



Municipality: Norwalk.

Form NAA-01

2019 Connecticut Neighborhood Assistance Act (NAA) Program Proposal

This form **must** be completed and submitted to your municipality for approval. All items **must** be completed with as much detail as possible. If additional space is needed, attach additional sheets. Please type or print clearly. See attached instructions before completing. **Do not submit this form directly to the Department of Revenue Services.**

Part I — General Information

Name of tax exempt organization/municipal agency: _____
Domestic Violence Crisis Center

Address: 1111 Summer Street, Suite 203, Stamford, CT 06905

Federal Employer Identification Number: 06-1057356

Program title: PeaceWorks: Preventative Education

Name of contact person: Kevin Shippy

Telephone number: (203) 588-9100

Email address: KShippy@dvcct.org

Total NAA funding requested (\$250 minimum, \$150,000 maximum): \$ 24,000.00

Is your organization required to file federal Form 990 or 990EZ, Return of Organization Exempt from Income Tax?

Yes No

If **Yes**, attach a copy of the **first page** of your most recent return.

If **No**, attach a copy of your determination letter from the U.S. Treasury Department, Internal Revenue Service.

Part II — Program Information

Check the appropriate description of your program:

100% credit percentage

- Energy conservation; or
- Comprehensive college access loan forgiveness (see Conn. Gen Stat. §12-635(3)).

60% credit percentage

- Job training/education for unemployed persons aged 50 or over;
- Job training/education for persons with physical disabilities;
- Program serving low-income persons;
- Child care services;
- Establishment of a child day care facility;
- Open space acquisition fund; **or**
- Other (specify): After School Programing and Classroom Presentations for Children Ages 5 - 17.

Description of program:

When the #Metoo movement exploded on social media last October, it became clear there are social norms around relationships needing change. PeaceWorks, the prevention education project of DVCC, believes the prevention of relationship violence in our society, and change, begins with education of youth. Our team of experienced educators provides tools for youth to help them learn how to maintain healthy relationships and solve conflicts peacefully.

DVCC is harnessing the momentum of this cultural moment, to embrace youth voices and empower young people. Young women ages 16-24 are the most at risk of experiencing intimate partner violence. Especially with the changing nature of relationships with the prominence of technology and digital communication, we recognize it is imperative to educate these young people about safe, healthy behaviors - also about warning signs, and how to intervene when they know something is not okay.

PeaceWorks programming offered to elementary school students focuses on anger management and bullying, offering children healthy ways to handle and express their anger, and explains what bullying is and its effects. In middle and high school, students learn about healthy relationships, dating violence, setting and respecting boundaries, consent, and healthy technological interactions through guided discussions, activities, role-playing and other exercises. The programming is offered during Health or "Life" classes in school, and is also offered as PeaceWorkSHOPS for after-school programs and other youth-oriented programs.

Need for program:

Unhealthy dating behaviors are often learned, and start in adolescence. From nationwide statistics, we know that one in three adolescents in the U.S. is a victim of physical, sexual, emotional or verbal abuse from a dating partner, a figure that far exceeds rates of other types of youth violence. We also know that one in ten high school students has been purposefully hit, slapped or physically hurt by a boyfriend or girlfriend.

Children, especially those who grow up in abusive homes, often see violence as a normal part of a relationship. A young person may learn that it's normal to feel jealous of their partner's friends and that if their partner loves them, he or she should spend all of their spare time with him. This child will see that it's ok to blame his partner if he's in a bad mood, and when they are angry, it's acceptable to hit, threaten, or call their partner names. A different young person growing up in an abusive home may learn that jealousy is a sign of love and that if they like someone, they should want to be with him all the time. They may learn that they are supposed to be sexually available to their partner, and their partners' feelings are their responsibility.

When young people learn these things are acceptable, they risk entering abusive relationships. Teens aren't naïve or oblivious- most of them don't want to repeat this unhealthy model in their own lives. But they often don't know what a healthy relationship looks like.

PeaceWorks bridges this gap- our staff guides young people, and those who engage with them, to think critically about relationships so their own experiences of partnership and love are healthy and non-violent. This is important not only for youth who have witnessed domestic violence, but for all youth, as we know young people are not exclusively affected by their home lives, but by their peer groups, societal norms, cultural expectations, as well as other adults active in their lives. We teach and model skills many young people often don't have other opportunities to discuss or learn.

In order to not become victims or perpetrators of abuse, teens need to learn about positive communication and conflict management—as well as what healthy and unhealthy behaviors look like—in order to form successful relationships in adolescence and adulthood.

Neighborhood area to be served:

PeaceWorks works with a very diverse student body. PeaceWorks has a presence in almost every elementary, middle, and high school in Stamford, and has ties at the public middle and/or high schools in Norwalk, Wilton, New Canaan, Darien, Weston, and Westport; the students we serve are a reflection of each of their towns. Our Teen PeaceWorks groups are groups of high schoolers who are passionate about the issue of dating behaviors and committed to raising awareness about how to stay safe in a relationship within their communities.

Plan to implement the program:

PeaceWorks is an ongoing program of the Domestic Violence Crisis Center. The goal of the project is to break the cycle of violence and the effects of unhealthy relationships by educating local teens on what healthy relationships looks like, how to communicate with a partner, how to set and respect boundaries, and to manage conflict positively and safely.

Long-term impacts of fostering healthy relationships in our area youth (about 38,000 teens are in our public schools) is a reduction in risky behaviors, suicides, improved mental health and a successful launch into becoming healthy young adults who can contribute positively to the communities they live in. By working in partnership with teachers, counselors, parents and the teens we aim to create the necessary conditions that will result in the successful development of healthy relationships goals in our youth.

Timetable:

Program start date: 07/01/2019
Program completion date: 06/30/2020

The program completion date must not be more than two years from the program start date. A certified post-project review is due to the municipality overseeing implementation no later than three months after program completion date for all projects receiving \$25,000 or more in NAA funding.

Part III - Financial Information

Program Budget:

Complete in full. Expenditures must equal or exceed total funding.

Sources of Reveue:

NAA funds requested	24,000.00
CT Coalition Against Domestic Violence	23,050.00
Department of Social Services	<u>17,980.00</u>
	41,030.00
Revenue - Individual	12,000.00
Revenue - Organization	6,400.00
Revenue - Faith Based	2,240.00
Revenue - Foundation	<u>10,000.00</u>
	30,640.00
Total Revenue	<u><u>95,670.00</u></u>

Proposed Program Expenditures:

Salaries	77,220.00
Employee benefits (employer side)	7,151.00
Payroll Taxes	5,907.00
401k Matching Contribution	2,881.00
Accounting Fees	1,500.00
Other Professional Fees	750.00
Classroom Supplies/Material	4,050.00
Office Telephone & Internet	1,320.00
Rent	5,380.00
Travel	1,962.00
Insurance-Excluding Employee Related	<u>2,070.00</u>
Total Expenditures:	<u><u>110,191.00</u></u>

Part IV — Municipal Information

To be completed by the municipal agency overseeing implementation of the program

Name of municipal agency overseeing implementation of the program: _____ Norwalk Redevelopment Agency
Mailing address: _____ 125 East Avenue, Room 202 Norwalk, CT 06851
Name of municipal liaison: Timothy Sheehan
Telephone number: (203)854-7810
Fax number: _____
Email address: tsheehan@norwalkct.org

<p style="text-align: center;">Post-Project Review</p> <p style="text-align: center;">Is a post-project review required for this proposal?</p> <p style="text-align: center;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p style="text-align: center;">If Yes, date post-project review due:</p> <p style="text-align: center;">_____</p> <p style="text-align: center;">Date</p>
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**IRS e-file Signature Authorization
for an Exempt Organization**

For calendar year 2017, or fiscal year beginning 7/01, 2017, and ending 6/30, 20 2018

▶ **Do not send to the IRS. Keep for your records.**
▶ Go to www.irs.gov/Form8879EO for the latest information.

2017

Department of the Treasury
Internal Revenue Service

Name of exempt organization

Employer identification number

DOMESTIC VIOLENCE CRISIS CENTER

06-1057356

DAVID STONE

TREASURER

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than one line in Part I.

1 a Form 990 check here	▶ <input checked="" type="checkbox"/>	b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1 b	<u>3,195,477.</u>
2 a Form 990-EZ check here	▶ <input type="checkbox"/>	b Total revenue, if any (Form 990-EZ, line 9)	2 b	
3 a Form 1120-POL check here	▶ <input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3 b	
4 a Form 990-PF check here	▶ <input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part VI, line 5)	4 b	
5 a Form 8868 check here	▶ <input type="checkbox"/>	b Balance Due (Form 8868, line 3c)	5 b	

Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2017 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

I authorize JUMP, PERRY AND COMPANY, L.L.P. to enter my PIN 45359 as my signature
ERO firm name Enter five numbers, but do not enter all zeros

on the organization's tax year 2017 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2017 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature

David Stone

Date

3/7/2019

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN

22548108754

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2017 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature

KATHRYN PERRY, CPA

Date

**ERO Must Retain This Form – See Instructions
Do Not Submit This Form to the IRS Unless Requested To Do So**