register a new account by clicking on the “Create a new e-CImpact account” link.
2. Follow the prompts to enter your agency’s information, including the Name, EIN, Mission, Description of Community Need, and relevant contact details.
3. Create a username and password, then click “Next” to proceed
4. Select the FY28-FY29 Joint Funding Application.
5. Answer the qualifying questions and click “Continue” to proceed.
6. Review your information and click ‘Complete Registration’ to proceed to the application.

New to e-CImpact?

Create an e-CImpact account

To create a new agency account select the link below:



[Click here to create a new e-CImpact agency account](#)

Create a New Agency Account

1. If your agency has not previously applied for funding through the Joint Funding Application in e-CImpact, register a new account by clicking on the “Create a new e-CImpact account” link. – then click “Next”



UNITED WAY OF JOHNSON & WASHINGTON COUNTIES

Thank you for your interest in applying.

In order to complete an application, you must register your agency. Click the "next" button to continue.

If your agency has applied before, there is already a profile in the online system and you will not be allowed to make a duplicate profile.

If you have any questions during the process or need to know your agency profile login information, please contact:

Wendy Nolan at wendy.nolan@unitedwayjwc.org or 319-338-7823.

Next

[Cancel and Return to Login Page](#)

Enter Agency Information

2. Follow the prompts to enter your agency's information, including the Name, EIN, Mission, Description of Community Need, and relevant contact details.

UNITED WAY OF JOHNSON & WASHINGTON COUNTIES

United Way of Johnson & Washington Counties Agency Registration

 Fields marked with an * are required fields.

All required information for the Agency Profile must be provided in order to be approved.

Agency Account Information

EIN:*

12-1234567

Agency Name:*

UW/WC Test

Website URL: *

www.unitedwayjwc.org

Account Information

Description:

Connector, Collaborator, Partner, Funder

Limit up to 4000 characters (40 used).

Create your account Username

3. Create a username and password, then click next to proceed

Preferred Login

Preferred Username:*

Password:*



Confirm Password:*



- ✓ Password must be at least 8 characters long.
- ✓ Must not contain " % or blank spaces.
- ✓ Must meet at least 3 of the 4 following requirements:
 - ✓ At least 1 capital letter
 - ✓ At least 1 lowercase letter
 - ✓ At least 1 number
 - ✓ At least 1 symbol: allowed symbols are !@#\$%^&*()
- ✓ Password and Confirm Password must match.

[Previous](#)[Next](#)

[Cancel and Return to Login Page](#)

Select the Application

4. Select the FY28-FY29 Joint Funding Application and click “Next”.

Community Impact Funding

FY28-29



Joint Application

The FY28-FY29 Joint Funding Application is a cooperative application for organizations providing services to request funding from **United Way of Johnson & Washington Counties, Johnson County, City of Iowa City, City of Coralville, and City of North Liberty.**

Organizations will be able to request funding and provide supporting information for each of the local funders through one application.

There will be an eCIMPACT system training webinar offered. The training meeting will be recorded and slides posted so those unable to attend will have access to the information if interested.

FY28-FY29 Joint Application - eCimpact Software Technical Training

Date: Wednesday, September 23rd

Time: 1:30pm – 2:30pm

Microsoft Teams Meeting

Join: <https://teams.microsoft.com/meet/27973310707811?p=TfxHPdcjlCGGGdNqp6>

Meeting ID: 279 733 107 078 11

Passcode: IV6v8a8x

To successfully submit your application, all forms must be marked as complete.

Previous

Next

[Cancel and Return to Login Page](#)

Qualifying Agencies

5. Answer the qualifying question and click “Next” to proceed.

FY28-FY29 Joint Application Qualification

Is your group a nonprofit organization that serves Johnson or Washington Counties?

Yes



Previous

Next

Complete Registration

6. Review your agency information and click “Complete Registration” to proceed to the application.



Review and submit your request. Review the information below, then click 'Complete Registration'

Review the information below and click "Submit".

EIN: 987654321

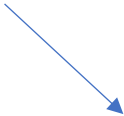
Agency Name: 28 Test

Website: www.28test.com

Additional Agency Account Information Summary

Is your group a nonprofit organization that serves Johnson or Washington Counties?

Yes



Complete Registration

[Cancel and Return to Login Page](#)



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Agency Profile

Agency Profile

Additional fields have been added, allowing agencies to enter information in the profile once, without needing to re-enter it for each application cycle.

⚙️ 28 Test

Home

Agency Profile

Description of Community Need

Contacts

Statements

Program Profiles

Agency Profile

Fields marked with an * are required fields.

Agency Name*

ERI
Format: 99-9999999-9999999

Staff Liaison:

Primary Contact:

Website:

Facebook Profile:

Description of Community Need*

Entering the Description of Community Need in your agency profile is required. While it will also be a required part of the application, the system will not auto fill this information at this time. Once your profile is updated, you can copy and paste the Description of Community Need into the application.

Description of Community Need: What specific need in the community is your agency addressing? Describe the extent of the need, including current local data with source information and the major factors in the

Statements

Type	Statements
Mission Statement	
Agency Statement	Testing
Add New	

Agency Profile – Mission Statement

Agency Mission Statement and Description of Community Need



Your Agency's Mission Statement will automatically populate from your Agency Profile. The information may be left as is or updated below. The Description of Community Need is also available in your agency profile, but it will not auto-fill. You may copy and paste it from your profile.

Agency Mission Statement

Limit up to 2000 characters (0 used).

- Before starting your application, please update your Agency Mission Statement on your homepage if you haven't already done so.
- This will ensure the Mission Statement auto-populates in your application.

Agency Profile – Description of Community Need

Community Need:

What specific need in the community is your agency addressing?

Describe the extent of the need, including current local data with source information and the major factors in the community contributing to the need.

Limit up to 3500 characters (0 used).

- Before starting your application, please update your “Description of Community Need” on your homepage if you have not already done so.
- The “Description of Community Need” will not auto-populate from the agency profile but can be copied and pasted into the application.



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Starting Your Application

Application Homepage

General Instructions & Important Deadlines

To successfully submit your application, all forms must be marked as complete.

- Some forms require entries in each field. For narrative questions that do not apply, enter "NA" in the text field. For numerical fields that do not apply, enter "0."
- All supporting documents sections must also be completed. The Board of Directors List and Agency Audit/Financial Review are required. Additional supporting documents are not mandatory.
- If you do not have additional supporting documents, you must still click into this section and mark it as complete. Otherwise, your application will be considered incomplete, and you will not be able to submit it.

Complete submission of all application materials and supporting documents is due by 5:00 pm on Monday, October 19, 2026

Late Applications

To ensure fairness to all applicants and to accommodate the needs of all involved funders, late applications cannot be accepted through this system.

For extension inquiries with specific funders, please contact the funder directly. Note that extensions are not guaranteed, and deadlines are generally upheld.

Thank you for your understanding.

Application Homepage

Funding Eligibility

Who Can Apply for Funding?

United Way of Johnson and Washington Counties Funding:

- United Way of Johnson & Washington Counties Funded Partner Agencies may apply.
- If you have questions on your status as a United Way Funded Partner Agency, please contact Wendy Nolan at wendy.nolan@unitedwayjwc.org.

Johnson County Funding:

- Established non-profit social service organizations providing services within Johnson County to area residents are eligible to apply.
- Eligible organizations must have a non-discrimination clause. Eligible organizations must not discriminate against or deny services to any individual based on their race, creed, color, national origin, religion, age, sex, marital status, sexual orientation, gender identity, disability or handicap status.
- Johnson County will not provide funding to wrap insurance and/or Medicaid shortfall.
- Detailed information on grant purpose, mission, eligibility and requirements can be found at <https://www.johnsoncountyiowa.gov/bids-and-proposals>.
- For questions, contact Lynette Jacoby, Social Services Director at 319-356-6090 or ljacoby@johnsoncountyiowa.gov.

City of Iowa City Funding:

- Applicants must review the full program details in the FY28-29 Applicant Guide at www.icgov.org/grants for eligibility information.
- Contact Sam Turnbull with any questions at 319.356.5237 or at sturnbull@iowa-city.org.

City of Coralville Funding:

- Any organization serving Coralville may apply.
- Please contact the city of Coralville with any questions.

City of North Liberty Funding:

- Any organization serving North Liberty residents.
- Please contact Tracey Mulcahey for questions: tmulcahey@northlibertyiowa.org.

Application Homepage

Required Forms

- The FY28-FY29 Joint Funding Application homepage provides access to all the required forms.
- Click the form link for each required form.
- Start with the FY28-FY29 Joint Funding Application Link

Application Status

[View Printable Version of this Entire Application](#)

① Not Started ——— ② In Progress ——— ③ Ready To Submit ——— ④ Submitted

Item (* indicates Required Item)	Last Updated	Status	Options
★ 28 Test		Not Started	Print
FY28-FY29 Joint Funding Application*		● Not Started	
FY28-FY29 Funding Requests*		● Not Started	
FY28-FY29 Agency Demographics*		● Not Started	
FY28-FY29 Agency Budget*		● Not Started	
FY28-FY29 Agency Salaries & Benefits*		● Not Started	
FY28-FY29 Performance Measures*		● Not Started	
Supporting Documents		● Not Started	



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FY28-FY29 Joint Funding Application

FY28-FY29 Joint Application Funding Application

General Information

- Enter General Information for your organization →
- Your Agency Mission Statement will auto populate from your Agency Profile. ↓

FY28-FY29 Joint Funding Application

 Fields marked with an * are required fields.

General Information

Agency Name 28 Test

Executive Director* Sue Sample

Board President Name*

Requestor Name*

Limit up to 100 characters

Agency Mission Statement and Description of Community Need

 Your Agency's Mission Statement will automatically populate from your Agency Profile. The information may be left blank.

The Description of Community Need is also available in your agency profile, but it will not auto-fill. You may copy and paste text from your profile into this field.

Agency Mission Statement

Limit up to 2000 characters (0 used).

Community Need:

What specific need in the community is your agency addressing?

Describe the extent of the need, including current local data with source information and the major factors in the

FY28-FY29 Joint Application Funding Application Priority Areas

United Way, City of Iowa City, and Johnson County all have funding priority areas.

United Way JWC Impact Areas

 Please select the United Way JWC Impact Areas
Hover over each option to see a description and

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

Johnson County Priority Areas

 Please indicate the Johnson County Priority A

- Basic Human Needs ☐
- Child and Family Wellbeing ☐
- Health/Mental Health ☐

City of Iowa City - City Steps Public Service Priority Areas

 **Applicants may only select One priority area.** If you are applying for City of Iowa City funding, please indicate the City Public Service Priority that your agency services support. If more than one public service priority applies, please select your agency's services.

Please Select One City of Iowa City - City Steps 2030 Public Service Priority Area

 I have read and understand the City of Iowa City's FY28-29 Aid to Agencies Applicant Guide available at www.icgov.org/grants. I acknowledge that it is my responsibility to ensure my application complies with all program requirements, eligibility criteria,

FY28-FY29 Joint Application Funding Application

Grant Narratives – Funder Specific Questions

- Questions 1-5 must be answered for each funder you are requesting funding from.
- Provide a narrative response for every applicable funder.
- For funders you are not requesting funding from, enter “NA” in the corresponding field.
- Note: All fields must be completed to submit the form.
- Questions are worded to focus on general operational funding.

Grant Narratives - Funder Requests

Please complete the narratives below for each funder from whom you are requesting funding. If you listed funders, please enter 'N/A' in the corresponding field.

You can find eligibility details and contact information for each funding entity by hovering over the q

1. United Way JWC Funding Narrative: Tell us about your services to Johnson and/or Washington County residents represented in your operation. If your agency serves a larger regional area, please provide the percentage of Washington County residents. If your request is program specific, please provide the percentage of that program.

Limit up to 3000 characters (0 used).

2. Johnson County Funding Narrative: Johnson County prioritizes funding for organizations addressing the wellbeing and/or health outcomes for Johnson County residents. Tell us about your services that your agency serves a larger regional area, please provide the percent of overall clients that are Johnson County residents.

Limit up to 3000 characters (0 used).

3. City of Iowa City Funding Narrative: Tell us about how your services to Iowa City residents address homelessness and shelter services, food insecurity, healthcare (including behavioral health), child transportation.

FY28-FY29 Joint Application Funding Application

Grant Narratives – Additional Agency Information

- Questions 6-10 focus on additional information relevant to the funder review process.
- Question 10: Match Funding – This question has been worded to ensure operational funding is not restricted for match purposes if other funding becomes available. Agencies are asked to describe how match funding has been used in the past. This approach informs funders of match requirements without imposing restrictions on agencies.

Grant Narratives - Additional Agency Information



All agencies applying for funding from any of the listed entities must complete the following explanation.

6. Provide a succinct, specific description of your primary target populations(s). Describe the success do they face?*

Limit up to 2000 characters (0 used).

7. Please explain how your agency promotes racial equity and inclusivity for historically marginalized populations (e.g., immigrants/refugees, individuals with disabilities) through your services, for your clients?*

10. Describe how local funding received by your organization helped leverage other revenue in the last fiscal year. Identify and include specific grant/funding sources and amounts that were awarded that require a match.*

Limit up to 2000 characters (0 used).



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Application Forms

- FY28-FY29 Funding Requests
- FY28-FY29 Agency Demographics
- FY28-FY29 Agency Budget
- FY28-FY29 Agency Salaries & Benefits
- FY28-FY29 Performance Measures



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FY28-FY29 Funding Requests

★ 28 Test

9/20/2026 4:38 PM (CST)

In Progress

Print

FY28-FY29 Joint Funding Application*

Sue Sample

● In Progress

9/20/2026 4:38 PM (CST)

FY28-FY29 Funding Requests*

● Not Started

FY28-FY29 Agency Demographics*

● Not Started

FY28-FY29 Agency Budget*

● Not Started

FY28-FY29 Agency Salaries & Benefits*

● Not Started

FY28-FY29 Performance Measures*

● Not Started

Supporting Documents

● Not Started

FY28-F29 Funding Requests

Agency Budget

Agency Budget



Please enter your estimated total agency budget for the fiscal years FY28 and FY29. This should reflect the overall projected budget for your agency during this granting cycle.

Agency Budget

FY28

FY29

Agency Budget

- Please provide your estimated budgets for FY28 and FY29 in this section.
- This information will automatically calculate the percentage of your total budget based on your funding requests in the next section.

FY28-F29 Funding Requests

Funding Requests

Funding Requests

Please enter your FY28 funding request for each funding entity. The amount will automatically populate the FY29 column, as all funders in this application roll over the annual request to duplicate in the following year. The percentage of the total budget will auto-populate for each fiscal year and funder. You can find funding eligibility details and contact information for each funding entity by hovering over the funder name below.

	FY28 Funding Request	FY28 % of Total Budget	FY29 Funding Request	FY29 % of Total Budget
United Way JWC	10,000.00	10.00	10,000.00	6.67
Johnson County	10,000.00	10.00	10,000.00	6.67
City of Iowa City	10,000.00	10.00	10,000.00	6.67
City of Coralville	10,000.00	10.00	10,000.00	6.67
City of North Liberty	10,000.00	10.00	10,000.00	6.67

- Please provide your FY28 Funding Request for each entity. This will auto-populate your FY29 Funding Request for each row.
- This information will automatically calculate the percentage of your total budget based on your agency budgets in the previous section.



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FY28-FY29 Agency Demographics

★ 28 Test	9/20/2026 4:38 PM (CST)	In Progress	Print
FY28-FY29 Joint Funding Application*	Sue Sample 9/20/2026 4:38 PM (CST)	● In Progress	
FY28-FY29 Funding Requests*		● Not Started	
FY28-FY29 Agency Demographics*		● Not Started	
FY28-FY29 Agency Budget*		● Not Started	
FY28-FY29 Agency Salaries & Benefits*		● Not Started	
FY28-FY29 Performance Measures*		● Not Started	
Supporting Documents		● Not Started	

FY28-FY29 Agency Demographics

Demographic Categories

Gender

Please provide the unique number of individuals served who self-identified within each of the gender categories listed below. If your organization does not collect gender information, please report the total number of individuals served in the "Unknown Gender" category using the Agency Demographics Unknown attachment.

	Unduplicated FY26	Unduplicated Projected FY27
Male*		
Female*		
Non-binary*		
Unknown Gender*		
Total		

Please provide the unique number of individuals served who **self-identified** within each of the categories listed.

Unknown Category

If any individuals did not self-identify within one of the categories, please record that number in the 'Unknown' section.

If your organization does not demographic information in any of the demographic categories, please report the total number of individuals served in the "Unknown" category and provide an explanation and context using the Agency Demographic Unknown attachment.

FY28-FY29 Agency Demographics

Historical and Current Data

- Please provide one year of historical data and the projected number of individuals you expect to serve in the current fiscal year.
- This should be self-identified information.
- If you do not collect data in any of the categories, enter '0'.

Ethnicity

Please provide the unique number of individuals served who self-identified within each of the ethnicity categories listed below. If your organization does not collect ethnicity information, please report the total number of individuals served in the "Unknown Ethnicity" category using the Agency Demographics Unknown attachment.

	Unduplicated FY26	Unduplicated Projected FY27
Hispanic, Latino, or Spanish Origin*		
Not of Hispanic, Latino, or Spanish Origin*		
Unknown Ethnicity*		
Total		

Age

Please provide the unique number of individuals served who self-identified within each of the age categories listed below. If your organization does not collect age information, please report the total number of individuals served in the "Unknown" category using the Agency Demographics Unknown attachment.

	Unduplicated FY26	Unduplicated Projected FY27
0-5 Years*		
6-17 Years*		
18-29 Years*		
30-61 Years*		
62-74 Years*		

FY28-FY29 Agency Demographics

Unduplicated Data

- Please include only unduplicated numbers.
- Example: if a client accesses your services 5 times throughout the year, this counts as 1 unduplicated client.
- Example: Clients included in your Iowa City totals should not also be included in your Johnson County total

Geographic Location

Please provide the unique number of individuals served who self-identified within each of the geographic locations listed below.

If your organization does not collect geographic information, please report the total number of individuals served in the "Unknown" category by using the Agency Demographics Unknown attachment.

NOTE: For Johnson County data, please exclude individuals from the following municipalities: Iowa City, Coralville, and North Liberty. Individuals from other Johnson County Municipalities and rural areas.

For Washington County, you may provide data at the whole county level.

	Unduplicated FY26	Unduplicated Projected FY27
How many Iowa City residents did your agency serve?*		
How many Coralville residents did your agency serve?*		
How many North Liberty residents did your agency serve?*		
How many Johnson County residents (excluding Iowa City, Coralville, and North Liberty) did your agency serve?*		
How many Washington County Residents did your agency serve?*		
Unknown*		
Other*		

FY28-FY29 Agency Budget

★ 28 Test		9/20/2026 4:38 PM (CST)	In Progress	Print
FY28-FY29 Joint Funding Application*	Sue Sample	9/20/2026 4:38 PM (CST)	 In Progress	
FY28-FY29 Funding Requests*			 Not Started	
FY28-FY29 Agency Demographics*			 Not Started	
FY28-FY29 Agency Budget*			 Not Started	
FY28-FY29 Agency Salaries & Benefits*			 Not Started	
FY28-FY29 Performance Measures*			 Not Started	
Supporting Documents			 Not Started	

FY28-FY29 Agency Budget

Auto-Calculations

Operational Budget

Actual FY25

Actual FY26

Projected FY27

- ? Total Revenue
- ? Total Expenses
- ? Restricted Funds
- ? Surplus/Deficit

- Some fields will auto-calculate. If there is not a box for you to enter information, this is an auto-calculated field.
- Once data is entered into the corresponding boxes, your calculated date will appear.
- To activate calculated fields, you may need to save your entries.

FY28-FY29 Agency Budget

Help Text for Budget Line Items

Foundation*			
? Fees for Services*			
?  Fees for Services	This represents revenue earned from providing services for which fees are charged. It includes income from service contracts, program fees, client charges, and any other payments received for specific services rendered by the organization.		
Func			
? ? ?			
? Annual Endowment Draw			
? Reserve or Carryover Funds			

When you see a blue circle containing a question mark, there is additional clarifying information that can be accessed. Hover your mouse over the icon to review the additional information.



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FY28-FY29 Agency Salaries & Benefits

FY28-FY29 Agency Salaries & Benefits

★ 28 Test	9/20/2026 4:38 PM (CST)	In Progress	Print
FY28-FY29 Joint Funding Application*	Sue Sample 9/20/2026 4:38 PM (CST)	● In Progress	
FY28-FY29 Funding Requests*		● Not Started	
FY28-FY29 Agency Demographics*		● Not Started	
FY28-FY29 Agency Budget*		● Not Started	
FY28-FY29 Agency Salaries & Benefits*		● Not Started	
FY28-FY29 Performance Measures*		● Not Started	
Supporting Documents		● Not Started	

FY28-FY29 Agency Salaries & Benefits

Employees

Position	Average Salary	Paid Leave (Enter 1 if offered)	Health Insurance (Enter 1 if offered)	Retirement Plan (Enter 1 if offered)	FY26 FTE	FY 27 FTE	FY 28 FTE
Executive Director / President / CEO							
Director of Operations /COO							
Director of Development							
Business Manager/CFO							
Program Director / Manager							
Program/Services Coordinator							
Direct Services Worker							
Administrative/Clerical staff							
Other	0	0	0	0	0	0	0

- Enter information for employees in your organization. A list of positions is in the left-hand column.
- Enter the **average salary** for all staff in a position. If only one staff member holds the position, enter that individual's salary.
- Identify benefits for the positions by entering a "1" in the paid leave, health insurance or retirement columns, if they are offered for that position.

FY28-FY29 Agency Salaries & Benefits

Other Positions

 Community Impact Funding

FY28-29 - Joint Application

28 Test

Form: FY28-FY29 Agency Salaries & Benefits



Section: Employees

Position	Average Salary	Paid Leave (Enter 1 if offered)	Health Insurance (Enter 1 if offered)	Retirement Plan (Enter 1 if offered)	FY26 FTE	FY 27 FTE	FY 28 FTE
Other	0	0	0	0	0	0	0
							

Add New Item

- If the available options do not match a position at your organization, you may create a new position.
- Click 'Other' to add your specific position information.



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FY28-FY29 Performance Measures

FY28-FY29 Performance Measures

★ 28 Test	9/20/2026 4:38 PM (CST)	In Progress	Print
FY28-FY29 Joint Funding Application*	Sue Sample 9/20/2026 4:38 PM (CST)	● In Progress	
FY28-FY29 Funding Requests*		● Not Started	
FY28-FY29 Agency Demographics*		● Not Started	
FY28-FY29 Agency Budget*		● Not Started	
FY28-FY29 Agency Salaries & Benefits*		● Not Started	
FY28-FY29 Performance Measures*		● Not Started	
Supporting Documents		● Not Started	

FY28-FY29 Performance Measures

- A comprehensive listing of performance measures and outcomes are available for agencies to review, select, and complete.
- Agencies should select and complete measures and outcomes related to funding requests and that represent core services.
- Measure and Outcomes will be reported after 6 months of each funding fiscal year and at the end of each funding fiscal year.
- Measures and Outcomes are categorized by type of service.
- Blue circles with a question mark contain additional information and clarification for an item. Hover your mouse over the icon to review the information.
- Individual measures should be counted as unduplicated people. Services count total instances or amounts of support.
- Additional information and explanation is contained within the system form instructions and Blue Circle icons.

FY28-FY29 Performance Measures

Services to people experiencing homelessness or at risk of homelessness



Do not count the same service under multiple homelessness and housing outcomes. Instead, identify the outcome that most closely matches the service.

	Projected FY28	Projected FY29
# of unique individuals receiving shelter		
1 # of nights of shelter provided		
# of unique individuals exiting to stable housing		
3 # of housing stability services provided		

Affordable Housing Units

	Projected FY28	Projected FY29
3 # of unique individuals receiving stable housing		
1 # of additional affordable housing units built, purchased.		
# of affordable housing units rehabbed or improved		
1 # of affordable housing units still in existence		

FY28-FY29 Performance Measures

Healthcare Services

	Projected FY28	Projected FY29
# of unique adults (18 & over) receiving healthcare services		
# of healthcare services provided to adults (18 & over)		
# of unique children (under 18) receiving healthcare services		
# of healthcare services provided to children (under 18)		
# of unique adults (18 & over) receiving oral health care		
# of oral health care services provided to adults (18 & over)		
# of unique children (under 18) receiving oral healthcare		
# of oral healthcare services provided to children (under 18)		

FY28-FY29 Performance Measures

Services for Victims of Domestic Violence

	Projected FY28	Projected FY29
# of unique individuals receiving domestic and family violence support services		
# of domestic and family violence support services/sessions provided		

Services for Immigrant and Refugee Community Members

	Projected FY28	Projected FY29
# of unique immigrant and refugee community members served		
# of support services/sessions provided to immigrant and refugee community members		

Financial Literacy and Credit Repair

	Projected FY28	Projected FY29
# of unique individuals involved in financial literacy education		
# of financial literacy education services/sessions provided		
# of unique individuals receiving credit repair services		
# of credit repair services/sessions provided		



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Supporting Documents

Supporting Documents Required and Optional Documents

Description	File
Board of Directors List* Please upload your current Board of Director's list	Browse For File... Accepted file types: pdf, doc, docx, rtf, xls, xlsx, csv, txt, gif, jpg, jpeg, tif, bmp, png, eps, ppt, pptx
Audit/Financial Review Report* Please upload the most recent Audit or Financial Review for the organization. • Less than \$250,000 – year end financial statement prepared in-house and signed by the agency director and board president. • \$250,001 - \$1,000,000 – annual financial review conducted by an independent Certified Public Accountant (CPA). • Over \$1,000,000 – Annual audited financial statements. • For agencies uploading financial reviews or audits include any letters from the auditor to your Board of Directors with audit findings, material weaknesses, or significant deficiencies along with your corrective action plan if there were findings, material weaknesses, or significant deficiencies.	Browse For File... Accepted file types: pdf, doc, docx, rtf, xls, xlsx, csv, txt, gif, jpg, jpeg, tif, bmp, png, eps, ppt, pptx
Agency Demographic Unknown If your agency does not collect information for one or more demographic categories (e.g., gender, race, ethnicity, age, or geographic location) please upload a brief explanation describing why this information is not collected.	Browse For File... Accepted file types: pdf, doc, docx, rtf, xls, xlsx, csv, txt, gif, jpg, jpeg, tif, bmp, png, eps, ppt, pptx
Additional Information	Browse For File... Accepted file types: pdf, doc, docx, rtf, xls, xlsx, csv, txt, gif, jpg, jpeg, tif, bmp, png, eps, ppt, pptx

Attach files by clicking “Browse for File” and uploading from your computer

There are two required supporting documents:

1. Board of Directors List
2. Audit or Financial Review Report



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Submitting Your Application

Submit Application

Once all forms are saved as complete and in a status of “Completed/Ready to Submit”, the status of your application will change to “Completed” and a RED submit button will appear.

Application Status

[View Printable Version of this Entire Application](#)



Not Started



In Progress



Ready To Submit



Submitted

Item (* indicates Required Item)	Last Updated	Status	Options
★ *New Test Agency	9/20/2026 6:48 PM (CST)	Completed / Ready to Submit	Print
FY28-FY29 Joint Funding Application*	Wendy Nolan 9/20/2026 6:47 PM (CST)	● Completed / Ready to Submit	
FY28-FY29 Funding Requests*	Wendy Nolan 9/20/2026 6:47 PM (CST)	● Completed / Ready to Submit	
FY28-FY29 Agency Demographics*	Wendy Nolan 9/20/2026 6:47 PM (CST)	● Completed / Ready to Submit	
FY28-FY29 Agency Budget*	Wendy Nolan 9/20/2026 6:47 PM (CST)	● Completed / Ready to Submit	
FY28-FY29 Agency Salaries & Benefits*	Wendy Nolan 9/20/2026 6:48 PM (CST)	● Completed / Ready to Submit	
FY28-FY29 Performance Measures*	Wendy Nolan 9/20/2026 6:48 PM (CST)	● Completed / Ready to Submit	
Supporting Documents	Wendy Nolan 9/4/2026 2:18 PM (CST)	● Completed / Ready To Submit	

Submit Application

If the Executive Director has reviewed the information, enter their name, make sure the email address for confirmation is correct, check the certification box, and click the RED submit button.



Nice work, your Application is now Ready to Submit! Would you like to [Submit This Application Now?](#)

By entering the name of the Executive Director, you are validating that the information in the application is accurate and the Executive Director has reviewed it. Make sure the confirmation email is correct to receive confirmation of submission.

Please save or print a copy of your FY28-FY29 application for your records.

Application Submission Details

Executive Director*:

Send Submission Confirmation Email To*:

I certify that the information submitted in this application is true and correct to the best of my knowledge*: ☐

Submit This Application Now!

Confirmation

- Once your application is submitted, you will be directed to a confirmation page.
- All colors will turn to green.
- You may view and print your application, but once submitted you will not be able to edit the application.
- Please save a copy of your application for your records.

Thank you for submitting the FY28-FY29 Joint Funding Application. **Your application has been received.**
Please save or print a copy of your FY28-FY29 application for your records.

Application Submission Details

Executive Director: Sue Sample
Submission Confirmation Email Sent To: wendy.nolan@unitedwayjwc.org
I certify that the information submitted in this application is true and correct to the best of my knowledge*
Submitted By: Wendy Nolan on 9/20/2026 at 7:08 PM CST

Application Status [View Printable Version of this Entire Application](#)

Not Started In Progress Ready To Submit Submitted

Item (* indicates Required Item)	Last Updated	Status	Options
★ *New Test Agency	9/20/2026 7:08 PM (CST)	Submitted	Print
FY28-FY29 Joint Funding Application*	Wendy Nolan 9/20/2026 6:47 PM (CST)	Submitted	
FY28-FY29 Funding Requests*	Wendy Nolan 9/20/2026 6:47 PM (CST)	Submitted	
FY28-FY29 Agency Demographics*	Wendy Nolan 9/20/2026 6:47 PM (CST)	Submitted	
FY28-FY29 Agency Budgets*	Wendy Nolan 9/20/2026 6:47 PM (CST)	Submitted	
FY28-FY29 Agency Salaries & Benefits*	Wendy Nolan 9/20/2026 6:48 PM (CST)	Submitted	
FY28-FY29 Performance Measures*	Wendy Nolan	Submitted	

If you need to make changes to a submitted application before the deadline, please contact Wendy Nolan at wendy.nolan@unitedwayjwc.org for assistance.

Funding Questions

Each of the funding entities in the FY28-FY29 Joint Funding Application will review applications through their own timeline and process.

Please contact the appropriate partner for questions regarding funding from that entity.

United Way of Johnson & Washington Counties

Wendy Nolan

wendy.nolan@unitedwayjwc.org

Johnson County

Lynette Jacoby

ljacoby@johnsoncountyiowa.gov

City of Iowa City

Sam Turnbull

sturnbull@iowa-city.org

City of Coralville

Contact the City of Coralville

City of North Liberty

Tracey Mulcahey

tmulcahey@northlibertyiowa.org



Application or Software Questions

For questions regarding the application process on e-CImpact, please reach out to United way of Johnson and Washington Counties.

Wendy Nolan

Director of Volunteer and
Community Engagement

wendy.nolan@unitedwayjwc.org



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Thank you!

On behalf of all the joint funders, we extend our deepest gratitude for the essential and critical work each of you does for our community every day.

Thank you for your continued commitment and partnership.



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