Program Overview

Please provide the following information.

This application portal is to request funding from the City of Winston-Salem as part of the Transformational Non-Profits Application Process. Applications received through this portal will only be reviewed by the City of Winston-Salem. Other jurisdictions may have separate application processes. Please contact other jurisdictions (e.g., Forsyth County) for instructions regarding requests to those jurisdictions.

Submitting an application does not guarantee funding. Please see the section below regarding the scoring process. The Mayor and City Council will have final decision-making authority regarding program funding requests.

Non-profit organizations may submit funding requests for capital or operating costs.

Minimum Criteria

- Must be registered non-profit organization (includes faith-based organizations providing a public purpose)
- Must have been incorporated as a non-profit for at least one year

Scoring Process and Matrix

All completed applications will undergo a review to ensure required documents are attached. Fully completed applications will be reviewed by selected City staff members and scored based on the scoring matrix approved by the Mayor and City Council. Click here to view the scoring matrix. Scored applications will be reviewed by the City’s Management Team for potential recommendation to the Mayor and City Council who will have authority to appropriate funding for programs.

Staff reserves the right to contact any applicant to request clarification or additional details regarding application responses and materials.
Defining Performance Measures

Sections of the application will reference performance measures and outcomes as required by the U.S. Department of Treasury. Specifically, the application will request workload and effectiveness/outcome measures. Please see this video (https://www.cityofws.org/2809/Performance-Measures-Video) for general information on performance measures.

Upcoming Application Orientation Session

The City will host a virtual application orientation session on April 1, 2022 at 10:00 am. The meeting will take place virtually via the Zoom platform and will also have a live simulcast on the City’s YouTube page. The link for that meeting will be posted the morning of the meeting to the website: www.cityofws.org/clfrf

Contact Information

For any questions or concerns, please email ARPA@cityofws.org or call City Link at 336-727-8000.
Please provide the following information.

**ORGANIZATION/AGENCY INFORMATION**

A1. Organization/Agency Name
Whole Man Ministries of NC

A2. Mailing Address
3916 Old Lexington rd Winston-Salem, NC 27105

A3. Organization Website
Wholemanministries.com

A4. Year 501 (c)(3) Status Obtained
2,006

A5. Organization/Agency Fiscal Year
123,122

**EXECUTIVE DIRECTOR**

A9. First Name
Barry

A10. Last Name
Washington

A11. Title
Executive Director

A12. E-mail
barryswashington@yahoo.com

A13. Phone Number
(336) 918-1087

**BOARD CHAIR**

A14. First Name
Dianne

A15. Last Name
Lowery

A16. E-Mail
dre021479@aol.com

A17. Phone Number
(336) 575-4463

A18. Term Expiration Date
07/11/2024
B. General Project Information

Case Id: 15189
Name: Stop The Violence Economic Mobility - 2022
Address: *No Address Assigned

Please provide the following information.

PROJECT INFORMATION

B.1. Project/Program Title
Stop The Violence Economic Mobility

B.2. Project Location/Address
1345 Thurmond st. Winston-Salem, NC 27105

PROJECT CONTACT/MANAGER

B3. First Name
Barry

B4. Last Name
Washington

B5. Title
Executive Director

B6. E-Mail
barryswashington@yahoo.com

B7. Phone Number
(336) 918-1087
C. General Project Narrative

Please provide the following information.

C.1. Provide description of project and how funds will be used
The best way to stop the violence is to interrupt the factors that attribute to it - poverty, unemployment, lack of opportunity for upward economic mobility, unfair judicial system and social division system. Most crimes are committed through lack of finances and opportunities to advance.
Project Uplift would offer life skills to high-risk youths and the opportunity for economic upward mobility. This would be accomplished by partnering participants with a monitor with the skills and offering a stipend. At the end of the 18-month mentoring period the participants will be able to start a small business and with the mentoring to grow it. Project would encourage and work to further skills learning and training to provide for themselves and their family.

They would learn carpentry, construction, landscaping, domestic, electrical, plumbing skills and etc. As the participants identify their area of interest, a counselor would work with them to get further training using our county’s community college resources. Project Uplift is committed to help the participants to become productive community members. The participants, in turn, will become a mentor/employer for 2-3 more youths; thereby increasing the value of the investment made in them. As a result, reducing violence through economic mobility perpetually.

C.2. How will a participant access the proposed project/program, use the services, and derive a beneficial outcome from participation?
Referral from other organizations - Reentry Program, Court system, NC community service, other non-profits, and WSFC school System. Then becoming a mentor and an ambassador to uplift his/her community.

C.3 Total estimated number of unique participants to be served annually
5

C.4. Will program beneficiaries be only residents of Winston-Salem?
Yes

TOTAL FUNDING REQUEST
C.5. Total Operating Funding Request
$74,700.00

C.6. Total Capital Funding Request
$29,700.00

SPENDING TIMEFRAME
C.7 Capital Spending Timeframe
12 months from date of award
C.8 Operating Spending Timeframe
18 months from date of award
D. Project Budget Categories

Please provide the following information.

Use templates below to input the total Project Budget (only requested expenses and estimated revenues related to the program or project for which you are requesting funding) by clicking Add Column. Please include all funding from the City and other sources.

<table>
<thead>
<tr>
<th>Operating Costs</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stipends for 5 for 12 months</td>
<td>$35,000.00</td>
</tr>
<tr>
<td>2 part-time instructors/mentors (12 months)</td>
<td>$36,000.00</td>
</tr>
<tr>
<td>Gas (12 months)</td>
<td>$2,500.00</td>
</tr>
<tr>
<td>Insurance (12 months)</td>
<td>$1,200.00</td>
</tr>
<tr>
<td></td>
<td>$74,700.00</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Capital Costs</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Purchased of Van (one time)</td>
<td>$18,000.00</td>
</tr>
<tr>
<td>Tools (one time)</td>
<td>$4,700.00</td>
</tr>
<tr>
<td>Initial Job materials (one time)</td>
<td>$7,000.00</td>
</tr>
<tr>
<td></td>
<td>$29,700.00</td>
</tr>
</tbody>
</table>

**PROJECT/PROGRAM REVENUE CATEGORIES**

Please fill out the revenue estimate table. **Note: operating revenues and expenses must be balanced (be equal).**

<table>
<thead>
<tr>
<th>Operating</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Projected Jobs revenue</td>
<td>$35,000.00</td>
</tr>
<tr>
<td></td>
<td>$35,000.00</td>
</tr>
</tbody>
</table>

Please list below all known/expected individual grants and contributions totaling 10% or more of the project's budget. **Note: capital revenues and expenditures must be balanced (be equal)**

<table>
<thead>
<tr>
<th>Capital</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$0.00</td>
</tr>
<tr>
<td></td>
<td>$0.00</td>
</tr>
</tbody>
</table>
E. Demographic and Geographic Distribution

Please provide the following information.

Demographic distribution is an assessment of the level of the project funds spent on a program or service provided at a physical location in a Qualified Census Tract (QCT), OR where the primary intended beneficiaries live within a QCT, OR whether the program benefits residents that earn less than 60 percent of median income for the City, OR whether over 25 percent of program beneficiaries are below the federal poverty line.

E.1 Is this project/program located in a QCT or serve residents that live in a QCT?
Yes

If yes, what percentage of clients served are estimated to be residents of QCTs? Click here to view the QCT mapping tool
100.00 %

E.2 If the project or program is not a QCT or specifically serve residents in a QCT, will residents meet the following criteria:

- 25% or more of participants below the federal poverty line or participants served make less than 60% of the Area Median Income
- The project/program does not operate in a QCT, and beneficiaries neither reside in a QCT nor meet the income thresholds mentioned above.
F. Alignment to Strategic Plan

Please provide the following information.

Strategic planning is a process in which organizational leaders determine their goals and objectives, and allocate needed/limited resources to successfully achieve those goals and objectives. Click here to view Winston Salem's Strategic Plan. The Strategic Plan includes three (3) tiers of priorities:

Tier 1:
- Focus on job creation/sustainability and workforce development
- Collaboration and funding for pre-K opportunities
- Funding for affordable housing
- Funding for economic development

Tier 2:
- Poverty reduction/cessation
- COVID reopening plan
- Community engagement (Power of connections)
- Funding for arts

Tier 3:
- Community Fundraising
- Environmental initiatives
- Address digital divide
- Address childcare needs
- Neighborhood maintenance
- Organization efficiency and public-private partnerships
- Law enforcement reform

F.1. Please select the primary priority from the list above addressed by your project/program.
Tier 1

F.2. Please select the secondary priority from the list above addressed by your project/program.
Tier 2
F.3. Please describe how the workload or outcomes from your project/program addresses the primary priority you selected.

The participants will gain lifelong skills that will provide a path out of poverty and crime/violence and a positive lifelong support system. Project Uplift is design on job creation/sustainability and workforce development which is the primary key to poverty reduction/cessation.
G. Collaboration

Please provide the following information.

Collaboration is when an organization is partnering or proactively working with one or more external stakeholders to achieve the same goal.

G.1. How many other external partners, organizations, stakeholders will you be collaborating with to provide the project/program?

3+

G.2. Please provide the names of the organizations and the roles they will serve in the project/program?

Bondage Breakers and Nehemiah Few - would serve as trainers and mentors.
Habitat for Humanity - a place for training and skill enhancement (use their stations)
Business partners - trainers/mentors and possible employer
H. Administration/Reporting

Please provide the following information.

Per U.S. Treasury rules and associated guidance, the City’s framework for using these funds aligns with specific administrative reporting requirements. The administration/reporting criterion has three core elements: 1) the organization’s/project’s development of clear performance indicators and measurable outcomes, 2) the use of evidence-based interventions, 3) and the City's evaluation of organization and project risk.

H.1. Please clearly define the workload and outcome measures that are associated with your project/program

<table>
<thead>
<tr>
<th>Workload</th>
<th>Effectiveness/Outcome</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

H.2. Does the project/program use evidence-based interventions?

No

H.3. For transparency purposes, the risk matrix is attached. This is NOT required, however, you can self-assess if you wish. Please fill out and upload the Risk Matrix.

☐ Risk Matrix

**No files uploaded**
I. Capacity

Completed by barryswashington@yahoo.com on 4/25/2022 4:55 PM

Case Id: 15189
Name: Stop The Violence Economic Mobility - 2022
Address: *No Address Assigned

I. Capacity

Please provide the following information.

An organization's capacity can be defined as its ability to implement the proposed project, as characterized by the alignment of its mission and vision with the proposed project, existing internal infrastructure to support it, and its plan for implementation and assessment of project success.

I.1. Please provide your organization’s vision and mission statements and explain the alignment between the proposed project/program and the organizational mission.
The vision on Whole Man Ministries is to develop the whole man - spiritually, socially and financially. A personal is incomplete with our economic sustainability and upward mobility.

I.2. Describe the organization’s current infrastructure and capacity to deliver the program services or complete the project. Include any relevant current programming and experience providing similar services.
WMM currently provide counseling to at risk people but see an opportunity to help the short and long term and help people give back.

I.3. Describe the program/project implementation plan. Include any known barriers to success and how those will be overcome.
Once the participant is identified, they will be assigned to a trainer/mentor for 18 months.

Barriers will be a lack of funding to jump start the program. As with other programs, it will be self-sustaining and will grow. The value of the initial investment is unimaginable.

I.3a. Describe the program assessment plan including how the data will be collected for selected performance metrics and any other evaluation tools that will be used to determine program/project success.
The success of the program will be determined by the trainer/mentor and the number of participants becoming mentors and small business owners.
J. Impact/Community Need

Please provide the following information.

Impact/Community needs concern whether or not the proposed project will address an identified need within the community and what the short term (One year) and long term (3 years) impact of this project will be.

J1. Describe the identified community need for this project/program. *Cite specific data or studies/reports that have identified this as a community need.*
The first year of Project Uplift will be 5 participants removed from crime or high risk of crime. In the subsequent years (long term the project will help each participant to invest in 2-3 people to give them economic mobility and so on.

J2. Describe the short-term impacts of the project/program and how they align with the community need identified above.
The community need for reduction in crime/violence and economic mobility via job creation. The need for more home maintenance (handyman) type people (from the roof to the foundation and everything in between, and grounds. Project Uplift will fill the need of the elderly and people who lack the skills and time to maintain their homes. It will add to the workforce of skilled laborers.

J3. Describe the long-term impacts of the project/program and how they align with the community need identified above.
The community need for reduction in crime/violence and economic mobility via job creation. The need for more home maintenance (handyman) type people (from the roof to the foundation and everything in between, and grounds. Project Uplift will fill the need of the elderly and people who lack the skills and time to maintain their homes. It will add to the workforce of skilled laborers.

J4. Referencing previous section on outcomes, describe how the impacts noted above will be measured.
The project will be measure by the number of participants that remain a positive productive member of the community.
K. Funding Stability

Please provide the following information.

Funding stability is an assessment of both the organization’s annual funding and the planned funding mechanism for the project program from grants, donations, sales, and other income generators. To the extent possible, the City wishes to ensure applying entities have sustainable funding sources outside the City’s ARPA allocation. An entity will be deemed as having superior funding stability if it demonstrates at least three years of sustainable grant, contribution, and/or fee-based revenues to cover operating costs. The entity must also demonstrate commitments from other organizations to cover the full cost of project deficits or future-year operating costs (in combination with realistic fee-based revenue assumptions).

K.1. Have your organization’s operating revenues covered operating expenses the last three years?

K.2. Approximately what percentage of your organization’s total budget is covered by competitive grants that you must re-apply for?
0.00 %

K.3. What percentage of your project program’s budget is covered by City ARPA funds as part of this request?
0.00 %

K.4. Please provide narrative on funding for this program after City ARPA funding has been exhausted.

K.5. Please attach commitment letters from other organizations showing financial support for the project program.
☐ Commitment Letters

**No files uploaded**
L. Representation

Please provide the following information.

Representation deals with how diverse an organization’s leadership is compared with community demographics, which includes Winston-Salem’s race/ethnic backgrounds as well as gender. Local non-profit organizations should reflect the communities they serve. Since organizations are requesting to receive ARPA funding through the City, we must ensure these entities hold themselves accountable to having diverse staff and leadership panels.

L.1. Provide a list of board members including the race, ethnicity, and gender identification for each member.

<table>
<thead>
<tr>
<th>Name</th>
<th>Race</th>
<th>Ethnicity</th>
<th>Gender Identification</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dianne Lowery</td>
<td>Black</td>
<td>African American</td>
<td>Female</td>
</tr>
<tr>
<td>Kenneth Holly</td>
<td>Black</td>
<td>African American</td>
<td>Male</td>
</tr>
<tr>
<td>Gerald Green</td>
<td>Black</td>
<td>African American</td>
<td>Male</td>
</tr>
<tr>
<td>Camilla Washington</td>
<td>Black</td>
<td>African American</td>
<td>Female</td>
</tr>
<tr>
<td>Lashawnda Hylton</td>
<td>Black</td>
<td>African American</td>
<td>Female</td>
</tr>
</tbody>
</table>
M. Required Documents

Please provide the following information.

For North Carolina Secretary of State - Current and Active Status, Click Here

Documentation

☑ Code of Conduct/Conflict of Interest Policy *Required
Conflict of Intrest Policy WMM.pdf

☑ Copy of the agency’s latest 990 Form as submitted to the Internal Revenue Service *Required
Audit 2015.pdf

☑ Organization By-Laws *Required
Nonprofit Bylaws WMM.pdf

☑ Articles of Incorporation *Required
ArticlesofIncorporation WMM.pdf

☑ Organization Policies (including personnel, formal non-discrimination, procurement, accounting, etc) *Required

☑ IRS 501(c)3 Designation Letter *Required
501 (C) 3 Letter (1).pdf
Most recent audited financial statements or a third-party review *Required
51454_Audit 2015.pdf

North Carolina Secretary of State - Current and Active Status *Required
Secretary of State Good Standing.pdf
Please provide the following information.

✔ I certify that all information entered into this application is true.

Barry Washington

Electronically signed by barryswashington@yahoo.com on 4/25/2022 4:59 PM

04/25/2022