



Office of the County Executive  
STEUART PITTMAN

# County Executive's Community Support Grants Program

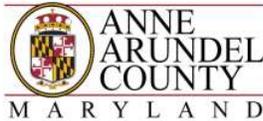
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# FY 2023 Grant Guidelines

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Administered By:





## COUNTY EXECUTIVE'S OFFICE

### FY 2023 COMMUNITY SUPPORT GRANT APPLICATION GUIDELINES & INSTRUCTIONS

*The County Executive's Office is pleased to offer Community Support Grants to eligible non-profit organizations. Funding is available for the period July 1, 2022 to June 30, 2023 and is contingent on approval of the FY 2023 budget.*

Please read all instructions before beginning the application.

#### I. Community Support Grant Application Deadline and Submission Instructions

**Application Available: January 11, 2022**

**Application Deadline: February 21, 2022, 4 p.m.**

All applications should be completed online through Arundel Community Development Services' (ACDS) Neighborly Portal. If you have not already done so, please click [HERE](#) to create an account. A quick guide for getting set up in Neighborly is available on the login page. If you are unable to access our online portal or have technical difficulties, please contact David Sims, ACDS Community Grants Manager, at [dsims@acdsinc.org](mailto:dsims@acdsinc.org).

A training is scheduled for potential applicants on January 18, 2022 at 10:00 a.m. via Zoom. Please RSVP to Laura Shaffer, Grants Associate, at [lshaffer@acdsinc.org](mailto:lshaffer@acdsinc.org) and details will be provided. The training will be recorded and available on the CSG Program webpage for anyone who is unable to attend.

**The application with supporting documents must be SUBMITTED in the Neighborly portal no later than 4:00 p.m. on February 21, 2022.**

#### II. Types of Grants

This year, due to the availability of federal COVID-19 response funding, we anticipate having two funding sources for competitive applications received through this request for proposals - (1) American Rescue Plan (ARP) funds and (2) County General funds. Projects funded through ARP must either respond directly to a COVID-19 safety net need in the community and/or sustain the capacity of a nonprofit for which revenues have been severely and negatively impacted due to COVID-19. In addition to ARP funds, we anticipate \$600K to \$700K will be available in County General funds, which are not subject to the COVID-19 restrictions above.

*Applications should be for no less than \$10,000, and awards typically range from \$10,000 to \$75,000.*

***The following types of projects/programs are encouraged:***

**Operating Costs** that allow non-profit organizations to increase their impact and operate more efficiently and effectively to improve and enrich the lives of Anne Arundel County residents and communities. Operating costs include staff costs, consultant fees, occupancy costs, insurance, and program supplies

**One-time equipment purchases** (e.g. printers, computers, freezers) required for effective program delivery.

*Note: Collaborative Projects are preferred but not required for funding.*

III. County Executive's Priorities

The County Executive and review team will prioritize FY 2022 Community Support Grant proposals that:

- A. respond directly to a COVID-19 safety net need in the community **and/or** sustain the capacity of a nonprofit for which revenues have been severely and negatively impacted due to COVID-19;

**OR**

- B. include support for programming and initiatives that focus on one of the following:

- Providing services to underserved populations in Anne Arundel County
- Addressing the health and well-being of communities
- Promoting equity and inclusion
- Eliminating the [Opportunity Gap](#) in Anne Arundel County

C. Funding Cycle

July 1, 2022 to June 30, 2023

Funding is based on the availability of funds in the County's annual budget.

**Note: These are competitive Grants. Submission of an application does not guarantee that funding will be awarded**

D. Grant Criteria/Eligibility

ACDS will consider only organizations that:

- are non-profit, tax-exempt, as defined under section 501(c)(3) of the United States Internal Revenue Code;

- are in good standing with MD State Department of Assessment & Taxation (SDAT) – instructions for obtaining a printout of your good standing status are attached as Exhibit II;
- provide a direct service to the residents of Anne Arundel County;
- have an established and active Board of Directors;
- have filed IRS Form 990 and/or audited financials in FY21;
- meet ACDS insurance requirements;
- are able to comply with all terms, conditions, and certifications of the required grant agreement.

E. All applications submitted by faith-based organizations must adhere to the “Guidelines on Funding Faith-Based Organizations & Related Activities.” Full text of these guidelines is attached to this application as Exhibit V.

F. Grant Funding Amount

Non-capital grant applications should be for no less than \$10,000, and awards will typically range from \$10,000 to \$75,000.

Grant awards from previous fiscal years are available online at <https://www.aacounty.org/departments/county-executive/community-support-grants/previous-grants/>

*Please note that grants were not awarded by the County Executive's Office from FY18 to FY20. All funds were awarded by County departments and are not reflected in this listing of awards.*

G. Grant Review Process

Funding decisions are made based on, but not limited to, the following:

- Relevance to County Executive's priorities
- Demonstrated need for program / project
- Quality of proposed outcome measures
- Completeness and clarity of grant application form
- History of compliance on reporting requirements from previously funded programs/projects
- Organization's stability
- Demonstration of sound financial planning, management, and allocations of funds

Grant applications will be initially screened for basic eligibility and compliance by ACDS staff, then reviewed by a panel of County agency representatives.

The County Agency Panel will make final recommendations for each award and funding amount to the County Executive's Office.

Panel recommendations for grant awards will then be reviewed and final decisions made by the County Executive.

## H. Notification of Grant Award

Applicants will be notified of award in writing by July 1, 2022.

Applicants who are selected to receive a Community Support Grant will be required to enter into a grant agreement with Arundel Community Development Services, Inc. (ACDS), the agency under contract to administer the grants on behalf of the County. This grant agreement will define the organization's responsibilities and a payment schedule for the award received. Awardees may be required to attend an information session with ACDS staff. ACDS staff will contact the main contact person included in your application to begin processing the grant award and ensure the organization has submitted all required grant documents, including an Insurance Certificate naming ACDS as an additional insured and a board resolution or other organization document stating that the grant signatory is authorized to sign grant agreements on behalf of the organization.

*If your organization is awarded funds, do not begin incurring expenses until you have a fully executed written agreement with ACDS. ACDS is not liable for any expenses incurred before the grant agreement is signed by all parties. Additionally, grantees must follow an **ACDS approved procurement process**. Do not procure equipment or construction work you plan to fund with LDC funds prior to your award.*

## I. Insurance Requirements

Proof of insurance is due after award notification and prior to the release of funds. Failure to maintain the required insurance coverage during the entire grant period shall be considered a material breach of the Grant Agreement.

All grants, regardless of the award amount, must adhere to the insurance guidelines outlined in Exhibit IV: Insurance Requirements for Awarded Organizations.

## J. Grant Requirements

Once funds are awarded, grantees must:

1. follow ACDS invoicing procedures, including submittal of request for payments on organizational letterhead signed by an authorized representative with supporting back up material (timesheets, evidence of payment, invoices). Note: grant funds are disbursed on a reimbursement basis;
2. submit progress reports and a final report once the project/program is complete; and
3. schedule a monitoring visit with ACDS staff while the program/project is in progress or completed. As part of the monitoring process, the Grantee will be required to share an organization-wide financial statement or an audit conducted by an independent accountant or a financial statement prepared in a manner approved by ACDS staff.

If you would like to see a sample application or have any questions, please contact Laura Shaffer from ACDS at 410-222-3964 or [lshaffer@acdsinc.org](mailto:lshaffer@acdsinc.org).



## APPLICATION AND ATTACHMENT CHECKLIST

In order for the application to be complete, all items under the Attachment Checklist must be included in the application submitted to ACDS.

one (1) electronic copy to dsims@acdsinc.org with "FY 2021 Community Support Grant- [YOUR ORGANIZATION NAME]" in the subject line.

*Accompanying Documents to be attached with the original grant application:*

**Letter of Partnership.** Include one (1) Letter of Partnership validating the collaboration with original signature from a partnering organization, **if applicable.** (Attach as Attachment A)

**Letter of Support.** Include one (1) Letter of Support with signature from an agency, organization, community leaders and/or other entity demonstrating support and indicating there is a need for your program or project. ***This is optional, but encouraged.*** (Attach as Attachment B)

**FEDERAL tax-exempt IRS determination Letter** - Copy of most recent IRS determination letter under Section (501(c)(3) indicating evidence of tax-exempt status, if applicable. If organization is not a 501c3, please include your 1120 or 990 tax return. (Attach as Attachment C)

**Good Standing Status** - Include most recent copy of the organization's general entity information showing that it is currently in good standing with the State Department of Assessment & Taxation (SDAT). Be advised that if the organization/entity is listed as « forfeited » or not in good standing with SDAT, it cannot enter into a contract with the County until the forfeiture or lack of good standing is resolved. Refer to *Obtaining a Printout of Good Standing* instructions (Exhibit II). (Attach as Attachment D).

**Articles of Incorporation** - Include copy of Articles of Incorporation. If your organization's name has been officially changed by an amendment to your organizing instruments, you should also attach a conformed copy of the **Articles of Amendment** to your application. (Attach as Attachment E)

**Organization's By-Laws.** Include a copy. (Attach as Attachment F)

**Organization's Mission Statement.** Include the Mission Statement. (Attach as Attachment G)

**Board of Directors/Trustees List** - Include names and terms of office. (Attach as Attachment H)

**Financial Statements** - Include **previous year** Financial Audit Report or federal tax returns. If your organization has both, please submit the Financial Audit Report. (Attach as Attachment I)

**Job Description** - If you are requesting County funds for a staff position, include a Job Description for each position you are requesting support. (Attach as Attachment J)

**Conflict of Interest Policy-** Include a copy **of your organization's** written Conflict of Interest policy and procedures. (Attachment K)

**Form-W9-** Signed Request for Taxpayer-Identification Number & Certification. Complete attached Form. (Attach Attachment L) See Appendix, Exhibit III for an example.

## EXHIBIT I

### Disclosure Protection

Grantee shall adopt and maintain any and all policies and procedures necessary to provide its employees with Disclosure Protection consistent with § 6-2-107 of the Anne Arundel Code. Below are guidelines to use when preparing policies.

- (a) **Definition.** In this section, a “personnel action” means an act, a refusal to act or an omission by an appointing authority which has a significant adverse impact on the employee or a change in the employee’s responsibilities which is inconsistent with the employee’s grade and salary.
- (b) **Action by appointing authority.** Unless a disclosure is specifically prohibited by law, an employee may not be subject to a personnel action by an appointing authority as a reprisal for seeking any remedy under this section or for a disclosure to a federal, State or County official or employee, that the employee reasonably believes, in good faith, demonstrates evidence of:
  - (1) retaliation for a refusal to obey an instruction of an appointing authority or supervisor involving an illegal act or a refusal to participate in an illegal act;
  - (2) an illegal action in County government;
  - (3) an unauthorized use of County funds; or
  - (4) a substantial and specific danger to public health or safety.
- (c) **Other action authorized.** This section does not prohibit a personnel action that otherwise would have been taken regardless of the disclosure.
- (d) **Disclosures to State officers.** An employee has the same protections provided in subsection (b) of this section regarding a disclosure that is specifically prohibited by law, if the disclosure is made to the Office of the State’s Attorney, the Office of the Attorney General of Maryland, or the Office of the Maryland State Prosecutor.
- (e) **Other remedies.** This section does not preclude the aggrieved employee from seeking any legal action or other remedies available.

(Bill No. 17-11)

## EXHIBIT II

Obtaining a printout of Good Standing Status from the Maryland Department of Assessments and Taxation

Information about business entities can be found at the Maryland State Department of Assessments and Taxation ("SDAT") website.

Go to [www.dat.state.md.us](http://www.dat.state.md.us). From the center of the home page, select "Business Data Search". From the menu in the second block, select "Business Entity Information". Under "Name Search", enter the name or a part of the name of the entity. There should be no spaces between words, and you should not include the words "the" or "and". Also, do not include any "tail" such as "Inc." or "LLC". If you only search part of the name, follow the part with "%" for a wildcard search.

It will give you the entity's name, status with the SDAT, and whether the entity is in good standing with SDAT.

A paid SDAT Certificate is not required.

A printout of entity detail from the Maryland Department of Assessments and Taxation webpage indicating the organization's good standing is acceptable.

***Please note that if the entity is listed as "forfeited" or not in good standing with SDAT, it cannot enter into a contract with the County until the forfeiture or lack of good standing is resolved.***

## EXHIBIT III

### Sample Form W-9

| Form <b>W-9</b><br>(Rev. November 2017)<br>Department of the Treasury<br>Internal Revenue Service  | <h3 style="margin: 0;">Request for Taxpayer Identification Number and Certification</h3> <p style="margin: 0;">▶ Go to <a href="http://www.irs.gov/FormW9">www.irs.gov/FormW9</a> for instructions and the latest information.</p>   | Give Form to the requester. Do not send to the IRS. |  |   |  |                                      |                                       |  |  |  |  |  |   |  |  |  |  |   |  |    |  |  |  |  |  |  |  |  |                                |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |  |
|--|--|---|--|---|--|--------------------------------------|---------------------------------------|--|--|--|--|--|---|--|--|--|--|---|--|----|--|--|--|--|--|--|--|--|--------------------------------|--|--|--|--|--|--|--|--|---|---|---|---|---|---|---|---|---|--|
| <b>1</b> Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.<br><b>Community Foundation, Inc.</b>  |  |   |  |   |  |                                      |                                       |  |  |  |  |  |   |  |  |  |  |   |  |    |  |  |  |  |  |  |  |  |                                |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |  |
| <b>2</b> Business name/disregarded entity name, if different from above  |  |   |  |   |  |                                      |                                       |  |  |  |  |  |   |  |  |  |  |   |  |    |  |  |  |  |  |  |  |  |                                |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |  |
| Print or type. See Specific Instructions on page 3.  | <b>3</b> Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes. <table style="width: 100%; margin-top: 5px;"> <tr> <td><input type="checkbox"/> Individual/sole proprietor or single-member LLC</td> <td><input checked="" type="checkbox"/> C Corporation</td> <td><input type="checkbox"/> S Corporation</td> <td><input type="checkbox"/> Partnership</td> <td><input type="checkbox"/> Trust/estate</td> </tr> <tr> <td colspan="5"> <input type="checkbox"/> Limited liability company. Enter the tax classification (C-C corporation, S-S corporation, P-Partnership) ▶ _____                             </td> </tr> <tr> <td colspan="5"> <small><b>Note:</b> Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.</small> </td> </tr> <tr> <td colspan="5"> <input type="checkbox"/> Other (see instructions) ▶ _____                             </td> </tr> </table> |   | <input type="checkbox"/> Individual/sole proprietor or single-member LLC | <input checked="" type="checkbox"/> C Corporation | <input type="checkbox"/> S Corporation | <input type="checkbox"/> Partnership | <input type="checkbox"/> Trust/estate | <input type="checkbox"/> Limited liability company. Enter the tax classification (C-C corporation, S-S corporation, P-Partnership) ▶ _____ |  |  |  |  | <small><b>Note:</b> Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.</small> |  |  |  |  | <input type="checkbox"/> Other (see instructions) ▶ _____ |  |    |  |  |  |  |  |  |  |  |                                |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |  |
| <input type="checkbox"/> Individual/sole proprietor or single-member LLC   | <input checked="" type="checkbox"/> C Corporation  | <input type="checkbox"/> S Corporation              | <input type="checkbox"/> Partnership                                     | <input type="checkbox"/> Trust/estate             |  |                                      |                                       |  |  |  |  |  |   |  |  |  |  |   |  |    |  |  |  |  |  |  |  |  |                                |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |  |
| <input type="checkbox"/> Limited liability company. Enter the tax classification (C-C corporation, S-S corporation, P-Partnership) ▶ _____   |  |   |  |   |  |                                      |                                       |  |  |  |  |  |   |  |  |  |  |   |  |    |  |  |  |  |  |  |  |  |                                |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |  |
| <small><b>Note:</b> Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.</small>  |  |   |  |   |  |                                      |                                       |  |  |  |  |  |   |  |  |  |  |   |  |    |  |  |  |  |  |  |  |  |                                |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |  |
| <input type="checkbox"/> Other (see instructions) ▶ _____  |  |   |  |   |  |                                      |                                       |  |  |  |  |  |   |  |  |  |  |   |  |    |  |  |  |  |  |  |  |  |                                |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |  |
| <b>4</b> Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):<br>Exempt payee code (if any) _____<br>Exemption from FATCA reporting code (if any) _____<br><small>(Applies to accounts maintained outside the U.S.)</small>   |  | Requester's name and address (optional)             |  |   |  |                                      |                                       |  |  |  |  |  |   |  |  |  |  |   |  |    |  |  |  |  |  |  |  |  |                                |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |  |
| <b>5</b> Address (number, street, and apt. or suite no.) See instructions.<br><b>123 Main St.</b>  |  | Requester's name and address (optional)             |  |   |  |                                      |                                       |  |  |  |  |  |   |  |  |  |  |   |  |    |  |  |  |  |  |  |  |  |                                |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |  |
| <b>6</b> City, state, and ZIP code<br><b>Annapolis, MD 21401</b>   |  |   |  |   |  |                                      |                                       |  |  |  |  |  |   |  |  |  |  |   |  |    |  |  |  |  |  |  |  |  |                                |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |  |
| <b>7</b> List account number(s) here (optional)  |  |   |  |   |  |                                      |                                       |  |  |  |  |  |   |  |  |  |  |   |  |    |  |  |  |  |  |  |  |  |                                |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |  |
| <b>Part I Taxpayer Identification Number (TIN)</b><br>Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see <i>How to get a TIN</i> , later.<br><b>Note:</b> If the account is in more than one name, see the instructions for line 1. Also see <i>What Name and Number To Give the Requester</i> for guidelines on whose number to enter.   |  |   |  |   |  |                                      |                                       |  |  |  |  |  |   |  |  |  |  |   |  |    |  |  |  |  |  |  |  |  |                                |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |  |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th colspan="9" style="text-align: center;">Social security number</th> </tr> <tr> <td style="width: 25px; height: 20px;"> </td> </tr> <tr> <td colspan="9" style="text-align: center;">or</td> </tr> <tr> <th colspan="9" style="text-align: center;">Employer identification number</th> </tr> <tr> <td style="width: 25px; height: 20px;">1</td> <td style="width: 25px; height: 20px;">2</td> <td style="width: 25px; height: 20px;">3</td> <td style="width: 25px; height: 20px;">4</td> <td style="width: 25px; height: 20px;">5</td> <td style="width: 25px; height: 20px;">6</td> <td style="width: 25px; height: 20px;">7</td> <td style="width: 25px; height: 20px;">8</td> <td style="width: 25px; height: 20px;">9</td> </tr> </table> |  | Social security number                              |  |   |  |                                      |                                       |  |  |  |  |  |   |  |  |  |  |   |  | or |  |  |  |  |  |  |  |  | Employer identification number |  |  |  |  |  |  |  |  | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | Social security number<br>_____ - _____ - _____<br>or<br>Employer identification number<br>1 2 - 3 4 5 6 7 8 9 |
| Social security number   |  |   |  |   |  |                                      |                                       |  |  |  |  |  |   |  |  |  |  |   |  |    |  |  |  |  |  |  |  |  |                                |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |  |
|  |  |   |  |   |  |                                      |                                       |  |  |  |  |  |   |  |  |  |  |   |  |    |  |  |  |  |  |  |  |  |                                |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |  |
| or   |  |   |  |   |  |                                      |                                       |  |  |  |  |  |   |  |  |  |  |   |  |    |  |  |  |  |  |  |  |  |                                |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |  |
| Employer identification number   |  |   |  |   |  |                                      |                                       |  |  |  |  |  |   |  |  |  |  |   |  |    |  |  |  |  |  |  |  |  |                                |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |  |
| 1  | 2  | 3   | 4  | 5   | 6                                      | 7                                    | 8                                     | 9  |  |  |  |  |   |  |  |  |  |   |  |    |  |  |  |  |  |  |  |  |                                |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |  |
| <b>Part II Certification</b><br>Under penalties of perjury, I certify that:  |  |   |  |   |  |                                      |                                       |  |  |  |  |  |   |  |  |  |  |   |  |    |  |  |  |  |  |  |  |  |                                |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |  |
| 1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and<br>2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and<br>3. I am a U.S. citizen or other U.S. person (defined below); and<br>4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.   |  |   |  |   |  |                                      |                                       |  |  |  |  |  |   |  |  |  |  |   |  |    |  |  |  |  |  |  |  |  |                                |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |  |
| <b>Certification instructions.</b> You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.   |  |   |  |   |  |                                      |                                       |  |  |  |  |  |   |  |  |  |  |   |  |    |  |  |  |  |  |  |  |  |                                |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |  |
| <b>Sign Here</b>   | Signature of U.S. person ▶ <i>John Doe</i>   | Date ▶ 1-1-2017                                     |  |   |  |                                      |                                       |  |  |  |  |  |   |  |  |  |  |   |  |    |  |  |  |  |  |  |  |  |                                |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |  |
| <b>General Instructions</b><br>Section references are to the Internal Revenue Code unless otherwise noted.<br><b>Future developments.</b> For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to <a href="http://www.irs.gov/FormW9">www.irs.gov/FormW9</a> .  |  |   |  |   |  |                                      |                                       |  |  |  |  |  |   |  |  |  |  |   |  |    |  |  |  |  |  |  |  |  |                                |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |  |
| <b>Purpose of Form</b><br>An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.   |  |   |  |   |  |                                      |                                       |  |  |  |  |  |   |  |  |  |  |   |  |    |  |  |  |  |  |  |  |  |                                |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |  |
| <ul style="list-style-type: none"> <li>• Form 1099-DIV (dividends, including those from stocks or mutual funds)</li> <li>• Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)</li> <li>• Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)</li> <li>• Form 1099-S (proceeds from real estate transactions)</li> <li>• Form 1099-K (merchant card and third party network transactions)</li> <li>• Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)</li> <li>• Form 1099-C (canceled debt)</li> <li>• Form 1099-A (acquisition or abandonment of secured property)</li> </ul> Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.<br>If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.  |  |   |  |   |  |                                      |                                       |  |  |  |  |  |   |  |  |  |  |   |  |    |  |  |  |  |  |  |  |  |                                |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |  |

## **Exhibit IV**

### **Insurance Requirements for Awarded Organizations**

#### **FY 2023 Community Support Grants**

Grantee shall comply with the following insurance requirements governing the County Executive Community Support Grants and provide the Grant Administrator, at the time of execution of the grant agreement, with an active Certificate of Liability Insurance evidencing type of insurance, effective and expiration dates and the coverage limits. Grantee shall purchase and maintain the following insurance policies and amounts while grant agreement is in effect.

### **INSURANCE REQUIREMENTS**

**Grantee Insurance Requirements** – All Grantees must carry the following insurance coverage.

- Comprehensive General Liability - All Grantees must carry commercial general liability with minimum limits of coverage at \$1,000,000 Each Occurrence (Bodily Injury or Property Damage), \$2,000,000 General Aggregate that applies on a per project basis, \$2,000,000 Products/Completed Operations Aggregate and \$1,000,000 Per Person or Organization (Personal and Advertising Injury).

In addition, ACDS must be provided with an additional insured for number CG 20 10 11 85 or a relative equivalency for all liability policies, except for worker's compensation and automobile liability policies. Additional insured status to remain in effect for the term of the contract, including the warranty period.

- Property/Fire Insurance – All Grantees must carry property/fire insurance on any building or structure that is to be improved utilizing County funds. Insurance coverage must be in an amount not less than the value of the improvements,
- Automobile Liability Insurance – As applicable, all Grantees must carry automobile liability insurance coverage with least \$1,000,000 combined single limit coverage to include owned, non-owned and hired automobiles
- Directors and Officers Insurance – Grantees receiving County funds over \$100,000 must carry directors and officers insurance in an amount not less than One Million Dollars (\$1,000,000), and
- Workers' Compensation Insurance – As applicable, all Grantees must carry worker's compensation insurance coverage for all of its employees in compliance with the Workers' Compensation laws of the State of Maryland.

**Contractors/Consultant Insurance Requirements** – All Contractors and Consultants hired by the Grantee utilizing County funds must carry the following insurance coverage.

- Comprehensive General Liability - All Grantees must carry commercial general liability with minimum limits of coverage at \$1,000,000 Each Occurrence (Bodily Injury or Property Damage), \$2,000,000 General Aggregate that applies on a per project basis, \$2,000,000

Products/Completed Operations Aggregate and \$1,000,000 Per Person or Organization (Personal and Advertising Injury).

In addition, ACDS must be provided with an additional insured for number CG 20 10 11 85 or a relative equivalency for all liability policies, except for worker's compensation and automobile liability policies. Additional insured status to remain in effect for the term of the contract, including the warranty period.

- Property Insurance – Contractors and Consultants must carry property/fire insurance on any building or structure that is to be improved utilizing County funds. Insurance coverage must be in an amount not less than the value of the improvements,
- Automobile Liability Insurance – As applicable, all Contractors and Consultants must carry automobile liability insurance coverage with least \$1,000,000 combined single limit coverage to include owned, non-owned and hired automobiles,
- Workers' Compensation Insurance – As applicable, all Contractors and Vendors must carry worker's compensation insurance coverage for all of its employees in compliance with statutory benefits as required by the laws of the State of Maryland and employee's liability coverage with limits of at least \$100,000 each accident, \$100,000 employee disease, and \$500,000 disease policy limits,
- Builder's Risk Insurance – For all capital improvement projects over \$250,000 the Contractor or Grantee must carry builder's risk insurance in an amount equal to the value of the improvements, and
- Errors and Omission Insurance – For all capital improvement projects over \$250,000 the Consultant must carry errors and omission insurance in an amount not less than \$1,000,000.
- Umbrella Insurance – For all capital projects over \$1,000,000 the Contractor must carry umbrella insurance in an amount of not less than \$2,000,000.

## **INSURANCE CERTIFICATE AND ADDITIONAL INSURED REQUIREMENTS**

Grantee Insurance Certificates – The Grantee must furnish Arundel Community Development Services, Inc. with certificates evidencing the type, amount, class of operations and effective dates of expiration of the insurance policies except for worker's compensation and automobile policies. The insurance coverage certification shall include substantially the following statement: "The insurance covered by this certification shall not be canceled or materially altered, except after thirty (30) consecutive calendar days from when a written notice has been delivered to the Arundel Community Developments Services, Inc.", whom shall be named as an additional insured in all insurance policies except for workers compensation and automobile liability policies.

Contractor and Consultant Insurance Certificates – The Grantee must furnish ACDS with insurance certificates from all Contractors and Consultants evidencing the type, amount, class of operations and effective dates of expiration of the insurance policies except for worker's compensation and automobile policies.

## **INSURANCE WAIVER REQUEST**

A request for a waiver for not carrying a specific type of required insurance must be made on applicant's official letterhead to Arundel Community Development Services, Inc. at the time of submission of the grant application, with appropriate supporting documentation if applicable, including a description of circumstances sufficient to show why compliance is impossible. Grantee shall submit: a) certificate of insurance; and b) a letter requesting a waiver if certificate does not show evidence of a particular required insurance. Upon review/evaluation, Arundel Community Development Services, Inc. will inform the applicant of the approval or denial of a waiver request, or request additional information or documentation as necessary.

## EXHIBIT V

### GUIDELINES ON FUNDING FAITH-BASED ORGANIZATIONS & RELATED ACTIVITIES

Anne Arundel County recognizes the important role faith-based organizations play in providing human services and support to our neighborhoods and communities. Keeping this in mind, grants will not be made for religious purposes but may be made to faith-based organizations to support non-religious programs and projects offered to the broader community.

For grants that support equipment or operating costs for **programs**, the program may be located within a house of worship and/or run by a 501 C 3 organization affiliated with the house of worship, but the program benefits must be available to the wider community, including persons of all faiths and non-believers. Additionally, inherently religious activities, such as worship, religious instruction, or proselytizing, may not be part of a program or the services funded by a grant. Inherently religious activities must be offered separately, in time or location, from the programs, activities, or services supported by County funds.

For grants that support **capital projects**, funds may not be used to pay for capital equipment, construction or renovations for/to structures that serve primarily as a place of worship or where the primary use includes inherently religious activities. Funds may be used, in a proportional amount, to sustain space located within a house of worship that will be made available to the wider community, including persons of all faiths and non-believers, for uses that are not inherently religious, including, religious worship, instruction or recruitment.

Please contact ACDS staff for further guidance or examples.

## **APPENDIX VI**

### **PROCUREMENT:**

### **GRANT OR LOAN RECIPIENTS**

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A significant aspect of the Corporation's work includes the award of funds to various County organizations for the purpose of serving local community and resident needs. For the purpose of this chapter, a recipient of these public funds is defined as a private for profit or nonprofit organization which receives a grant or loan for: general operating support; specific program support; construction services; professional consultant services; supplies and other expendable property; real property; equipment; and other services.

In order to ensure a fair and open process for the procurement of goods and services, while at the same time striving to acquire the best quality at the best price, free from the potential for bias and conflict of interest, recipient of public funds must adhere to their own established procurement policies or follow the ACDS Procurement Policies and Procedures to ensure purchases of all goods and services in a cost-effective manner, as well as in compliance with all applicable federal, State, and local government laws and regulations.

Recipients of public funds must establish and maintain effective internal controls to provide reasonable assurance that the recipient is managing the funds in compliance with federal, State and local laws and regulations. Recipients are required to adhere to the following general standards.

1. Costs incurred must be considered necessary and cost effective.
2. Procurement transactions must provide for full and open competition.
3. Written standards of conduct covering conflict of interest must be maintained and provided to ACDS.
4. The recipient must maintain documentation supporting a cost and price analysis, as well as vendor selection.
5. The recipient should select vendors carefully, using vendors who are responsible, and have a proven track record of integrity, compliance with public policy, and successful past performance.
6. Recipients must take steps to use minority or women owned business when possible.
7. The recipient must make procurement documentation available to ACDS when requested.

### **PROCUREMENT REQUIREMENTS AND CONSIDERATIONS**

All procurement transactions shall be conducted in a manner to provide, to the maximum extent practical, open and free competition. No officer, director, volunteer or agent of the recipient shall participate in the selection, award, or administration of a bid or contract if a conflict of interest is real or apparent to a reasonable person. All procurement

transactions are to be conducted in a manner that maximizes local opportunities, obtains the highest quality for the lowest cost of purchase.

Some form of cost or price analysis shall be made and documented. Price analysis may be accomplished in various ways, including the comparison of price quotations submitted and market prices, together with discounts. Contracts shall be made only with responsible vendors who possess the potential ability to perform successfully under the terms and conditions of the proposed procurement. Consideration shall be given to such matters as qualifications, experience, integrity, record of past performance, financial and technical resources or accessibility to other necessary resources.

### ***TOTAL PURCHASE COST LESS THAN \$2,500***

When purchasing equipment, supplies or services for \$2,500 or less, efforts will be made to get the lowest price for the best quality. A formal bid process is not required, and items may be purchased in an informal manner. Supplies may be replenished on a consistent basis using comparative product and pricing selection analysis and a separate procurement does not need to be conducted each time a purchase is made. Documentation of the purchase and price comparisons shall be maintained. Examples of documentation may include written notes that quotes were obtained over the phone, via email, or via online pricing. Subrecipients should document what quality factors were taken into account when comparing prices. For example, when purchasing food, factors such as nutrition and sodium content should be taken into account.

### ***PURCHASE COST GREATER THAN \$2,500 BUT LESS THAN \$25,000***

When purchasing equipment, supplies or services greater than \$2,000 but less than \$25,000, contact with an adequate number of vendors in an effort to obtain written estimates from at least two vendors shall be required. Written estimates may include online screenshots of existing online pricing or written responses via email. The recipient must document the process followed, the responses received and the rationale for choosing a certain offeror. If only one response has been received after efforts are made to solicit responses from a number of offerors, written documentation of the efforts made and the rationale for moving forward with the responsive vendor(s) shall be maintained.

### ***PURCHASE COST GREATER THAN \$25,000 BUT LESS THAN \$100,000***

#### *Equipment and Supplies*

When purchasing equipment or supplies which cost greater than \$25,000, a solicitation that encourages competition and the purchase of the best quality at the best price shall be required. The recipient must prepare a written description of the requirements for the material or product it desires to purchase; all requirements the offerors must fulfill; and all other factors to be used in evaluating bids or proposals that will be provided to prospective bidders. The recipient must solicit written responses from at least three vendors. Positive efforts will be made to utilize minority-owned businesses, women-owned businesses, and locally owned enterprises. If fewer than three vendors respond to the solicitation(s), the efforts made and rationale for moving forward with the responsive vendor(s) will be documented. Purchases may not be divided to circumvent this dollar amount threshold.

#### *Construction Services*

For procurement of non-residential construction contractors for projects over \$25,000 but under \$100,000, the recipient may follow procurement procedures which are relatively simple and informal. When these procurement procedures are used, price or rate quotations will be obtained from an adequate number of qualified sources. Responses to the solicitation shall be in the form of a sealed lump sum or unit price proposal. Award of the contract shall be to the responsible responder whose bid, conforming to all the material terms and conditions of the invitation for bids, is the lowest in price. All procurement transactions shall be conducted in a manner to provide, to the maximum extent practical, open and free competition. Positive efforts will be made to utilize minority-owned businesses, women-owned businesses, and locally owned enterprises.

#### *Consultant and Other Services*

For procurement of consultants and other services contracts over \$25,000 but under \$100,000, recipients shall solicit the services through a competitive procurement process. A solicitation will be prepared containing a statement of work, details regarding qualification requirements and the selection criteria. The consultant shall be procured in a manner which provides competitive proposal procedures for qualification and cost based procurement whereby competitors' qualifications are evaluated and the contract award is made to the firm considered to be the most advantageous to the recipient, subject to fair and reasonable compensation. Under competitive procurement, geographic preference may be used if adequate competition (i.e., two or more offerors who are responsive and responsible) exists within an area. Positive efforts will be made to utilize minority-owned businesses, women-owned businesses, and locally owned enterprises.

## **CONSULTANT, CONSTRUCTION AND OTHER SERVICES OVER \$100,000**

Recipient to follow all procurement guidelines described above in the *Purchase Cost Greater than \$25,000 but less than \$100,000 section*. In addition, the solicitation must be publicly advertised, at minimum, in a local or regional newspaper or internet posting. In addition, an offeror's list is to be generated for the project from an adequate number of known consultants located in or near Anne Arundel County. Opportunities for contracting in connection with the project shall also be given to local MBEs/WBEs through a notification to local MBE/WBE firms listed in the MDOT Minority Business Enterprise/Disadvantaged Business Enterprise. Offerors shall be provided sufficient time prior to the date set for opening the bids for reviewing the requirements of the project and preparing a proposal.

## **SOLE SOURCE CONTRACTS**

Solicitation from a sole source may only be used if one or more of the following criteria is met: (1) the service or good provided is unique and/or (2) ACDS pre-authorizes it due to an emergency need. The basis for considering and selecting the vendor must be documented.