



## ALLOCATIONS

2020 ALLOCATION REPORT  
REQUESTING FUNDING  
FROM THE 2019 CAMPAIGN

AGENCY: \_\_\_\_\_ Hospice of Laramie \_\_\_\_\_

REPORT PREPARED BY: \_\_\_ Jeff Senn, Mario Rampulla, Jennifer Brook \_\_\_

DATE PREPARED: \_\_\_\_\_ April 16, 2020 \_\_\_\_\_

REPORT SUBMITTED BY: \_\_\_ Jeff Senn \_\_\_\_\_

## Program Information

- ✓ Please **submit 10 copies** of your information/financial/client data to the United Way office by **April 3, 2020 (5pm)**.
- ✓ Please list the question and then your answer on your own paper, using as much or as little space as needed.
- ✓ Add a list of your board members to your packet of information.
- ✓ Include two copies of your most recent 990 tax form with your 10 copies of packets. Please note if you do not file a 990. **Also include your most recent monthly financial balance sheet.** All new items are in bold and underline.

### 1) What is the agency's overall mission?

The mission of Hospice of Laramie (HOL) is to promote acceptance of the dying process as a natural, potentially fulfilling part of life, while providing emotional, spiritual, social, and material resources to support the dying, their families and friends. HOL strives to be a valued partner in the continuum of health care providers in Laramie and Albany County.

### 2) What services does your agency provide? How do the services help groups and individuals in the community?

HOL provides hospice services and palliative care to all qualifying persons in Laramie and Albany County. HOL provides comprehensive care that focuses on the entire family unit. Patients receive nursing care, hospice aide care, social services, nutritional care, respite care, and spiritual and emotional support. These services are provided by nurses, hospice aides, social workers, chaplains, physical therapists, occupational therapists, speech and language therapists, and dietitians, under the direction of a medical director and attending physician. Hospice care also includes certain medications, oxygen, durable medical equipment, and supplies necessary to make the patients comfortable. In addition, HOL offers patients and his or her families' access to alternative therapies such as music, massage, and pet therapies, which are donated or offered at a reduced rate by local practitioners.

HOL also provides bereavement/grief counseling to family members and caregivers, as well as other members of the Albany County community who have experienced a recent loss.

**3) What are the specific objectives (in quantitative terms, where possible) to be attained in your current year?**

HOL's primary objective is to continue to provide the highest quality end-of-life care to patients with a terminal illness and support for their loved ones in Albany County, regardless of their ability to pay for this service. HOL served 81 terminally-ill patients and their loved ones in 2019, an 11% decrease from 2018. Additionally, the total number of days for those 81 patients totaled 2,106 as compared to 3,722 days in 2018. This decrease of number of patients served with fewer over all days served indicates that the average lengths of time patients were on hospice care decreased. In 2017 the average length of time on care was 55 days; while in 2018 that time on care decreased to 40 days and in 2019 that time on care decreased to 26 days. This decrease in length of stay often means that patients and their families came onto care late and were not able to access the full benefit of hospice care.

Along with the decrease in the number of patients served and the number of unreimbursed costs on the increase, we temporarily closed the Hospice House. It has been a struggle to have the resources to cover the costs of care. For example, when HOL had a low census month, our income reflected the decrease and yet our staffing had to remain the same for the patients on care (this was due to the need to have 24/7 coverage no matter the number on patients on care).

HOL anticipates providing care for up to 100± patients in 2020. To date, HOL has served 23 patients. HOL projects that reimbursement for services provided to these 100± patients will be as follows: 85% will be reimbursed by Medicare/Medicaid; 12% through private or other insurance benefits; and 3% will have no payment source for medical costs. While Medicare/Medicaid and private insurance groups do cover a portion of patient care costs, there is a considerable discrepancy between the cost of providing these services to patients and the revenues generated from their respective reimbursements. In 2019, the actual costs of care exceeded reimbursed revenues over 20%. The 2019 Hospice Medicare routine care per diem rate was \$188.38 for the first 60 days on hospice, and \$148.02 for 61 days or more on hospice and the HOL projected per diem rate was \$210.38.

HOL is not allowed to charge the patient and their family for this difference; therefore, we must raise funds in order to provide this vital service to our community. United Way funds very much help HOL to cover this gap and allow us to continue to provide the best end-of-life care.

HOL's second objective will be to open the Hospice House in late summer 2020. We will begin to hire hospice staff back by ensuring that HOL offers a positive, supportive, and flexible workplace environment. To provide the highest quality end-of-life care patients deserve well-trained and stable staff to provide that care. In order to attain this stability of care, HOL staff needs to be assured that even when our census is low; HOL's investment in staff is unwavering. HOL will use United Way funds, and other funds, to help cover staffing costs when the patient census is low.

#### **4) How and why did the agency decide on the above objectives?**

HOL selected these two objectives based on their alignment with HOL's mission to promote acceptance of the dying process as a natural, potentially fulfilling part of life, while providing emotional, spiritual, social, and material resources to support the dying, their families and friends. In order to provide comfort care throughout the final stage of life, HOL must:

- 1) Be regarded, within the community, as providers of the highest quality end-of-life care to patients and their families, regardless of the patients' or families' ability to pay for these services or if such services are only partially reimbursed;
- 2) Open the Hospice House is crucial for Albany County, surrounding counties and Northern Colorado. This will allow HOL to properly staff to ensure quality and stability of care for inpatient and outpatient.

United Way funds will assist HOL in achieving these objectives while preserving the agency's current cash balances for uncompensated care costs.

#### **5) How does the agency expect to ascertain the attainment of the above objectives at year end?**

HOL will continue to track the number of patients served (both outpatient and inpatient), and record information and statistics regarding patients' low-income status, insurance coverage (or lack thereof), and financial deficits in Medicare/Medicaid coverage.

HOL will revise our billing processes to assure we can open the Hospice House and become a stable nonprofit in Albany county.

#### **6) Which of your services has the greatest priority? Why?**

At this time to continue to provide HOL's outpatient service for Albany County residents. Also to reopen the Hospice House providing inpatient service's that will help HOL succeed in helping as many people as possible with their hospice needs.

#### **7) How do this agency's services vary from similar programs offered by other agencies in the community?**

While other organizations may provide some components of end-of-life care, HOL is the only entity in Albany County certified to provide the comprehensive array of hospice services to individuals who have been diagnosed with a terminal illness and their families. HOL is the only end-of-life service provider whose work continues after the individual has died, by providing on-going regular communication and support with the families and loved ones of the individual.

**8) What would the community lose if this program were not funded?**

Ultimately, the Laramie community and Albany County could lose its comprehensive hospice services. HOL depends upon supplemental funding to augment inadequate Medicare/Medicaid reimbursements, insurance reimbursements, and to fund non-covered services and uninsured patients. Individuals, who do not have full or even partial insurance coverage, could incur significant debt or be without complete integrated end-of-life care if hospice services were not available. The emotional and spiritual support, including bereavement services, would not be available to the individual and his or her family. In most cases, individuals would not have the choice of, or the support for, dying at home.

**9) Do you contemplate providing any new or different services in the next year?**

HOL will continue providing the highest quality end-of-life care to Albany County community members. This care will be provided in the patient's home, (wherever they call home). Opening the Hospice House will be our priority within the next year. HOL is looking to add to its portfolio of care to include Respite Care for Hospice patients (moving them into the home for a short period of time), and long term, non-Hospice palliative care.

**10) Do you foresee any other changes in the coming year? Please include possible changes in all levels of government funding and anticipated changes in your leadership team.**

We have had changes in the organization's leadership with the untimely death of our Executive Director and the retirement of our Director of Counseling. We will be searching for an Executive Director this year. Also at this time, HOL is not anticipating any changes to the 2020 Medicare/Medicaid rate.

**11) How many volunteers are actively involved in your organization and what roles do they perform?**

Medicare requires that volunteers provide at least 5% of HOL's direct care services. In order to meet and exceed this mandate, HOL currently utilizes approximately 13 trained volunteers, who provided 15% of our direct care services in 2019. In addition, new volunteer training and continued training of current volunteers is conducted several times throughout the year. These volunteers are involved in direct patient care, home visits, and providing respite care for primary care givers, co-facilitating bereavement groups, and attending patient deaths with the HOL nurse.

In addition to the direct patient care services, HOL volunteers also assist in the office, with fundraising activities, with equipment maintenance, and with other tasks as needed. The time, money and resources HOL saves by utilizing volunteers is invaluable, and they enable HOL to continue to expand its volunteer base in the community.

**12) How many hours of volunteer time are donated annually?**

In 2019, HOL volunteers donated a total of 990 hours; this resulted in a cost savings of \$22,385.

**13) Describe a unit of service and the cost.**

Hospice is the only health care provider who receives a per diem rate from Medicare/Medicaid and most private insurance companies, rather than a rate per visit. For 2019, this per diem rate ranged between \$148.02 and \$188.38 for routine care and \$170.45 for respite care and \$704.47 for General Inpatient Care, this includes the Productivity Factor, Hospice Specific Reductions (sequestration), and BNAF reductions).

No more than 20% of HOL's care can be at the highest rate, General Inpatient, therefore the majority of our care ranges between \$148.02 and \$188.38. Medicare considers these rates sufficient to pay for all services Hospice provided to the patient and their family, including physician care, nursing care, personal care by certified nursing assistants, social work care, spiritual care, dietary care, pharmaceutical care, as well as all the needed pain and symptom management prescriptions and oxygen for that patient. Services and costs for patients vary depending on the patients and family's needs. The average cost for care per patient per day in 2019 was \$210.38. These calculations are a conservative account and only include the cost for patient care expenses, not administrative. The difference in cost versus reimbursement is disturbing and is one reason additional funding is essential to maintain HOL's current level of services.

**14) What percent of your budget is spent in Albany County?**

The entire budget, with the exception of national and state dues, is spent in Albany County. HOL serves residents of Albany County, including Laramie, Centennial, Rock River, and the surrounding rural areas.

**15) You will be receiving \$6,810 in designations in FY2021 from the 2019 campaign. How much additional funding are you requesting from undesignated dollars for FY 2021 (July 1, 2020-June 30, 2021)?**

HOL is requesting \$17,190 in undesignated funds from the 2019 campaign.

**16) What will United Way funds be used for?**

HOL will continue to use the United Way funds to help offset the cost of un-reimbursed services and allow HOL to continue providing Albany County residents with the highest quality end-of-life care available. Additionally, United Way funds will be used to cover staffing costs when HOL's patient census is low (See Question #3 for additional details.)

**17) If your agency provides direct services to clients, what services do you provide for them, and how do you measure success?**

HOL provides hospice services and palliative care to all qualifying persons in Laramie and Albany County. HOL provides comprehensive care that focuses on the entire family unit. Patients receive nursing care, hospice aide care, social services, nutritional care, respite care, and spiritual and emotional support. These services are provided by nurses, hospice aides, social workers, chaplains, physical therapists, occupational therapists, speech and language therapists, and dieticians, under the direction of a medical director and attending physician. Hospice care also includes certain medications, oxygen, durable medical equipment, and supplies necessary to make the patients comfortable. In addition, HOL offers patients and his or her families' access to alternative therapies such as music, massage, and pet therapies, which are donated or offered at a reduced rate by local practitioners.

HOL also provides bereavement/grief counseling to family members and caregivers, as well as other members of the Albany County community who have experienced a recent loss.

HOL measures success through the quality of care, which is rigorously examined through its Quality Improvement Committee that meets quarterly to review past and continuing cases, the quality of care and determine future measures for improvement.

**18) What outcomes do you expect to occur with our funding?**

HOL expects to be able to continue to provide the highest quality end-of-life care with the additional funding by offsetting the unreimbursed cost of care. Secondly, HOL expects to be better able to retain staff when the patient census is low because, in part, from the United Way funding.

**19) United Way's areas of concern are education, financial stability and health. How does your organization's mission intersect with that of the United Way?**

HOL's mission of providing end-of-life care to terminally ill individuals and support for his/her families directly intersects the Health concern of United Way.

**20) How will the agency modify its services if the full amount requested from United Way is not available?**

If the full amount of funding requested from United Way is not available, HOL will reduce the scale of coverage for unreimbursed patient care costs. Also, HOL will have fewer resources to allocate for retaining new staff.

**21) Do you have supplemental fund raisers? (List your traditional supplemental fund raisers including the name of the event, date, gross income, expenses, and net income. If you do not have supplemental fund raisers list the ways in which your agency diversifies your base of support, i.e., applying for federal grants, suggested donations for services, client fees, etc.)**

HOL currently conducts two major fundraisers each year: a Wine Gala which takes place in August/September and a Winter Appeal which is undertaken in November/December.

Wine Gala:

- Gross: \$41357
- Expenses: \$18,450
- Net: \$22907

Winter/Spring Appeal:

- Gross \$30,955
- Expenses \$1928
- Net: \$29027

These funds help cover 1) associated costs of patient care that are not reimbursed by Medicare and Medicaid, and 2) a portion of HOL's operating costs.

In addition to the above, HOL has begun a new fundraising event in February named FeBREWary. This fundraising event has grown from a net of \$2,000-\$3,000 to \$5,000 to \$7,000, and HOL thinks that the net revenue can increase significantly above those levels.

Additionally, HOL typically applies for the City/County outside Agency (Community Partners) and Wyoming Workforce Development Training funds (when available). While HOL does not consider unsolicited donations a form of fundraising, we do consider these individual donations a crucial form of support. In 2019, HOL received unsolicited donations amounting to \$97,200.00. These donations were derived from memorials, equipment loan donations and unsolicited community donations.

**22) Does the agency have other sources of support? (List any accounts, reserves, investments, trusts and/or foundations [restricted and unrestricted] held by your agency, or for the benefit of your agency not listed on the budget forms. Include the balance of each and its stated purpose and/or restrictions.) What percentage of you annual budget do you have in reserves? Has a target dollar amount been set by the board of directors?**

HOL maintains an "Emergency Reserve Fund" which is part of our "cash in bank" listed on the Income for Operations and Programs category of the budget. The Board of Directors has reserved these funds for unforeseen expenses and to cushion the possibility of drastic reductions in Medicare reimbursement. These funds are being restricted for future HOL growth, such as the expansion of the Hospice House.

In an attempt to address the long-term financial needs of the agency, HOL applied for and was approved to participate in an endowment campaign through the Wyoming Community Foundation as a Kresge Partner. As of September 2003, Hospice raised \$100,000 that established an endowment, and received matching funds from the Kresge Foundation of \$33,333. The endowment will provide unending income for Hospice administrative costs; however, the corpus cannot be utilized.

**23) How many staff, professional and support, does your agency employ? How many are full-time? How many are part-time?**

HOL has a total of 10 employees, they are as follows:

Full time employees

Director of Operations

Clinical Director

Receptionist

1 Nurse

Part time/On call employees

Maintenance Coordinator

Bereavement Counselor

Social Worker/Spiritual Advisor

2 Nurses

1 Certified Nursing Assistants

**24) Who is covered in your beneficiary statistics report? (Clients, clients and volunteers, educational contacts, etc.?)**

Detailed statistical information for hospice patients and families is included in the program beneficiary statistics report. Volunteer services are addressed in #12 above.

**25) Is there any additional information you feel would be beneficial for United Way allocation panel members to know?**

In addition to being the only Hospice provider in Albany County, HOL is also the only provider who works with the family after the patient has died by offering bereavement services for over one year. This service is also available, at no charge, to community members who may not have had a family member on Hospice but experienced a loss. The growth in community members who access this service has increased steadily and HOL expects this need to continue. Thus, HOL is expanding its bereavement offerings to the community.

**26) Please describe your in-house United Way Campaign in 2019 and your plans for 2020. How do you plan on engaging and encouraging staff, board members, volunteers and others to support the upcoming 2020 campaign?**

HOL staff, volunteers and Board members are very aware of the value of United Way. During the 2019 campaign staff, volunteers and Board members were informed of the United Way efforts and were encouraged to participate. The HOL Executive Director participated in United Way campaign presentations and Board members attended the kickoff and the celebration activities to show support and gratitude for United Way.

For 2020, HOL will continue to encourage staff, volunteers and Board members to participate in their own way to support United Way; the HOL leadership team will continue to participate in the United Way presentations and meetings with the Board; and HOL commits to having either staff or Board members at all 2020 United Way public functions.

The Board members are available to answer and welcome any additional questions any United Way or community member has regarding services and programs offered.

**27) What percentage of your board of directors donated in the past 12 months either directly to your organization or to your organization through the United Way?**

As of December 31, 2019, 100% of HOL's then current Board of Directors has either donated directly to HOL or through United Way.

**28) Have you registered with Wyoming 2-1-1 and is it up-to-date? Are you a member of the Wyoming Nonprofit Network?**

Yes, Hospice of Laramie has registered with Wyoming 2-1-1, and the information is up-to-date.

**29) How have you addressed any issues brought forth from the 2019 allocation process? (Please read notification summary sent to you in May).**

In 2020, HOL will ask staff who decide to give separately to let administration know that they gave. HOL will not ask the staff member, how much they gave nor if they designated their donation. To the extent staff members share their individual donation information; HOL will share that information with United Way. Board Members have contributed to the United Way and will continue to do so in the future.

**30) What percentage of your overall funding comes from the United Way? If you are a multijurisdictional agency, please calculate this number using Albany County data only.**

United Way funding comprises of 1.8% of HOL's income.

## REQUEST FOR FUNDING FROM THE 2019 CAMPAIGN

YOU MAY USE THE BUDGET FORMS PROVIDED BY UNITED WAY OR YOU MAY LIST THE SAME CATEGORIES 1-8, 9-17 ON YOUR OWN FORMS, USING THE SPACE NEEDED TO DETAIL YOUR INCOME AND EXPENSES. USE THE SAME NUMBER AND CATEGORY AS THE UNITED WAY FORM.

These budget forms are to list only funds that can be used as operating funds under normal conditions or in an emergency situation.

Dates:

**Last year actual** is the most recent fiscal or calendar year that you have completed; all numbers are final and match your last audit or 990. Please list beginning and ending dates. Example: 7/1/18-6/30/19.

**This year estimated** is the current fiscal or calendar year at the time the report is made. If you are at the end of your year, the numbers will be more accurate, if you are at the beginning, the numbers will be more of an estimate. Please list beginning and ending dates.

**Next year budgeted** is your projected future budget. Please list beginning and ending dates.

IF THE CATEGORY DOES NOT APPLY TO YOUR AGENCY, PUT 0 IN THE SPACE

- 1) **CASH IN BANK** - All funds available for operating expenses on the first day listed under each year. This includes funds designated for particular operating or program expenses as well as cash dollars, checking/savings accounts, CD's, and/or money markets intended for operations and programs. This must match previous year's ending cash balance or explain the difference at the bottom of the form.
- 2) **PUBLIC SUPPORT** has 3+ categories. *General contributions* are cash donations from individuals and businesses. *Trusts* are cash donations from trusts. *Foundations* are cash donations from foundations. *Other* spaces are for cash donations that do not come under the listed three categories.
- 3) **GOVERNMENT SUPPORT** has 4+ categories. List cash support from the source. Example: If state funds are administered by the county, they are still state funds. *Other* spaces are for cash donations that do not come under the listed four categories.
- 4) **SELF-SUSTAINING SUPPORT** has 6+ categories. *Membership dues* are those fees required to be a member of your organization. *Sales to public* are funds generated by the sale of a product. *Interest income* is all interest generated for operating or program expenses. *Fundraisers - net* are the total funds for operating or program after deducting the cost of conducting the fundraisers. *Client fees* are the required fees to pay or partially pay for services provided by your agency. *User donations* are the voluntary payments made by your clients or the people who use your services to help cover costs. *Other* spaces are for cash donations that do not come under the listed six categories.

- 5) **UNITED WAY SUPPORT** is the total of cash payments to be paid to your agency during the dates listed at the top of the column by United Way of Albany County. This may or may not match the total allocation to your agency from that United Way campaign. List any contributions from other United Ways in the open space below.
- 6) **TOTAL INCOME** is the sum of all income sources that fund operations and programs.  
(2+3+4+5 = 6)
- 7) **TOTAL CASH AVAILABLE** is the sum of all funds that can be used for operations and programs. (1+6 = 7)
- 8) **IN-KIND DONATIONS (optional)** if you choose to do so, you may list the value of volunteer hours and/or donations of food, clothing, office equipment etc. for your operation or program.

Dates: see above

- 9) **SALARIES & WAGES** is the gross sum of all hourly or salary wages paid to employees during the dates listed at the top of the column (full-time, part-time, or temporary). This includes their share of social security and taxes withheld from their checks.
- 10) **EMPLOYEE BENEFITS** is the sum of all cash benefits paid on behalf on agency employees. Examples: Agency share of social security, worker's comp., health insurance, pension plan.
- 11) **PROFESSIONAL & CONTRACTUAL SERVICES** have two categories. *Agency related* is the sum of all payments to people not on staff that provide services necessary to keep your organization operating. Example: an accountant hired to do an audit or a lawyer hired to write a contract. *Client related* is the sum of all payments to people not on staff who provide services to your clients. Examples: a psychologist who examines a child under your care, a nurse providing in-home care or a person teaching a class.
- 12) **DIRECT SERVICE TO CLIENTS** is the sum of program expenditures to provide your services. List your own categories appropriate to services provided by your agency and then the amounts. At the end of your categories, list "Total" and amount of expenditures on direct services to clients in parentheses.
- 13) **OFFICE EXPENSES** are the sums of expenditures to maintain an office. List your own categories and then the amounts. At the end of your categories, list *Total* and amount of expenditures in parentheses.
- 14) **TRAINING/TRAVEL** covers all expenses for travel and training of your staff or consultants. Example: a speech therapist on staff might attend a national meeting of speech therapists. You would include the registration/tuition cost, the reimbursement of car travel to Denver, the airline tickets, the motel and meals in the sum of *training*.

- 15) **MISCELLANEOUS** has three categories. *Vehicle expense* covers the cost of operating vehicles owned by your agency. *National dues* cover assessments, contributions and voluntary or required fees to belong to affiliated national organizations. *Other* covers expenses not listed above. Please title each category on the same line as the word *Other*. Examples: state organization dues, capital purchases or transfers to reserves.
- 16) **TOTAL EXPENSES** is the sum of all expenditures required to operate your agency and programs. (9+10+11+12+13+14+15 = 16)
- 17) **CASH BALANCE IN BANK** The sum of beginning cash and income minus expenses of each reporting period for the dates listed at the top. 7-16 = 17 should match, 1) *Cash in bank* at the beginning of the next reporting period.

## Covid-19 Questions

**1) How has the Covid-19 pandemic affected your organization to date?**

The biggest impact at this time is our referrals. Since Covid-19 our referrals have dried up from all community partners. I understand that in this uncertain time and they have other issues consuming their time, but we are definitely feeling the effects of Covid-19.

**2) What are your long term plans to deal with the affects of the disruptions caused by the virus?**

Because of restructuring reasons we have temporally closed the Hospice House. Until we see the Covid-19 spike in Laramie we have offered a lease option for our 6 beds to the Iverson Memorial Hospital. Once we are confident that the Covid-19 impact on Laramie is over we will begin the process of reopening the Hospice House.

**3) Please detail the financial impact of the pandemic on your agency?**

The impact is no referrals which equals just under \$190.00 a day per outpatient and \$500.00 a day per inpatient.

**4) Will you be laying off employees?** At this time I don't believe so, if anything we should be hiring again in the near future.

**INCOME FOR OPERATIONS AND PROGRAMS**

|  | Last Year Actual | This Year Estimated | Next Year Budgeted |
|--|------------------|---------------------|--------------------|
| Please list either calendar or fiscal year dates:        | 2019             | 2020                | 2021               |
| <b>1) CASH IN BANK</b>                                   | \$ 11,349.00     | \$ 24,819.45        | \$ 141,104.45      |
| <b>2) PUBLIC SUPPORT</b>                                 |                  |                     |                    |
| General donations  | \$ 93,464.20     | \$ 86,000.00        | \$ 91,700.00       |
| Trusts   |                  | \$ 250,000.00       |                    |
| Foundations  |                  |                     |                    |
| Other  |                  |                     |                    |
| <b>3) GOVERNMENT SUPPORT</b>                             |                  |                     |                    |
| City of Laramie  | \$ 7,000.00      | \$ 8,250.00         | \$ 8,500.00        |
| Albany County  | \$ -             | \$ 8,250.00         | \$ 8,500.00        |
| State of Wyoming   |                  |                     |                    |
| Federal  |                  |                     |                    |
| Other  |                  |                     |                    |
| <b>4) SELF-SUSTAINING SUPPORT</b>                        |                  |                     |                    |
| Membership dues  |                  |                     |                    |
| Sales to public  |                  |                     |                    |
| Interest income  | \$ 60.00         | \$ 60.00            | \$ 60.00           |
| Fundraisers - net  | \$ 60,212.00     | \$ 65,000.00        | \$ 70,000.00       |
| Client fees  | \$ 902,469.65    | \$ 870,500.00       | \$ 1,090,000.00    |
| Donations  |                  |                     |                    |
| Other Unreimbursed Services                              | \$ (100,579.62)  | \$ (160,000.00)     | \$ (200,000.00)    |
| <b>5) UNITED WAY SUPPORT</b>                             | \$ 19,395.25     | \$ 24,000.00        | \$ 24,000.00       |
| <b>6) TOTAL INCOME</b> (total for lines 2 thru 5)        | \$ 1,082,601.10  | \$ 1,312,060.00     | \$ 1,292,760.00    |
| <b>7) TOTAL CASH AVAILABLE</b> (total for lines 1 and 6) | \$ 1,093,950.10  | \$ 1,336,879.45     | \$ 1,433,864.45    |
| <b>8) IN-KIND DONATIONS (optional)</b>                   |                  |                     |                    |

**EXPENSES**

|   | Last Year Actual | This Year Estimated | Next Year Budgeted |
|---|------------------|---------------------|--------------------|
| Please list either calendar or fiscal year dates:     | 2019             | 2020                | 2021               |
| <b>9) SALARIES/WAGES</b>                              | \$ 803,720.00    | \$ 859,940.00       | \$ 999,500.00      |
| <b>10) EMPLOYEE BENEFITS</b>                          | \$ 92,896.00     | \$ 106,740.00       | \$ 129,079.00      |
| <b>11) PROFESSIONAL AND CONTRACTUAL SERVICES</b>      |                  |                     |                    |
| Agency related  |                  |                     |                    |
| Client related  | \$ 8,973.00      | \$ 15,865.00        | \$ 23,000.00       |
| <b>12) DIRECT SERVICE/CLIENTS</b>                     | \$ 98,250.00     | \$ 106,500.00       | \$ 107,500.00      |
| <b>13) OFFICE EXPENSES</b>                            | \$ 51,219.65     | \$ 65,500.00        | \$ 66,500.00       |
| <b>14) TRAINING/TRAVEL</b>                            | \$ 2,833.00      | \$ 2,600.00         | \$ 2,750.00        |
| <b>15) MISCELLANEOUS</b>                              |                  |                     |                    |
| Vehicle expenses                                      | \$ 3,885.00      | \$ 4,000.00         | \$ 4,100.00        |
| Dues  | \$ 1,244.00      | \$ 1,630.00         | \$ 2,100.00        |
| Other   | \$ 6,110.00      | \$ 33,000.00        | \$ 38,700.00       |
| Other   |                  |                     |                    |
| Other   |                  |                     |                    |
| <b>16) TOTAL EXPENSES (total for lines 9 thru 15)</b> | \$ 1,069,130.65  | \$ 1,195,775.00     | \$ 1,373,229.00    |
| <b>17) CASH BALANCE IN BANK (7 minus 16)</b>          | \$ 24,819.45     | \$ 141,104.45       | \$ 60,635.45       |

**PROGRAM BENEFICIARY STATISTICS \***

| Please list either calendar or fiscal year dates: | Last Year Actual | This Year Estimated | Next Year Budgeted |
|---|------------------|---------------------|--------------------|
|   | 2019             | 2020                | 2021               |
| <b>1) UNDUPLICATED COUNT OF BENEFICIARIES</b>     |                  |                     |                    |
| <b>2) AGES</b>                                    |                  |                     |                    |
| Infant (under 5)                                  | 0                | 0                   | 0                  |
| 5-12  | 0                | 0                   | 0                  |
| 13-17   | 0                | 0                   | 0                  |
| 18-29   | 0                | 0                   | 0                  |
| 30-64   | 12               | 11                  | 15                 |
| 65 & over   | 69               | 80                  | 85                 |
| <b>3) GENDER</b>                                  |                  |                     |                    |
| Male  | 33               | 38                  | 41                 |
| Female  | 48               | 53                  | 59                 |
| <b>4) INCOME LEVEL</b>                            |                  |                     |                    |
| Below poverty                                     | 26               | 30                  | 32                 |
| At or near poverty                                | 18               | 20                  | 22                 |
| Median income                                     | 24               | 25                  | 29                 |
| Upper income                                      | 13               | 16                  | 17                 |
| <b>5) RESIDENCE</b>                               |                  |                     |                    |
| Albany County                                     | 81               | 91                  | 100                |
| Other   | N/A              |                     |                    |

*\* If your agency does not keep program beneficiary statistics to match these categories, enter N/A where appropriate.*



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